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Department of the Treasury

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

Do not enter Social Security numbers on this form as it may be made public.

2013 Open to Public

OMB No 1545-0047

▶ Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection For the 2013 calendar year, or tax year beginning and ending C Name of organization Youth With A Mission -Employer identification number Check if applicable El Paso/Juarez Address change Doing Business As 74-2238973 Name change Number and street (or P O box if mail is not delivered to street address) Telephone number Initial return 915-757-3387 4444 Edgar Park Ave Terminated City or town, state or province, country, and ZIP or foreign postal code El Paso 79904 2,550,024 Amended return G Gross receipts \$ Name and address of principal officer Application pending H(a) Is this a group return for subordinates? Mary Beth Maifeld 4444 Edgar Park Ave H(b) Are all subordinates included? If "No," attach a list (see instructions) El Paso 79904 X 501(c)(3) 501(c) Tax-exempt status (insert no ) 4947(a)(1) or 527 www.ywamepj.org Website. H(c) Group exemption number ▶ X Corporation Trust Year of formation 1981 M State of legal domicile TX Form of organization Part I Summary 1 Briefly describe the organization's mission or most significant activities: Christian Outreach Activities & Governance 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) 4 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 4 5 210 6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year **Current Year** 8 Contributions and grants (PartVIII, line 1h) 1,743,621 2,129,010 9 Program service revenue (Part Vitaline 2g) 145,537 421,014 10 Investmentlincome (Rart VIII Acolumn (A), lines 3, 4, and 7d) -200 11 Other revenue (Part VIII, column (4), lines 5, 6d, 8c, 9c, 10c, and 11e) -15,395 1,889,158 12 Total revenue -- add-lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,534,429 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 10,773 912,603 14 Benefits paid to or for members (Part IX, column (A), line 4) 34,119 52,575 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 17,691 **b** Total fundraising expenses (Part IX, column (D), line 25) 1,648,612 1,564,534 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,693,504 2,529,712 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 195,654 4,717 19 Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year End of Year 1,004,057 442,219 20 Total assets (Part X, line 16) 10,767 21 Total liabilities (Part X, line 26) 6,468 22 Net assets or fund balances Subtract line 21 from line 20 993,290 435,751 Part II Signature Block Under penalties of perjury, I declare that I have examined this rejurn, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of prepare (other than officer) sased on all information of which preparer has any knowledge Sign Beth Here President Type or print name and title

Preparer's signature Print/Type preparer's name Eris M. Lath CA Paid 10/28/14 self-employed Erin M. Rath, CPA P01067454 Preparer Cornell Accounting Firm's EIN ▶ 94-2164661 1101 College Ave # **Use Only** Santa Rosa, CA 95404-3952 707-544-2390 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2013)

Check if Schedule O contains a response or note to any line in this Part III    Delty describe the origination masser:		3) Youth With A Mis		74-2238973	<del></del>	Page <b>2</b>						
1 Briefly describe the organization's meason:  Christian Outreach  2 Did the organization undertake any significant program services during the year which were not tisted on the prior Form 990 or 990-E27  If Yes, "describe these news acrosso on Schedule O  3 Did the organization cease conducting, or make significant changes in how it conducts, any program services, as measured by expenses Section 50(r(s)) and 50(r(s)) 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 \$ 2,383,318 including grants of \$ 912,603 ) (Revenue \$ 420,814)  Rancho Los Amigos, Children's Home Located in Juarez, Mexico, Care for Needy Children, Training Schools for Missionaries, Teaching Citizens the English Language, Humanitarian Aid, Missionary Support.  4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4d Other program services, (Describe in Schedule O.) (Revenue \$ ) (Revenue \$ )	Part III	<del>_</del>										
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# Form 990 (2013) Youth With A Mission Part IV Checklist of Required Schedules

				T
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	Γ	Yes	No
•	complete Schedule A	1 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		х
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		х
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		х
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			
а	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
С				
	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			<b>.</b>
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	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	446		•
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	42-		<sub>V</sub>
L	Schedule D, Parts XI and XII	12a		X
D	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	126		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	- H - 0.0 000 f	170		<u> </u>
J	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	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	142		
	for any foreign organization? 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 other			
	assistance to or for foreign individuals? 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		<u>x</u> _
20a	and the state of t	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form	990 (2013) Youth With A Mission - 74-2238973		P	age 4
Pa	art IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21	<u> </u>	X
22	Did the organization report more than \$5,000 of grants or 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	Ļ.,	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	ļ	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			1
	through 24d and complete Schedule K. If "No," go to line 25a	24a	<u> </u>	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	L	<u> </u>
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	<u> </u>	<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u>L</u>	
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	<u> </u>	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	1		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	į		
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26	<u> </u>	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	<u> </u>	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):		1	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		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			1

- 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M
- 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I
- 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II
- 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
- 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
- 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
- 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
- **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2
- 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
- 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

Form 990 (2013)

X

X

X

X

X

X

31

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35a

35b

36

37

Check if Schedule O contains a response or note to any line in  1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vereportable gaming (gambling) winnings to prize winners?  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 retit  b If at least one is reported on line 2a, did the organization file all required federal employing  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see  3a Did the organization have unrelated business gross income of \$1,000 or more during the  b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation  4a At any time during the calendar year, did the organization have an interest in, or a signate over, a financial account in a foreign country (such as a bank account, securities account account)?  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 at Was the organization a party to a prohibited tax shelter transaction at any time during the Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the Did any taxable party notify the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,0	nce		$\Box$
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<ul> <li>b Did any taxable party notify the organization that it was or is a party to a prohibited tax s</li> <li>c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> <li>6a Does the organization have annual gross receipts that are normally greater than \$100,0</li> </ul>	and Financial Accounts.		
<ul> <li>c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> <li>6a Does the organization have annual gross receipts that are normally greater than \$100,0</li> </ul>	ne tax year? 5a		X
6a Does the organization have annual gross receipts that are normally greater than \$100,0	helter transaction? 5b		X
	5c		
announce the contract of the c	00, and did the		
organization solicit any contributions that were not tax deductible as chantable contribut	ions? 6a		X
b If "Yes," did the organization include with every solicitation an express statement that su	ich 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 a	1 1	1	<b>3</b> 2
and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provide	I I		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property f required to file Form 8282?	or which it was		х
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 person		Ì	x
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal	<del> </del>		X
g If the organization received a contribution of qualified intellectual property, did the organ	<del> </del>		X
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did	·		X
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
organizations. Did the supporting organization, or a donor advised fund maintained by	1		
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>b</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>b</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 i	1 1		
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.	10-1		
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
<ul> <li>Note. See the instructions for additional information the organization must report on Sch</li> <li>b Enter the amount of reserves the organization is required to maintain by the states in wh</li> </ul>	I 1		
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	<del></del>	$\dashv$	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation	<del></del>		

Form 990 (2013) Youth With A Mission -74-2238973 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management 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 4 Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, Х stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 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 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 X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a 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 X 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a b If "Yes." did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ None 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 X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 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 > MARY BETH MAIFELD 4444 EDGAR PARK AVE EL PASO TX 79904 915-757-3387

2067 10/28/2014 9	58 AM		
Form 990 (20	on Youth With A Mission -	74-2238973	Page 7
Part VII	Compensation of Officers, Directors, Trustees	Key Employees, Highest Compensated	Employees, and
	Independent Contractors	_	
	Check if Schedule O contains a response or note		
Section A.	Officers, Directors, Trustees, Key Employees, and Highes	t Compensated Employees	
1a Complete organization's	this table for all persons required to be listed. Report compensate tax year.	ion for the calendar year ending with or within the	
-	of the organization's <b>current</b> officers, directors, trustees (whethen n Enter -0- in columns (D), (E), and (F) if no compensation was p	,, ,	of

- 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	bo: off	Position (do not check more the box, unless person is officer and a director.)				an	(D)  Reportable compensation from the	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Mary Beth Maifel										
	40.00									
President	0.00	X		X				50,457	0	0
(2) Gwen Conrad										
	40.00	l								
Board Member	0.00	X			_	Ш		33,303	0	0
(3) Ty Thurman										
	40.00	l								
Board Member	0.00	X	-			$\sqcup$		30,490	. 0	0
(4) John Allegretto										
	1.00									
Secretary Defeable	0.00	X		X	<u> </u>	<b>↓</b>		0	0	0
(5) Robert Pofahl	1.00					ا ا				
Treasurer	0.00	x		x				o	o	
(6) Bill Francis	0.00	<del>  ↑</del>	├	^	-	╁		<u> </u>		0
(6) BIII FIANCIS	1.00									
Board Member	0.00	x						l	O	0
(7) Rick Allegretto	0.00	<u> </u>				$\vdash$		<u> </u>		
(/) RICK HITEGICCO	1.00									
Board Member	0.00	x						l	o	0
(8)	- 0000							. •		
(9)					_					
(10)										
(11)				-						
DAA			<u> </u>	L_	L_			L	L <u></u> _	000

Pa	rt VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)				
	(A) Name and title	(B) Average hours per week (list any hours for	bo off	x, unle icer a	Pos theck ess pe nd a d	rson i	than o	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	an	(F) stimated mount of other opensation the	f ion	
		related organizations below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		an	ganizatio id relate anizatio	d	
(12)														
(13)	· · · · · · · · · · · · · · · · · · ·													
(14)	<del>, , , , , , , , , , , , , , , , , , , </del>													
(15)														
(16)														
(17)												-		
(18)												_	<del></del>	
(19)														
1b c	Sub-total Total from continuation she	ets to Part VII,	 Sect	ion A	<u> </u>	<u> </u>	<u> </u>	<b>&gt;</b>	114,250					
<u>d</u> 2	Total (add lines 1b and 1c)  Total number of individuals (ir reportable compensation from				thos	e lıs	ted a	bov	114,250 re) who received more than	\$100,000 in				
3	Did the organization list any for employee on line 1a? If "Yes,"	ormer officer, dir	ecto	r, or					loyee, or highest compensa	ited		3	es	No X
4	For any individual listed on lin organization and related organization	e 1a, is the sum	of re	port	able	com	pens	satio				4		×
5	Did any person listed on line for services rendered to the oil ion B. Independent Contractor	rganization? If "\								ındıvıdual		5		X
1	Complete this table for your fi compensation from the organ	ve highest comp							dar year ending with or with	iin the organization's tax ye	ar			
	Name and	(A) I business address							Descrip	(B) tion of services	_	Com	(C) pensatio	n
													_	
					,							_		
	Total number of independent	contractors (incl	udine	a hut	not	lımıt	ed to	the	se listed above) who					
DAA	received more than \$100,000									0		Form	990	(2013

Pa	rt V		Revenue	ntains a	response of	r note to any line ir	n this Part VIII		
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns	1a				Tevende		312-314
Sa	b	Membership dues	1b						
A,	С	Fundraising events	1c		104,561				
을 를	d	Related organizations	<u>1d</u>	<b>.</b>					
Si.	e	Government grants (contributions)	<u>1e</u>						İ
Program Service Revenue Contributions, Gifts, Grants	f	All other contributions, gifts, grants, and similar amounts not included all		2	,024,449				
ontr od C	g	Noncash contributions included in li	ines 1a-1f	\$		0 100 010	1		
S E	<u>h</u>	Total. Add lines 1a-1f			P.	2,129,010			
ů	_				Busn. Code	212 517	212 517		
Se e	2a	Fees Other YWAM		come	<del></del>	213,517	213,517		
ė	b	Program Svc Rev	•		<del></del>	207,497	207,497		
١	C								
Sc	đ								
<u>ra</u>	е								<del> </del>
õ	t	All other program service	e revenue		L	421 014			
_	_ 9					421,014	T		
	3	Investment income (inclu	_	enas, inter	est,				
		and other similar amount	•						
	4	Income from investment	or tax-exe	mpt bona	proceeds	+		<del></del>	
	5	Royalties		T	Daniel I				
			Real	(11)	Personal				
	6a	Gross rents							
	b	Less rental exps		<del>-</del>					
	C	Rental inc or (loss)							
	d   7a	Net rental income or (los			<b>&gt;</b>			······································	
	'-	sales of assets	cunties		u) Other				
		other than inventory		-			1		
	b	Less cost or other		1	200				
		basis & sales exps		<del></del>	200				
		Gain or (loss)			-200	200	200		
		Net gain or (loss)			<b>•</b>	-200	-200		
e	8a	Gross income from fundraising							
Je J		` •	04,561	·					
é		of contributions reported on I							
Other Revenue	١.	See Part IV, line 18		a	15 205				
ğ	ŀ	Less: direct expenses		b	15,395	15 305			
		Net income or (loss) from		ng events	•	-15,395			
	9a	Gross income from gaming a			ļ				
	Ι.	See Part IV, line 19		a					
	ı	Less direct expenses		ь[			1		
		Net income or (loss) from		Civities					
	10a	Gross sales of inventory,							
	Ι.	returns and allowances		a					
	ı	Less cost of goods sold		b			İ		
	<u> </u>	Net income or (loss) from		inventory	1 2000 2004				
	-	Miscellaneous Re	venue	<del></del>	Busn. Code	1	1		
	11a				<del>                                     </del>				<del> </del>
	b				<del>                                     </del>				<del> </del>
	C	A.11 .11			<b></b>				<del> </del>
		All other revenue							
		Total. Add lines 11a-11d				2,534,429	420,814	0	0
	12	Total revenue. See insti	ructions.			4,334,449	420,014	U	1 0

#### Part IX Statement of Functional Expenses

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

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

Check if Schedule O contains a respon-	<del></del>		10)	
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
Grants and other assistance to governments and		["		· · · · · · · · · · · · · · · · · · ·
organizations in the U.S. See Part IV, line 21	4,300	4,300		
2 Grants and other assistance to individuals in				······
the U.S. See Part IV, line 22				
3 Grants and other assistance to governments,				······································
organizations, and individuals outside the				
U S See Part IV, lines 15 and 16	908,303	908,303		
4 Benefits paid to or for members				
5 Compensation of current officers, directors,				
trustees, and key employees				
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)			ľ	
7 Other salaries and wages	48,839		48,839	
Pension plan accruals and contributions (include	20,000			
section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	3,736		3,736	
11 Fees for services (non-employees)				
a Management				
b Legal	<del></del>			
, · · .	15,704		15,704	
d Lobbying	13,701		25//01	
e Professional fundraising services See Part IV, line 17				
f Investment management fees		1		
				· · · · · · · · ·
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	10,124	8,276	924	924
12 Advertising and promotion	3,982	3,186	398	398
13 Office expenses	40,871	15,203	21,853	3,815
·	3,099	1,239	1,550	310
14 Information technology	3,033	1,233	1,550	
15 Royalties	39,016	20,506	17,509	1,001
16 Occupancy	61,527	39,827	10,850	10,850
17 Travel	01,327	33,621	10,830	10,630
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	3,932	1,966	1,573	393
19 Conferences, conventions, and meetings	3,932	1,900	1,575	393
20 Interest				
21 Payments to affiliates	10,628	5,314	5,314	
22 Depreciation, depletion, and amortization	4,531	4,078	453	
23 Insurance	4,331	4,0/8	400	
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 )	1 206 022	1 206 020		
a Missionary Support	1,306,922	1,306,922		<del></del>
b Program Food Expense	31,715	31,715	<del></del>	<del></del>
c Program- Supplies	15,041	15,041		
d Program Gifts Expense	12,642	12,642		
e All other expenses	4,800	4,800	100 700	
25 Total functional expenses. Add lines 1 through 24e	2,529,712	2,383,318	128,703	17,691
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   following SOP 98-2 (ASC 958-720)				
DAA TOILOWING SOP 96-2 (ASC 956-720)				Form 990 (201)

Form 990 (2013)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 306,632 298,795 Cash-non-interest bearing 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 12,672 21,740 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 Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 367,507 other basis Complete Part VI of Schedule D 10a b Less. accumulated depreciation 10b 684,753 10c 115,094 11 Investments—publicly traded securities 11 12 Investments—other securities See Part IV, line 11 12 Investments—program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 6,590 1,004,057 442,219 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 10,767 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 10,767 Total liabilities. Add lines 17 through 25 26 6,468 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 993,290 435,751 Unrestricted net assets 27 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 993,290 435,751 Total net assets or fund balances 1,004,057 442,219 Total liabilities and net assets/fund balances

Form 990 (2013)

Form	990 (2013) Youth With A Mission - 74-2238	973		Pag	ge <b>12</b>
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				_X_
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,5	34,	<u>429</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,5		
3	Revenue less expenses. Subtract line 2 from line 1	3		4,	<u>717</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9	93,	<u> 290</u>
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			795
9	Other changes in net assets or fund balances (explain in Schedule O)	9	- 5	61,	461
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	4	35,	<u>751</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	ight			
	of the audit, review, or compilation of its financial statements and selection of an independent account	ntant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain	ıın ın			
	Schedule O				Ì
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	ıın			
	the Single Audit Act and OMB Circular A-133?		3a		
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 au	dite	3h	1	

SCHEDULE A (Form 990 or 990-EZ) **Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013 Open to Public

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Youth With A Mission -

El Paso/Juarez

Employer identification number 74 – 2238973

The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 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). 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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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) An organization organized and operated exclusively to test for public safety See section 509(a)(4). 10 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 c Type III-Functionally integrated d Type III-Non-functionally integrated a Type I b Type II 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). 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes 11g(i) (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (iv) is the organization (v) Did you notify (vi) Is the (vu) Amount of monetary (i) Name of supported (ii) EIN (iii) Type of organization the organization in (described on lines 1-9 in col (i) listed in your rganization in col support organization col (I) of your (i) organized in the above or IRC section governing document? US? support? (see instructions)) Yes No Yes No Yes (A) (B) (C) (D) (E)

For Paperwork Reduction Act Notice, see the Instructions for

Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

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.)

Sec	tion A. Public Support							
Caler	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 201	3	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			1,682,981	1,743,621	2,129	,010	5,555,612
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				-			
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3			1,682,981	1,743,621	2,129	,010	5,555,612
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							5,555,612
	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in) <b>&gt;</b>	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 201	3	(f) Total
7	Amounts from line 4			1,682,981	1,743,621	2,129	,010	5,555,612
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					<del></del>		
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)							
11	Total support. Add lines 7 through 10							5,555,612
12	Gross receipts from related activities, etc	(see instructions)					12	647,483
13	First five years. If the Form 990 is for the	organization's first	t, second, third, fo	ourth, or fifth tax yea	r as a section 501	(c)(3)		_
	organization, check this box and stop her							<b>&gt;</b>
Sec	tion C. Computation of Public Su	upport Percent	tage					
14	Public support percentage for 2013 (line 6	• • •	•	nn (f))			14	100.00%
15	Public support percentage from 2012 Sch						15	%_
16a	33 1/3% support test—2013. If the organ				3 1/3% or more, c	heck this		<b>⊾</b> (च#)
	box and stop here. The organization qual		• •					<b>▶ X</b>
b	33 1/3% support test—2012. If the organ				5 is 33 1/3% or mo	ore,		<b>.</b> —
4-	check this box and stop here. The organization				401	44		▶ □
1/a	10%-facts-and-circumstances test—201							
	10% or more, and if the organization meet Part IV how the organization meets the "fa				•			
	· ·	icts-and-circumsta	nces test the or	ganization qualifies	as a publicly supp	onea		<b>⊾</b> □
h	organization 10%-facts-and-circumstances test—201	12 If the organizati	on did not check	a hov on line 13 16	a 16b or 17a and	d line		
U	15 is 10% or more, and if the organization	-						
	Explain in Part IV how the organization me				-			
	supported organization	, oto the lacts-allu-	Sirvernistantes (	oo. The organizatio	quannes as a pu			▶ □
18	Private foundation. If the organization die	d not check a box of	on line 13. 16a 16	6b. 17a. or 17b. che	ck this box and se	e		<b>-</b> U
	instructions			,,, 5110				▶ []

### 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.)

<u> </u>	tion A Public Support	quality under ti	ne tests listed t	below, please o	complete Part I	1.)	
	tion A. Public Support ndar year (or fiscal year beginning in) ▶	(-) 0000	(h) 0040	1-2 0044	(4) 2012	(a) 2012	(D.Tatal
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual"	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
2	grants ")  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)						
	tion B. Total Support		·				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(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 firs	t. second. third. fo	ourth, or fifth tax ve	ar as a section 50	1(c)(3)	
	organization, check this box and stop her	_	.,,	,			▶ □
Sec	tion C. Computation of Public Su	upport Percen	tage				
15	Public support percentage for 2013 (line 8	3, column (f) divide	d by line 13, colum	nn (f))		15	%
16	Public support percentage from 2012 Sch					16	%
Sec	tion D. Computation of Investme	ent Income Pe	rcentage				
17	Investment income percentage for 2013 (I	line 10c, column (f	divided by line 13	3, column (f))		17	%
18	Investment income percentage from 2012	Schedule A, Part	III, line 17			18	<u>%</u>
19a	33 1/3% support tests—2013. If the orga						_
	17 is not more than 33 1/3%, check this b						▶ ∐
b	33 1/3% support tests—2012. If the orga						, n
	line 18 is not more than 33 1/3%, check the						₹  -
20	Private foundation. If the organization di	a not check a box	on line 14, 19a, or	r 196, check this be	ox and see instruc	tions	

#### **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.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

	of the organization	Employer identification number			
	outh With A Mission - l Paso/Juarez		74-2238973		
	art I Organizations Maintaining Donor Advised Fu				
- +	Complete if the organization answered "Yes" to F			<del></del>	
		(a) Donor advised funds	(1	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 tha	t the assets held in donor advised			
	funds are the organization's property, subject to the organization's excl	usive 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 chantable purposes and not for the benefit of the donor or donor	or advisor, or for any other purpose			
	conferring impermissible private benefit?			Yes No	
Pa	art II Conservation Easements.	Sama 000 Bad IV las 7			
	Complete if the organization answered "Yes" to F				
1	Purpose(s) of conservation easements held by the organization (check				
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically imp			
	Protection of natural habitat	Preservation of a certified historic	structure	•	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a conser	·		
	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	· · ·		2b	<del></del>	
C	Number of conservation easements on a certified historic structure incl	, ,	2c		
đ	Number of conservation easements included in (c) acquired after 8/17/	ا م			
•	historic structure listed in the National Register	ting uphed or terminated by the argentact	2d	n tha	
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organizati	on auring	g me	
4	tax year ▶  Number of states where property subject to conservation easement is	located >			
-	Does the organization have a written policy regarding the periodic mon				
5	violations, and enforcement of the conservation easements it holds?	normy, inspection, nariding or		☐ Yes ☐ No	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcement	cing conservation easements during the ve	ar		
·		sing contact values each incline adming the ye	· <b>-</b> .		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	conservation easements during the year			
•	<b>&gt;</b> \$	,			
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 easem	ents in its revenue and expense statement	t, and		
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that de	escribes	the	
	organization's accounting for conservation easements				
Pa	art III Organizations Maintaining Collections of Art,		imilar	Assets.	
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line 8.			
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), n	ot to report in its revenue statement and b	alance s	heet	
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	rance of		
	public service, provide, in Part XIII, the text of the footnote to its finance				
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to	•			
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	rance 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		. ▶	<b>\$</b>	
2	If the organization received or held works of art, historical treasures, or	-	vide the		
	following amounts required to be reported under SFAS 116 (ASC 958)	relating to these items	_	_	
а	, ,			• <b>\$</b>	
b	Assets included in Form 990, Part X		•	· \$	

4 -	2	~	2	O	0	7	2	
4 -	1.	1.	- 5	×	ч	•	- 5	

Page 2

	ation's acquisition, accessicheck all that apply)	on, and other record	ds, check any	of the foll	owing that are	a significant us	se of its			
a Public exhibit		d□	Loan or excl	hange prod	grams					
b Scholarly res		e 🗌	Other	J	,					
F '	for future generations									
LJ	otion of the organization's co	ollections and explai	n how they fo	urther the o	organization's e	exempt purpose	e in Part			
	did the organization solicit o	r receive donations	of art histori	ıcal treasur	es or other sir	nılar				
• •	to raise funds rather than to					···········		Ye	s	No
	ow and Custodial Arr		part or the or	gamzanon	2 00110011011					<u>,</u>
Comp	plete if the organization Part X, line 21.		s" to Form	990, Par	t IV, line 9, o	or reported a	an amount o	n Form		
	on an agent, trustee, custod	an or other intermed	diary for cont	ributions o	r other assets	not				
included on Form	1 990, Part X?		-					Ye	s 🗌	No
b if "Yes," explain t	he arrangement in Part XIII	and complete the fo	ollowing table	•						
•	-							Amount	i	
c Beginning balance	ce						1c			
d Additions during	the year						1d			
e Distributions duri	ng the year						1e			
f Ending balance							1f			
2a Did the organization	tion include an amount on F	orm 990, Part X, line	e 21?					Ye	s 📗	No
b If "Yes," explain t	he arrangement in Part XIII	Check here if the e	explanation h	as been pr	ovided in Part	XIII				<u> </u>
Part V Endo	wment Funds.									
Comp	olete if the organization	n answered "Yes	to Form	<u>990, Par</u>	<u>t IV, line 10.</u>			<del>-,</del>		
		(a) Current year	(b) Pn	or year	(c) Two years	back (d) T	hree years back	(e) Four	years	back
1a Beginning of year	r balance									
<b>b</b> Contributions	L									
c Net investment e	earnings, gains, and									
losses										
d Grants or schola	rships									
e Other expenditur	es for facilities and									
programs										
f Administrative ex	(penses									
g End of year bala	nce									
2 Provide the estin	nated percentage of the cur	rent year end baland	ce (line 1g, c	olumn (a))	held as:					
a Board designate	d or quasi-endowment 🕨	%								
<b>b</b> Permanent endo	wment ▶ %									
c Temporarily rest	ricted endowment	%								
The percentages	in lines 2a, 2b, and 2c sho	uld equal 100%								
3a Are there endow	ment funds not in the posse	ssion of the organiz	ation that are	e held and	administered f	or the				
organization by									Yes	No
(i) unrelated or	ganizations							3a(i)		<u> </u>
(ii) related organ	nizations							3a(ii)		
b If "Yes" to 3a(II),	are the related organization	s listed as required	on Schedule	: R?				3b		
4 Describe in Part	XIII the intended uses of the	e organization's end	lowment fund	ds						
	, Buildings, and Equ							_		
Com	plete if the organization	n answered "Yes	s" to Form	990, Par	t IV, line 11	a See Form	1 990, Part )	<mark>&lt;, line 1</mark> (	<u>)                                    </u>	
Descri	ption of property	(a) Cost or other	basis	(b) Cost or o	other basis	(c) Accumula	ited	(d) Book	value	
		(investment	1)	(oth	er)	depreciatio	on			_
1a Land					46,829				16,	829
<b>b</b> Buildings				•	8,835		1,693		7,	142
c Leasehold impro	vements									
d Equipment					3,330		1,776		1,	554
e Other				3	08,513	248	3,944		59,	569
	ough 1e (Column (d) must	equal Form 990, Pa	ırt X, column	(B), line 10	O(c) )		•	1.	15,	094
							Sched	dule D (Fo		

Part VII	Investments—Other Securities.  Complete if the organization answered "Yes	s" to Form 990. Part IV. line	11b. See Form 990. Pa	art X. line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-year	valuation
(1) Financial	derivatives			
(2) Closely-h	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				_
(E)				
(F)				<u> </u>
(G)				
(H)				
	nn (b) must equal Form 990, Part X, col (B) line 12 ) ► Investments—Program Related.			
rantym	Complete if the organization answered "Yes	" to Form 990 Part IV line	11c See Form 990 Pa	art X line 13
	(a) Description of investment	(b) Book value	(c) Method of Cost or end-of-yea	valuation
(1)				
(2)	· · · · · · · · · · · · · · · · · · ·			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 13 ) 🕨			
Part IX	Other Assets.			
	Complete if the organization answered "Yes		11d See Form 990, Pa	art X, line 15 (b) Book value
(4)	(a) Description			(b) Book valoe
(1)			<del></del>	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(1)			
Part X	nn (b) must equal Form 990, Part X, col (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes line 25.	s" to Form 990, Part IV, line	11e or 11f. See Form	990, Part X,
1.	(a) Description of liability	(b) Book value		
	il income taxes			
(2)	in moonie taxes			
(3)				
<u>(4)</u> (5)		-		
			İ	
(6)			1	
(7)			1	
(8)				
(9)	no (h) must equal Form 000. Bord V and (D) line 25 \ \			
	nn (b) must equal Form 990, Part X, col (B) line 25 ) ▶ or uncertain tax positions. In Part XIII, provide the text of t	he footnote to the organization's f	Iinancial statements that repo	rts the
	s liability for uncertain tax positions under FIN 48 (ASC 7			

Part XIII Supplemental Information

b Other (Describe in Part XIII.)c Add lines 4a and 4b

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

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

5

#### **SCHEDULE F** (Form 990)

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Part I

Youth With A Mission -

Employer identification number 74-2238973

El Paso/Juarez

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

For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

X Yes No

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region	
North Amer	lca - Mexico					
(1)			Mission for Children	Christian Outreach	1,061,429	
Central Am	rica - Nicar	-				
(2)			Mission for Children	Feeding Children	22,648	
Central Am	erican - Hait					
(3)		_	Ministry	Christian Outreach	2,352	
Central Am	erica - Nicar	l <del>-</del>				
(4)			Ministry	Christian Outreach	8,566	
Central Ame	rica- Costa :					
(5)			Ministry	Christian Outreach	26,454	
Central Am	rica- Guatem					
(6)		1	Ministry	Christian Outreach	8,178	
North Amer:	ica-Canada					
(7)			Ministry	Christian Outreach	954	
South Amer:	ca-Brazil			1		
(8)			Ministry	Christian Outreach	8,237	
Sub Sahara	ı Africa- Sou					
(9)		4	Ministry	Christian Outreach	3,791	
East Asia	and the Pacif	ic- China				
(10)		1	Ministry	Christian Outreach	18,363	
East Asia	and the Pacif	c- Hong Kong				
(11)		7	Ministry	Christian Outreach	13,127	
East Asia	and the Pacif	ic- New Zeala	nd			
(12)		1	Ministry	Christian Outreach	6,129	
East Asia	and the Pacif	ic- Australia				
(13)		8	Ministry	Christian Outreach	20,980	
East Asia	and the Pacif	ic- Japan		·		
(14)		] 1	Ministry	Christian Outreach	10,454	
	and the Pacif	ic- Phillippi	nes			
(15)		2	Ministry	Christian Outreach	46,396	
Europe- Fra	ance		-			
(16)		3	Ministry	Christian Outreach	12,883	
Europe - Eng	land					
(17)			Ministry	Christian Outreach	1,200	
3a Sub-total		128			1,272,141	
<b>b</b> Total from continuation						
sheets to Part I			f	1		
c Totals (add	· · · · · · · · · · · · · · · · · · ·			<u> </u>		
lines 3a and 3b)		128			1,272,141	
	luction Act Notice, s	!	<u> </u>	Cahad	lle F (Form 990) 201:	

Page 2

74-2238973

srants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, . Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed 1,2013 Youth With A Mission

(i) Method of valuation (book, FMV, appraisal, other) (h) Description of non-cash assistance (g) Amount of non-cash assistance (f) Manner of cash disbursement check check checkcheck check 256,173 6,119 275,829 163,085 204,697 (e) Amount of cash grant Childrens Orphanage Building New School Missionary Program (d) Purpose of Mission Work Charitable (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization (10) (12) (13) 1 (15) গ্ৰ 1 9 8 9  $\Xi$ 9 (16) 9

Enter total number of other organizations or entities က

Schedule F (Form 990) 2013

φ

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

for Form 5713)

"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2013

Yes

#### Part V Supplemental Information

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

Part I, Line 3 - Activities per Region

Region	E	kpenditures	Investments
North America - Mexico	\$	1,061,429	\$ 0
Central America - Nicaragua	\$	22,648	\$ 0
Central American - Haiti	\$	2,352	\$ 0
Central America - Nicaragua	\$	8,566	\$ 0
Central America- Costa Rica	\$	26,454	\$ 0
Central America- Guatemala	\$	8,178	\$ 0
North America-Canada	\$	954	\$ 0
South America-Brazil	\$	8,237	\$ 0
Sub Saharan Africa- South Africa	\$	3,791	\$ 0
East Asia and the Pacific- China	\$	18,363	\$ 0
East Asia and the Pacific- Hong Kong	\$	13,127	\$ 0
East Asia and the Pacific- New Zealand	\$	6,129	\$ 0
East Asia and the Pacific- Australia	\$	20,980	\$ 0
East Asia and the Pacific- Japan	\$	10,454	\$ 0
East Asia and the Pacific- Phillippines	\$	46,396	\$ 0
Europe- France	\$	12,883	\$ 0
Europe- England	\$	1,200	\$ 0

**SCHEDULE G** (Form 990 or 990-EZ) **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. Open to Public Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

inspectium

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

With A Mission -

Employer identification number

El Paso/Juarez					14-22369	
Part I Fundraising Activities. Complete if Form 990-EZ filers are not required to				ed "Yes" to Form	990, Part IV, line	17. 
1 Indicate whether the organization raised funds through a	ny of the following	activi	ties	Check all that apply.	_	
a Mail solicitations	e Solicitation	of nor	1-gov	ernment grants		
b Internet and email solicitations	F Solicitation	of gov	/ernm	ent grants		
c Phone solicitations	g 🗌 Special fun	draisir	ng eve	ents		
d In-person solicitations						
<ul> <li>Did the organization have a written or oral agreement will or key employees listed in Form 990, Part VII) or entity in bif "Yes," list the ten highest paid individuals or entities (further compensated at least \$5,000 by the organization</li> </ul>	n connection with	profes int to a	siona agree	I fundraising services	7	Yes No
(i) Name and address of individual or entity (fundraiser)	(II) Activity	(iii) Did raiser custo contri contribi	have dy or ol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in co! (i)	(vi) Amount paid to (or retained by) organization
		Yes	-		,,	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total		-	▶			

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) 2013 Youth With A Mission -74-2238973 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported Part II more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events EL PASO FUNDRAI AMARILLO FUNDRA 3 (add col (a) through col (c)) (event type) (event type) (total number) Revenue 46,385 32,910 104,561 25,266 1 Gross receipts 46,385 25,266 32,910 104,561 2 Less Contributions 3 Gross income (line 1 minus 4 Cash prizes 5 Noncash prizes 467 467 6 Rent/facility costs Direct Expenses 1,000 118 887 2,005 7 Food and beverages 8 Entertainment 2,064 9,235 1,624 12,923 9 Other direct expenses 15,395 10 Direct expense summary Add lines 4 through 9 in column (d) -15,395 11 Net income summary. Subtract line 10 from line 3, column (d) 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. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming cof (a) through col (c)) bingo/progressive bingo 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes % Yes % 6 Volunteer labor No No No 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization operates gaming activities: Yes No a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain Yes No 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain

	edule G (Form 990 or 990-EZ) 2013 Youth With A Mission -	74-223897		Page 3					
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		□ v <sub>-</sub> .						
13	formed to administer chantable gaming?	1 1	Yes	∐ No					
	Indicate the percentage of gaming activity operated in	42-		0/					
a b	The organization's facility An outside facility	13a 13b		<u>%</u> %					
14	Enter the name and address of the person who prepares the organization's gaming/special events books and	[130]							
	records								
	Name ▶								
	Address ▶								
15a	Does the organization have a contract with a third party from whom the organization receives gaming		<u> </u>	<b></b>					
	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 \$								
С	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 ▶ \$								
Par	Supplemental Information. 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 O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

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

Open to Public Inspection

Name of the organization

Youth With A Mission -

Employer identification number

El Paso/Juarez

74-2238973

Form 990, Part I, Line 6

Missionary staff are treated as volunteers although they are issued a 1099 Misc. Form from this organization because of the public support they raise and is processed through this organization.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Form 990 and Schedules are submitted to the board for review before filing with the IRS.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Copies of Governing Documents are available to the public at the home office during normal business hours, Monday through Friday.

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

Reduction of Net Assets due to Fixed Assets Reclas \$ 561,461

We have recorded a decrease in net assets of \$561,461 due to

reclassification of assets, land, buildings and equipment on the Balance

Sheet that were the property of the Mexican nonprofit, Amistad Sin

Frontera.

Form 4562

**Depreciation and Amortization** 

(Including Information on Listed Property)

OMB No 1545-0172

2013

Department of the Treasury Internal Revenue Service

(99) See separate instructions.

► Attach to your tax return.

chment Jence No. 179

Name(s) shown on return

Youth With A Mission -

Identifying number 74-2238973

El Paso/Juarez Business or activity to which this form relates Indirect Depreciation Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount (see instructions) 1 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 12 13 Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 15 10,628 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A MACRS deductions for assets placed in service in tax years beginning before 2013 17 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery placed in (e) Convention (f) Method (a) Depreciation deduction (a) Classification of property (business/investment use service only-see instructions) 19a 3-year property 5-year property 7-year property d 10-year property e 15-year property 20-year property S/L g 25-year property 25 yrs h Residential rental S/L 27.5 yrs. MM property ММ S/L 27 5 yrs ММ Nonresidential real 39 yrs S/L property MM S/L Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs. S/L c 40-year 40 yrs. MM S/L Part IV Summary (See instructions.) Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 10,628 and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs