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Form **990-EZ**

**Short Form**

**Return of Organization Exempt From Income Tax**

OMB No 1545-1150

**2014**

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

**Open to Public Inspection**

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Department of the Treasury  
Internal Revenue Service

**A** For the 2014 calendar year, or tax year beginning January 01, 2014, and ending December 31, 20 14

**B** Check if applicable

- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

**C** Name of organization  
**Windsoar Ministries c/o Jerome Ciaramitaro**

Number and street (or P O box, if mail is not delivered to street address) Room/suite  
**525 East Big Beaver Road 250**

City or town, state or province, country, and ZIP or foreign postal code  
**Troy, MI 48083**

**D** Employer identification number  
**38-3332017**

**E** Telephone number  
**248-641-2740**

**F** Group Exemption Number ▶

**G** Accounting Method:  Cash  Accrual Other (specify) ▶

**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

**I** Website: ▶

**J** Tax-exempt status (check only one) -  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**K** Form of organization:  Corporation  Trust  Association  Other

**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ . . . . . ▶ \$

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I . . . . .

SCANNED JUN 04 2015  
Revenue

Revenue	<b>1</b>	Contributions, gifts, grants, and similar amounts received . . . . .	<b>1</b>	20,167.69
	<b>2</b>	Program service revenue including government fees and contracts . . . . .	<b>2</b>	
	<b>3</b>	Membership dues and assessments . . . . .	<b>3</b>	
	<b>4</b>	Investment income . . . . .	<b>4</b>	
	<b>5a</b>	Gross amount from sale of assets other than inventory . . . . .	<b>5a</b>	
	<b>5b</b>	Less: cost or other basis and sales expenses . . . . .	<b>5b</b>	
	<b>5c</b>	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	<b>5c</b>	
	<b>6</b>	Gaming and fundraising events		
	<b>6a</b>	Gross income from gaming (attach Schedule G if greater than \$15,000) . . . . .	<b>6a</b>	
<b>6b</b>	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . . .	<b>6b</b>		
<b>6c</b>	Less: direct expenses from gaming and fundraising events . . . . .	<b>6c</b>		
<b>6d</b>	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) . . . . .	<b>6d</b>		
<b>7a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>7a</b>		
<b>7b</b>	Less: cost of goods sold . . . . .	<b>7b</b>		
<b>7c</b>	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	<b>7c</b>		
<b>8</b>	Other revenue (describe in Schedule O) . . . . .	<b>8</b>		
	<b>9</b>	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . . .	<b>9</b>	20,167.69
Expenses	<b>10</b>	Grants and similar amounts paid (list in Schedule O) . . . . .	<b>10</b>	21,765.00
	<b>11</b>	Benefits paid to or for members . . . . .	<b>11</b>	
	<b>12</b>	Salaries, other compensation, and employee benefits . . . . .	<b>12</b>	
	<b>13</b>	Professional fees and other payments to independent contractors . . . . .	<b>13</b>	
	<b>14</b>	Occupancy, rent, utilities, and maintenance . . . . .	<b>14</b>	
	<b>15</b>	Printing, publications, postage, and shipping . . . . .	<b>15</b>	132.00
	<b>16</b>	Other expenses (describe in Schedule O) . . . . .	<b>16</b>	1,166.44
	<b>17</b>	<b>Total expenses.</b> Add lines 10 through 16 . . . . .	<b>17</b>	23,063.44
Net Assets	<b>18</b>	Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	<b>18</b>	(2,895.75)
	<b>19</b>	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>19</b>	7,404.35
	<b>20</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>20</b>	
	<b>21</b>	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20 . . . . .	<b>21</b>	4,508.60

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For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2014)

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**Part V Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
<b>33</b>	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O . . . . .		✓
<b>34</b>	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) . . . . .		✓
<b>35a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? . . . . .		✓
<b>b</b>	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O . . . . .		
<b>c</b>	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III . . . . .		
<b>36</b>	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .		✓
<b>37a</b>	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ <b>37a</b> _____		
<b>b</b>	Did the organization file Form 1120-POL for this year? . . . . .		✓
<b>38a</b>	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . . . . .		✓
<b>b</b>	If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .		
<b>39</b>	Section 501(c)(7) organizations. Enter: . . . . .		
<b>a</b>	Initiation fees and capital contributions included on line 9 . . . . .		
<b>b</b>	Gross receipts, included on line 9, for public use of club facilities . . . . .		
<b>40a</b>	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____		
<b>b</b>	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .		✓
<b>c</b>	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ _____		
<b>d</b>	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ _____		
<b>e</b>	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T . . . . .		✓
<b>41</b>	List the states with which a copy of this return is filed ▶ _____		
<b>42a</b>	The organization's books are in care of ▶ <u>Jerome Ciaramitaro</u> Telephone no. ▶ <u>248-641-2740</u> Located at ▶ <u>525 East Big Beaver Road, Suite 250 Troy, MI</u> ZIP + 4 ▶ <u>48083</u>		
<b>b</b>	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)? If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		✓
<b>c</b>	At any time during the calendar year, did the organization maintain an office outside the U.S.? . . . . . If "Yes," enter the name of the foreign country: ▶ <u>Canada</u>	✓	
<b>43</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b> _____		
<b>44a</b>	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .		✓
<b>b</b>	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .		✓
<b>c</b>	Did the organization receive any payments for indoor tanning services during the year? . . . . .		✓
<b>d</b>	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .		
<b>45a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .		✓
<b>b</b>	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) . . . . .		✓

	<b>Yes</b>	<b>No</b>
<b>46</b> Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .	46	✓

**Part VI Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

	<b>Yes</b>	<b>No</b>
<b>47</b> 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 . . . . .	47	✓
<b>48</b> Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	48	✓
<b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization? . . . . .	49a	✓
<b>b</b> If "Yes," was the related organization a section 527 organization? . . . . .	49b	

**50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

**f** Total number of other employees paid over \$100,000 . . . . . ▶ \_\_\_\_\_

**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

**d** Total number of other independent contractors each receiving over \$100,000 . . . . . ▶ \_\_\_\_\_

**52** Did the organization complete Schedule A? **Note.** All section 501(c)(3) organizations must attach a completed Schedule A . . . . . ▶  **Yes**  **No**

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

<b>Sign Here</b>	▶ <i>Nello Paolini</i> Signature of officer	▶ 4/16/2015 Date
	▶ Nello Paolini, Vice- President Type or print name and title	▶ April 16, 2015 Date

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no			

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶  **Yes**  **No**

**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.

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

OMB No 1545-0047

**2014**

**Open to Public Inspection**

Name of the organization <b>Windsor Ministries</b>	Employer identification number <b>38-3332017</b>
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**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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

**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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4 Total.</b> Add lines 1 through 3 . . . . .						
<b>5</b> 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) . . . . .						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>7</b> Amounts from line 4 . . . . .						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	
<b>13 First five years.</b> 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 <b>stop here</b> . . . . .						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	%
<b>15</b> Public support percentage from 2013 Schedule A, Part II, line 14 . . . . .	<b>15</b>	%
<b>16a 33 1/3% support test—2014.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .	<input type="checkbox"/>	
<b>b 33 1/3% support test—2013.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .	<input type="checkbox"/>	
<b>17a 10%-facts-and-circumstances test—2014.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .	<input type="checkbox"/>	
<b>b 10%-facts-and-circumstances test—2013.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .	<input type="checkbox"/>	
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .	<input type="checkbox"/>	

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

(Complete only if you checked the box on line 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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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 . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .						
<b>b</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						
<b>c</b> Add lines 7a and 7b . . . . .						
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>9</b> Amounts from line 6 . . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						
<b>14 First five years.</b> 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 <b>stop here</b> . . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2013 Schedule A, Part III, line 15 . . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2014</b> (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2013</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	%

- 19a 33 1/3% support tests—2014.** 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—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . . .
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . .

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer (b) below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations (continued)**

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

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

**Section E. Type III Functionally-Integrated Supporting Organizations**

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

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

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

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>		
<b>2</b> Recoveries of prior-year distributions	<b>2</b>		
<b>3</b> Other gross income (see instructions)	<b>3</b>		
<b>4</b> Add lines 1 through 3	<b>4</b>		
<b>5</b> Depreciation and depletion	<b>5</b>		
<b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b>		
<b>7</b> Other expenses (see instructions)	<b>7</b>		
<b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>		
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
<b>a</b> Average monthly value of securities	<b>1a</b>		
<b>b</b> Average monthly cash balances	<b>1b</b>		
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b>		
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>		
<b>e Discount</b> claimed for blockage or other factors (explain in detail in Part VI):			
<b>2</b> Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>		
<b>3</b> Subtract line 2 from line 1d	<b>3</b>		
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	<b>4</b>		
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>		
<b>6</b> Multiply line 5 by .035	<b>6</b>		
<b>7</b> Recoveries of prior-year distributions	<b>7</b>		
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>		
<b>Section C - Distributable Amount</b>			Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>		
<b>2</b> Enter 85% of line 1	<b>2</b>		
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>		
<b>4</b> Enter greater of line 2 or line 3	<b>4</b>		
<b>5</b> Income tax imposed in prior year	<b>5</b>		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>		
<b>7</b> <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).			

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 <b>Excess distributions carryover to 2015.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			



**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.

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

OMB No 1545-0047

**2014**

**Open to Public  
Inspection**

Name of the organization

**Windsor Ministries**

Employer identification number

**38-3332017**

**Line 10. Donations**

**Line 16. Fees and Subscriptions, Bank Charges, Honorariums, Office Supplies**

Area with horizontal dashed lines for providing supplemental information.



# Wind-Soar Ministries 2014

## Form 990 - Part IV

### List of Officers & Directors

Name and address	Title and average hours per week devoted to position	Compensation	Contribution to employee benefit plans & deferred compensation	Expense account and other allowances
Richard Ciaramitaro 1116 Regency Crs Bell River, Ontario N0R 1A0	President 10	0	0	0
Nello Paolini 767 Roselawn Dr. Windsor, Ontario N9G 1T7	Vice - President 10	0	0	0
Howie Mulder 4714 Howard Ave Windsor, ON N9G 1P7	Secretary 3	0	0	0
Jerome Ciaramitaro 38938 Santa Barbara Clinton Township, MI 48036	Director 3	0	0	0
Cathy Ciaramitaro 1116 Regency Crs Bell River, Ontario N0R 1A0	Director 3	0	0	0

**WIND-SOAR MINISTRIES**  
**Balance Sheet Prev Year Comparison**  
**As of December 31, 2014**

	Dec 31, 14	Dec 31, 13	\$ Change	% Change
<b>ASSETS</b>				
Current Assets				
Checking/Savings	6,608.60	9,504.35	-2,895.75	-30.5%
11000 - Bank - General U.S.				
Total Checking/Savings	6,608.60	9,504.35	-2,895.75	-30.5%
Other Current Assets	400.00	400.00	0.00	0.0%
10000 - Petty Cash				
Total Other Current Assets	400.00	400.00	0.00	0.0%
Total Current Assets	7,008.60	9,904.35	-2,895.75	-29.2%
<b>TOTAL ASSETS</b>	<b>7,008.60</b>	<b>9,904.35</b>	<b>-2,895.75</b>	<b>-29.2%</b>
<b>LIABILITIES &amp; EQUITY</b>				
Liabilities				
Current Liabilities				
Other Current Liabilities	2,500.00	2,500.00	0.00	0.0%
20100 - Accrued Payables				
Total Other Current Liabilities	2,500.00	2,500.00	0.00	0.0%
Total Current Liabilities	2,500.00	2,500.00	0.00	0.0%
Total Liabilities	2,500.00	2,500.00	0.00	0.0%
Equity				
30000 - Surplus / (Deficit)	7,338.80	7,338.80	0.00	0.0%
32000 - Unrestricted Net Assets	65.55	0.00	65.55	100.0%
Net Income	-2,895.75	65.55	-2,961.30	-4,517.6%
Total Equity	4,508.60	7,404.35	-2,895.75	-39.1%
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b>7,008.60</b>	<b>9,904.35</b>	<b>-2,895.75</b>	<b>-29.2%</b>

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04-15-15  
Accrual Basis

**WIND-SOAR MINISTRIES**  
**Profit & Loss**  
**January through December 2014**

	<u>Jan - Dec 14</u>
<b>Income</b>	
40000 · Tithes/Offerings	19,762 69
40300 · Special Offering	375 00
40500 · Conference Offering	30 00
<b>Total Income</b>	<u>20,167 69</u>
<b>Gross Profit</b>	20,167 69
<b>Expense</b>	
50000 · Tithes & Offerings - Expense	21,765 00
60000 · Honorariums Paid	1,000 00
61200 · Fees, Dues and Subscriptions	65 00
61400 · Stationary and Office Supplies	53 44
61600 · Postage and Delivery	132 00
62000 · Bank Charges	48 00
<b>Total Expense</b>	<u>23,063 44</u>
<b>Net Income</b>	<u><u>-2,895.75</u></u>

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04-15-15  
Accrual Basis

**WIND-SOAR MINISTRIES**  
**Balance Sheet**  
**As of December 31, 2014**

	<u>Dec 31, 14</u>
<b>ASSETS</b>	
<b>Current Assets</b>	
<b>Checking/Savings</b>	
11000 · Bank - General U.S	6,608 60
<b>Total Checking/Savings</b>	<u>6,608 60</u>
<b>Other Current Assets</b>	
10000 · Petty Cash	400 00
<b>Total Other Current Assets</b>	<u>400 00</u>
<b>Total Current Assets</b>	<u>7,008 60</u>
<b>TOTAL ASSETS</b>	<u><u>7,008.60</u></u>
<b>LIABILITIES &amp; EQUITY</b>	
<b>Liabilities</b>	
<b>Current Liabilities</b>	
<b>Other Current Liabilities</b>	
20100 · Accrued Payables	2,500 00
<b>Total Other Current Liabilities</b>	<u>2,500.00</u>
<b>Total Current Liabilities</b>	<u>2,500 00</u>
<b>Total Liabilities</b>	2,500.00
<b>Equity</b>	
30000 · Surplus / (Deficit)	7,338 80
32000 · Unrestricted Net Assets	65 55
Net Income	<u>-2,895 75</u>
<b>Total Equity</b>	<u>4,508 60</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<u><u>7,008.60</u></u>

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04-15-15

Accrual Basis

# WIND-SOAR MINISTRIES

## Trial Balance

As of December 31, 2014

	Dec 31, 14	
	Debit	Credit
11000 · Bank - General U.S	6,608 60	
10000 · Petty Cash	400.00	
12001 · Undeposited Funds	0 00	
20000 · Accounts Payable	0 00	
20100 · Accrued Payables		2,500 00
30000 · Surplus / (Deficit)		7,338 80
32000 · Unrestricted Net Assets		65 55
40000 · Tithes/Offerings		19,762 69
40300 · Special Offering		375.00
40500 · Conference Offering		30 00
50000 · Tithes & Offerings - Expense	21,765 00	
60000 · Honorariums Paid	1,000 00	
61200 · Fees, Dues and Subscriptions	65 00	
61400 · Stationary and Office Supplies	53.44	
61600 · Postage and Delivery	132 00	
62000 · Bank Charges	48 00	
<b>TOTAL</b>	<b><u>30,072.04</u></b>	<b><u>30,072.04</u></b>

## Qualified Donees for Windsoar 2014

Name	Amount Given
Christian Adventures International	\$ 2,400.00
Church Asia	\$ 1,800.00
Destiny World Outreach	\$ 1,210.00
Dominic Russo Ministries	\$ 1,440.00
Grace Worship Center	\$ 5,000.00
JAM	\$ 134.56
Karim Ministry Service	\$ 2,400.00
Living Word Ministries	\$ 960.00
Messenger International	\$ 2,960.00
Metro Ministries International	\$ 1,920.00
The Gate Church	\$ 1,000.00
Windsor Life Centre	\$ 540.44
<b>Total</b>	<b>\$ 21,765.00</b>

## WIND-SOAR MINISTRIES Transactions by Account As of December 31, 2014

Type	Date	Num	Name	Memo	Cir	Split	Amount	Balance
<b>50000 - Tithes &amp; Offerings - Expense</b>								
Check	2014-01-15	3416	Ciaramitaro, Pastor	Monthly Missi		11000 Bank -	640.00	640.00
Check	2014-01-15	3417	Destiny World Outr.	Monthly Missi		11000 Bank -	80.00	720.00
Check	2014-01-15	3418	Karim Ministry Servi	Monthly Missi		11000 Bank -	200.00	920.00
Check	2014-01-15	3419	Church Asia	Annually Mis		11000 Bank -	1,800.00	2,720.00
Check	2014-01-15	3420	Windsoar Life Centre	Monthly Missi		11000 Bank -	100.00	2,820.00
Check	2014-02-11	3421	Ciaramitaro, Pastor	Monthly Missi		11000 Bank -	640.00	3,460.00
Check	2014-02-11	3423	Destiny World Outr	Monthly Missi		11000 Bank -	80.00	3,540.00
Check	2014-02-11	3424	Karim Ministry Servi	Monthly Missi		11000 Bank -	200.00	3,740.00
Check	2014-02-11	3425	Windsoar Life Centre	Monthly Missi		11000 Bank -	100.00	3,840.00
Check	2014-03-18	3426	Ciaramitaro, Pastor	Monthly Missi		11000 Bank -	640.00	4,480.00
Check	2014-03-18	3427	Destiny World Outr	Monthly Missi		11000 Bank -	80.00	4,560.00
Check	2014-03-18	3428	Karim Ministry Servi	Monthly Missi		11000 Bank -	200.00	4,760.00
Check	2014-03-18	3429	Windsoar Life Centre	Monthly Missi		11000 Bank -	100.00	4,860.00
Check	2014-04-10	3431	Ciaramitaro, Pastor	Monthly Missi		11000 Bank -	640.00	5,500.00
Check	2014-04-10	3432	Destiny World Outr	Monthly Missi		11000 Bank -	80.00	5,580.00
Check	2014-04-10	3433	Karim Ministry Servi	Monthly Missi		11000 Bank -	200.00	5,780.00
Check	2014-04-10	3434	Windsoar Life Centre	Monthly Missi	X	11000 Bank -	0.00	5,780.00
General Journal	2014-04-10	15	Windsoar Life Centre	For CHK 343		11000 Bank -	100.00	5,880.00
Check	2014-05-05	3435	Messenger Internati	Offering - Joh		11000 Bank -	1,000.00	6,880.00
Check	2014-05-09	3437	Ciaramitaro, Pastor	Monthly Missi		11000 Bank -	640.00	7,520.00
Check	2014-05-09	3438	Destiny World Outr	Monthly Missi		11000 Bank -	80.00	7,600.00
Check	2014-05-09	3439	Karim Ministry Servi	Monthly Missi		11000 Bank -	200.00	7,800.00
Check	2014-05-14	3440	Messenger Internati	John Bevere		11000 Bank -	1,000.00	8,800.00
Check	2014-06-10	3441	Ciaramitaro, Pastor	Monthly Missi		11000 Bank -	640.00	9,440.00
Check	2014-06-10	3442	Destiny World Outr	Monthly Missi		11000 Bank -	80.00	9,520.00
Check	2014-06-10	3443	Karim Ministry Servi	Monthly Missi		11000 Bank -	200.00	9,720.00
Check	2014-06-10	3444	Windsoar Life Centre	Special Offeri		11000 Bank -	240.44	9,960.44
Check	2014-06-10	3445	JAM Canada	Special Offeri		11000 Bank -	134.56	10,095.00
General Journal	2014-06-10	15R	Windsoar Life Centre	Reverse of G		11000 Bank -	-100.00	9,995.00
Check	2014-07-09	3446	Ciaramitaro, Pastor	Monthly Missi		11000 Bank -	640.00	10,635.00
Check	2014-07-09	3447	Destiny World Outr	Monthly Missi		11000 Bank -	80.00	10,715.00
Check	2014-07-09	3448	Karim Ministry Servi	Monthly Missi		11000 Bank -	200.00	10,915.00
Check	2014-08-13	3449	Ciaramitaro, Pastor	Monthly Missi		11000 Bank -	640.00	11,555.00
Check	2014-08-13	3450	Destiny World Outr	Monthly Missi		11000 Bank -	80.00	11,635.00
Check	2014-08-13	3451	Karim Ministry Servi	Monthly Missi		11000 Bank -	200.00	11,835.00
Check	2014-09-12	3454	Ciaramitaro, Pastor	Monthly Missi		11000 Bank -	640.00	12,475.00
Check	2014-09-12	3455	Destiny World Outr	Monthly Missi		11000 Bank -	80.00	12,555.00
Check	2014-09-12	3456	Karim Ministry Servi	Monthly Missi		11000 Bank -	200.00	12,755.00
Check	2014-10-08	3457	Ciaramitaro, Pastor	Monthly Missi		11000 Bank -	640.00	13,395.00
Check	2014-10-08	3458	Destiny World Outr	Monthly Missi		11000 Bank -	80.00	13,475.00
Check	2014-10-08	3459	Karim Ministry Servi	Monthly Missi		11000 Bank -	200.00	13,675.00
Check	2014-10-08	3460	Destiny World Outr	Gathering of		11000 Bank -	250.00	13,925.00
Check	2014-10-28	3461	Grace Worship Cen	Blankets for		11000 Bank -	5,000.00	18,925.00
Check	2014-11-09	3462	The Gate Church	Special Offer		11000 Bank -	1,000.00	19,925.00
Check	2014-11-11	3463	Ciaramitaro, Pastor	Monthly Missi		11000 Bank -	640.00	20,565.00
Check	2014-11-11	3464	Destiny World Outr	Monthly Missi		11000 Bank -	80.00	20,645.00
Check	2014-11-11	3465	Karim Ministry Servi	Monthly Missi		11000 Bank -	200.00	20,845.00
Check	2014-12-08	3466	Ciaramitaro, Pastor	Monthly Missi		11000 Bank -	640.00	21,485.00

**WIND-SOAR MINISTRIES**  
**Transactions by Account**  
 As of December 31, 2014

11:45 AM  
 04-15-15  
 Accrual Basis

Type	Date	Num	Name	Memo	Cir	Split	Amount	Balance
Check	2014-12-08	3467	Destiny World Outr. .	Monthly Missi..		11000 Bank - .	80.00	21,565.00
Check	2014-12-08	3468	Karrm Ministry Servi..	Monthly Missi..		11000 Bank - .	200.00	21,765.00
Total 50000 · Tithes & Offerings - Expense							21,765.00	21,765.00
<b>TOTAL</b>							<b>21,765.00</b>	<b>21,765.00</b>

**WIND-SOAR MINISTRIES**  
**Sales by Customer Detail**  
 January through December 2014

4:08 PM  
 04-15-15  
 Accrual Basis

Type	Date	Num	Memo	Name	Item	Qty	Sales Price	Amount	Balance
<b>Belbot, William</b>									
Sales Receipt	2014-05-20	116	General Tithe	Belbot, William	Tithes &	1	36 04	36 04	36 04
<b>Total Belbot, William</b>						1		36 04	36 04
<b>Berg, Bernie</b>									
Sales Receipt	2014-11-10	222	Conference	Berg, Bernie	Confere	1	30 00	30 00	30 00
<b>Total Berg, Bernie</b>						1		30 00	30 00
<b>Chryczyk Matthew &amp; Crystal</b>									
Sales Receipt	2014-03-10	66	General Tithe	Chryczyk Matthew	Tithes &	1	60 00	60 00	60 00
Sales Receipt	2014-04-14	91	General Tithe	Chryczyk Matthew	Tithes &	1	42 38	42 38	102 38
Sales Receipt	2014-05-20	117	General Tithe	Chryczyk Matthew	Tithes &	1	54 05	54 05	156 43
Sales Receipt	2014-06-16	129	General Tithe	Chryczyk Matthew	Tithes &	1	52 65	52 65	209 08
Sales Receipt	2014-06-30	134	General Tithe	Chryczyk Matthew	Tithes &	1	55 00	55 00	264 08
Sales Receipt	2014-07-14	141	General Tithe	Chryczyk Matthew	Tithes &	1	54 00	54 00	318 08
Sales Receipt	2014-08-14	149	General Tithe	Chryczyk Matthew	Tithes &	1	54 00	54 00	372 08
Sales Receipt	2014-08-14	150	General Tithe	Chryczyk Matthew	Tithes &	1	53 00	53 00	425 08
Sales Receipt	2014-08-28	157	General Tithe	Chryczyk Matthew	Tithes &	1	35 00	35 00	460 08
Sales Receipt	2014-10-02	211	General Tithe	Chryczyk Matthew	Tithes &	1	35 00	35 00	495 08
Sales Receipt	2014-10-16	217	General Tithe	Chryczyk Matthew	Tithes &	1	42 50	42 50	537 58
<b>Total Chryczyk Matthew &amp; Crystal</b>						11		537 58	537 58
<b>Janas, Cody</b>									
Sales Receipt	2014-05-26	114	General Tithe	Janas, Cody	Tithes &	1	20 00	20 00	20 00
Sales Receipt	2014-07-21	142	General Tithe	Janas, Cody	Tithes &	1	40 00	40 00	60 00
Sales Receipt	2014-07-28	146	General Tithe	Janas, Cody	Tithes &	1	20 00	20 00	80 00
<b>Total Janas, Cody</b>						3		80 00	80 00
<b>Johnson, Holly</b>									
Sales Receipt	2014-04-07	88	General Tithe	Johnson, Holly	Tithes &	1	20 00	20 00	20 00
<b>Total Johnson, Holly</b>						1		20 00	20 00
<b>Joinville, Mrs. Lisa</b>									
Sales Receipt	2014-01-06	48	General Tithe	Joinville, Mrs Lisa	Tithes &	1	140 00	140 00	140 00
Sales Receipt	2014-01-20	55	General Tithe	Joinville, Mrs Lisa	Tithes &	1	140 00	140 00	280 00
Sales Receipt	2014-02-10	60	General Tithe	Joinville, Mrs Lisa	Tithes &	1	140 00	140 00	420 00
Sales Receipt	2014-02-24	73	General Tithe	Joinville, Mrs Lisa	Tithes &	1	140 00	140 00	560 00
Sales Receipt	2014-03-03	68	General Tithe	Joinville, Mrs Lisa	Tithes &	1	140 00	140 00	700 00
Sales Receipt	2014-03-24	74	General Tithe	Joinville, Mrs Lisa	Tithes &	1	140 00	140 00	840 00
Sales Receipt	2014-03-31	82	General Tithe	Joinville, Mrs Lisa	Tithes &	1	140 00	140 00	980 00
Sales Receipt	2014-04-21	96	General Tithe	Joinville, Mrs Lisa	Tithes &	1	140 00	140 00	1,120 00
Sales Receipt	2014-04-28	101	General Tithe	Joinville, Mrs Lisa	Tithes &	1	140 00	140 00	1,260 00
Sales Receipt	2014-05-20	111	General Tithe	Joinville, Mrs Lisa	Tithes &	1	140 00	140 00	1,400 00
Sales Receipt	2014-05-26	113	General Tithe	Joinville, Mrs Lisa	Tithes &	1	140 00	140 00	1,540 00
Sales Receipt	2014-06-23	132	General Tithe	Joinville, Mrs Lisa	Tithes &	1	150 00	150 00	1,690 00
Sales Receipt	2014-06-23	133	General Tithe	Joinville, Mrs Lisa	Tithes &	1	150 00	150 00	1,840 00
Sales Receipt	2014-07-07	136	General Tithe	Joinville, Mrs Lisa	Tithes &	1	150 00	150 00	1,990 00
Sales Receipt	2014-07-28	143	General Tithe	Joinville, Mrs Lisa	Tithes &	1	150 00	150 00	2,140 00
Sales Receipt	2014-07-28	144	General Tithe	Joinville, Mrs Lisa	Tithes &	1	50 00	50 00	2,190 00

# WIND-SOAR MINISTRIES

## Sales by Customer Detail

### January through December 2014

Type	Date	Num	Memo	Name	Item	Qty	Sales Price	Amount	Balance
Sales Receipt	2014-08-13	148	General Tithe...	Joinville, Mrs. Lisa	Tithes & . .	1	150 00	150 00	2,340 00
Sales Receipt	2014-08-18	151	General Tithe	Joinville, Mrs Lisa	Tithes & . .	1	150 00	150 00	2,490 00
Sales Receipt	2014-09-08	158	General Tithe	Joinville, Mrs Lisa	Tithes & . .	1	150 00	150 00	2,640 00
Sales Receipt	2014-09-15	159	General Tithe	Joinville, Mrs. Lisa	Tithes & . .	1	150 00	150 00	2,790 00
Sales Receipt	2014-09-29	164	General Tithe	Joinville, Mrs Lisa	Tithes & . .	1	150 00	150 00	2,940 00
Sales Receipt	2014-10-14	215	General Tithe	Joinville, Mrs. Lisa	Tithes & . .	1	150 00	150 00	3,090 00
Sales Receipt	2014-10-27	219	General Tithe	Joinville, Mrs Lisa	Tithes & . .	1	150 00	150 00	3,240 00
Sales Receipt	2014-11-10	223	General Tithe	Joinville, Mrs Lisa	Tithes & . .	1	150 00	150 00	3,390 00
Sales Receipt	2014-11-24	227	General Tithe..	Joinville, Mrs. Lisa	Tithes & . .	1	150 00	150 00	3,540.00
Sales Receipt	2014-12-08	228	General Tithe.	Joinville, Mrs Lisa	Tithes & . .	1	150 00	150 00	3,690 00
Sales Receipt	2014-12-22	232	General Tithe	Joinville, Mrs. Lisa	Tithes & . .	1	150 00	150 00	3,840 00
Total Joinville, Mrs Lisa						27		3,840 00	3,840 00
<b>Lockhart, Mr. Jim</b>									
Sales Receipt	2014-02-10	59	General Tithe...	Lockhart, Mr. Jim	Tithes & . .	1	200 00	200 00	200 00
Sales Receipt	2014-03-03	67	General Tithe	Lockhart, Mr Jim	Tithes & . .	1	100 00	100 00	300.00
Sales Receipt	2014-04-21	97	General Tithe..	Lockhart, Mr. Jim	Tithes & . .	1	100 00	100 00	400 00
Sales Receipt	2014-05-05	104	General Tithe .	Lockhart, Mr Jim	Tithes & . .	1	100 00	100 00	500 00
Sales Receipt	2014-09-22	163	General Tithe..	Lockhart, Mr. Jim	Tithes & . .	1	200 00	200.00	700 00
Total Lockhart, Mr. Jim						5		700 00	700 00
<b>Loose Cash</b>									
Sales Receipt	2014-05-20	118	General Tithe	Loose Cash	Tithes & . .	1	53 84	53 84	53 84
Sales Receipt	2014-06-02	124	General Tithe	Loose Cash	Tithes & . .	1	40 00	40 00	93 84
Sales Receipt	2014-06-09	128	General Tithe .	Loose Cash	Tithes & . .	1	36 00	36.00	129 84
Total Loose Cash						3		129 84	129 84
<b>New Life Church and World Outr</b>									
Sales Receipt	2014-01-13	50	General Tithe .	New Life Church an .	Tithes & . .	1	100 00	100 00	100 00
Sales Receipt	2014-02-10	61	General Tithe	New Life Church an .	Tithes & . .	1	100 00	100 00	200 00
Total New Life Church and World Outr						2		200 00	200 00
<b>O' Brien Judy</b>									
Sales Receipt	2014-04-14	92	Special Offen	O' Brien Judy	Special	1	185 44	185 44	185 44
Total O' Brien Judy						1		185.44	185 44
<b>Roberson, Malcolm</b>									
Sales Receipt	2014-01-06	49	General Tithe	Roberson, Malcolm	Tithes & . .	1	70 00	70 00	70 00
Sales Receipt	2014-01-20	54	General Tithe	Roberson, Malcolm	Tithes & . .	1	385 00	385 00	455 00
Sales Receipt	2014-02-03	57	General Tithe .	Roberson, Malcolm	Tithes & . .	1	285 00	285 00	740 00
Sales Receipt	2014-02-18	62	General Tithe	Roberson, Malcolm	Tithes & . .	1	405 00	405 00	1,145 00
Sales Receipt	2014-02-24	69	General Tithe	Roberson, Malcolm	Tithes & . .	1	285 00	285 00	1,430 00
Sales Receipt	2014-03-10	64	General Tithe	Roberson, Malcolm	Tithes & . .	1	325 00	325 00	1,755 00
Sales Receipt	2014-03-24	76	General Tithe	Roberson, Malcolm	Tithes & . .	1	35 00	35 00	1,790 00
Sales Receipt	2014-04-07	86	General Tithe	Roberson, Malcolm	Tithes & . .	1	65 00	65 00	1,855 00
Sales Receipt	2014-04-07	87	General Tithe .	Roberson, Malcolm	Tithes & . .	1	550 00	550 00	2,405 00
Sales Receipt	2014-04-07	89	Special Offeri	Roberson, Malcolm	Special	1	51 00	51 00	2,456 00
Sales Receipt	2014-04-21	93	General Tithe	Roberson, Malcolm	Tithes & . .	1	290 00	290 00	2,746 00
Sales Receipt	2014-05-12	106	General Tithe	Roberson, Malcolm	Tithes & . .	1	100 00	100 00	2,846 00

**WIND-SOAR MINISTRIES**  
**Sales by Customer Detail**  
 January through December 2014

4:08 PM  
 04-15-15  
 Accrual Basis

Type	Date	Num	Memo	Name	Item	Qty	Sales Price	Amount	Balance
Sales Receipt	2014-05-12	109	General Tithe	Roberson, Malcol	Tithes &	1	120.00	120.00	2,966.00
Sales Receipt	2014-05-20	115	General Tithe	Roberson, Malcol	Tithes &	1	72.07	72.07	3,038.07
Sales Receipt	2014-06-02	120	General Tithe	Roberson, Malcol	Tithes &	1	70.00	70.00	3,108.07
Sales Receipt	2014-06-02	122	General Tithe	Roberson, Malcol	Tithes &	1	290.00	290.00	3,398.07
Sales Receipt	2014-06-02	123	General Tithe	Roberson, Malcol	Tithes &	1	290.00	290.00	3,688.07
Sales Receipt	2014-06-02	125	General Tithe	Roberson, Malcol	Tithes &	1	70.00	70.00	3,758.07
Sales Receipt	2014-06-09	126	General Tithe	Roberson, Malcol	Tithes &	1	62.00	62.00	3,820.07
Sales Receipt	2014-10-06	212	General Tithe	Roberson, Malcol	Tithes &	1	140.00	140.00	3,960.07
Sales Receipt	2014-10-06	213	General Tithe	Roberson, Malcol	Tithes &	1	300.00	300.00	4,260.07
Sales Receipt	2014-10-27	220	General Tithe	Roberson, Malcol	Tithes &	1	290.00	290.00	4,550.07
Sales Receipt	2014-11-10	224	General Tithe	Roberson, Malcol	Tithes &	1	235.00	235.00	4,785.07
Sales Receipt	2014-11-17	225	General Tithe	Roberson, Malcol	Tithes &	1	290.00	290.00	5,075.07
Sales Receipt	2014-12-15	230	General Tithe	Roberson, Malcol	Tithes &	1	260.00	260.00	5,335.07
Sales Receipt	2014-12-15	231	General Tithe	Roberson, Malcol	Tithes &	1	220.00	220.00	5,555.07
Total Roberson, Malcol						26		5,555.07	5,555.07
<b>Sears, Dennis and Caroline</b>									
Sales Receipt	2014-01-13	51	General Tithe	Sears, Dennis and	Tithes & ...	1	355.00	355.00	355.00
Sales Receipt	2014-02-10	58	General Tithe	Sears, Dennis and	Tithes & ..	1	360.00	360.00	715.00
Sales Receipt	2014-02-18	63	General Tithe	Sears, Dennis and	Tithes & .	1	105.00	105.00	820.00
Sales Receipt	2014-02-24	70	General Tithe	Sears, Dennis and	Tithes & ..	1	80.00	80.00	900.00
Sales Receipt	2014-03-10	65	General Tithe	Sears, Dennis and	Tithes & .	1	240.00	240.00	1,140.00
Sales Receipt	2014-03-24	75	General Tithe	Sears, Dennis and	Tithes & ..	1	200.00	200.00	1,340.00
Sales Receipt	2014-03-24	78	Special Offer.	Sears, Dennis and	Special .	1	5.00	5.00	1,345.00
Sales Receipt	2014-04-21	95	General Tithe	Sears, Dennis and	Tithes & .	1	350.00	350.00	1,695.00
Sales Receipt	2014-05-12	108	General Tithe	Sears, Dennis and	Tithes & .	1	330.00	330.00	2,025.00
Sales Receipt	2014-07-07	137	General Tithe	Sears, Dennis and	Tithes &	1	970.00	970.00	2,995.00
Sales Receipt	2014-07-28	145	General Tithe	Sears, Dennis and	Tithes &	1	300.00	300.00	3,295.00
Sales Receipt	2014-08-13	147	General Tithe	Sears, Dennis and	Tithes &	1	380.00	380.00	3,675.00
Sales Receipt	2014-08-18	154	General Tithe	Sears, Dennis and	Tithes &	1	108.00	108.00	3,783.00
Sales Receipt	2014-08-25	156	General Tithe	Sears, Dennis and	Tithes &	1	100.00	100.00	3,883.00
Sales Receipt	2014-09-15	160	General Tithe	Sears, Dennis and	Tithes &	1	300.00	300.00	4,183.00
Sales Receipt	2014-09-29	210	General Tithe	Sears, Dennis and	Tithes &	1	210.00	210.00	4,393.00
Sales Receipt	2014-10-06	214	General Tithe	Sears, Dennis and	Tithes &	1	80.00	80.00	4,473.00
Sales Receipt	2014-11-03	221	General Tithe	Sears, Dennis and	Tithes &	1	345.00	345.00	4,818.00
Sales Receipt	2014-11-17	226	General Tithe	Sears, Dennis and	Tithes &	1	350.00	350.00	5,168.00
Sales Receipt	2014-12-22	233	General Tithe	Sears, Dennis and	Tithes &	1	340.00	340.00	5,508.00
Total Sears, Dennis and Caroline						20		5,508.00	5,508.00
<b>Walker, Georgia</b>									
Sales Receipt	2014-01-20	52	General Tithe	Walker, Georgia	Tithes &	1	69.00	69.00	69.00
Sales Receipt	2014-01-20	53	General Tithe	Walker, Georgia	Tithes &	1	144.00	144.00	213.00
Sales Receipt	2014-01-20	56	General Tithe	Walker, Georgia	Tithes &	1	105.00	105.00	318.00
Sales Receipt	2014-02-24	71	General Tithe	Walker, Georgia	Tithes &	1	415.00	415.00	733.00
Sales Receipt	2014-04-21	94	General Tithe	Walker, Georgia	Tithes &	1	204.00	204.00	937.00
Sales Receipt	2014-04-21	98	General Tithe	Walker, Georgia	Tithes &	1	99.16	99.16	1,036.16
Sales Receipt	2014-05-05	103	General Tithe	Walker, Georgia	Tithes &	1	35.00	35.00	1,071.16
Sales Receipt	2014-05-05	105	General Tithe	Walker, Georgia	Tithes &	1	72.00	72.00	1,143.16
Sales Receipt	2014-05-12	107	General Tithe	Walker, Georgia	Tithes &	1	320.00	320.00	1,463.16

**WIND-SOAR MINISTRIES**  
**Sales by Customer Detail**  
 January through December 2014

4:08 PM  
 04-15-15  
 Accrual Basis

Type	Date	Num	Memo	Name	Item	Qty	Sales Price	Amount	Balance
Sales Receipt	2014-06-16	130	General Tithe	Walker, Georgia	Tithes &	1	33 35	33 35	1,496 51
Sales Receipt	2014-06-16	131	General Tithe	Walker, Georgia	Tithes &	1	57 00	57 00	1,553 51
Sales Receipt	2014-07-14	139	General Tithe	Walker, Georgia	Tithes &	1	164 00	164 00	1,717 51
Sales Receipt	2014-08-18	152	General Tithe	Walker, Georgia	Tithes &	1	371 00	371 00	2,088 51
Sales Receipt	2014-08-18	153	General Tithe	Walker, Georgia	Tithes &	1	20 00	20 00	2,108 51
Sales Receipt	2014-09-15	161	General Tithe	Walker, Georgia	Tithes &	1	60 00	60 00	2,168 51
Sales Receipt	2014-09-18	162	General Tithe	Walker, Georgia	Tithes &	1	177 00	177 00	2,345 51
Sales Receipt	2014-10-14	216	General Tithe	Walker, Georgia	Tithes &	1	147 00	147 00	2,492 51
Sales Receipt	2014-10-16	218	General Tithe	Walker, Georgia	Tithes &	1	257 50	257 50	2,750 01
Total Walker, Georgia						18		2,750 01	2,750 01
<b>Watson, Carolyn</b>									
Sales Receipt	2014-02-24	72	General Tithe	Watson, Carolyn	Tithes &	1	5 00	5 00	5 00
Sales Receipt	2014-04-21	99	General Tithe	Watson, Carolyn	Tithes &	1	4 15	4 15	9 15
Sales Receipt	2014-06-02	121	General Tithe	Watson, Carolyn	Tithes &	1	10 00	10 00	19 15
Sales Receipt	2014-06-30	135	General Tithe	Watson, Carolyn	Tithes &	1	18 00	18 00	37 15
Sales Receipt	2014-07-14	140	General Tithe	Watson, Carolyn	Tithes &	1	20 00	20 00	57 15
Sales Receipt	2014-08-18	155	General Tithe	Watson, Carolyn	Tithes &	1	20 00	20 00	77 15
Total Watson, Carolyn						6		77 15	77 15
<b>Williams, Donald</b>									
Sales Receipt	2014-03-31	83	General Tithe	Williams, Donald	Tithes &	1	40 00	40 00	40 00
Sales Receipt	2014-03-31	84	General Tithe	Williams, Donald	Tithes &	1	40 00	40 00	80 00
Sales Receipt	2014-05-20	112	General Tithe	Williams, Donald	Tithes &	1	40 00	40 00	120 00
Sales Receipt	2014-07-07	138	General Tithe	Williams, Donald	Tithes &	1	40 00	40 00	160 00
Sales Receipt	2014-12-08	229	General Tithe	Williams, Donald	Tithes &	1	40 00	40 00	200 00
Sales Receipt	2014-12-30	234	General Tithe	Williams, Donald	Tithes &	1	40 00	40 00	240 00
Total Williams, Donald						6		240 00	240 00
<b>Yoder, Barbara J</b>									
Sales Receipt	2014-05-12	110	General Tithe	Yoder, Barbara J	Tithes &	1	100 00	100 00	100 00
Total Yoder, Barbara J						1		100 00	100 00
<b>Younathan, Nancy</b>									
Sales Receipt	2014-04-14	90	Special Offer	Younathan, Nancy	Special	1	63 56	63 56	63 56
Sales Receipt	2014-04-14	102	Special Offer	Younathan, Nancy	Special	1	20 00	20 00	83 56
Sales Receipt	2014-04-28	100	Special Offer	Younathan, Nancy	Special	1	50 00	50 00	133 56
Sales Receipt	2014-06-09	127	General Tithe	Younathan, Nancy	Tithes &	1	45 00	45 00	178 56
Total Younathan, Nancy						4		178 56	178 56
<b>TOTAL</b>						136		20,167 69	20,167 69