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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2014

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. □ ▷ ▷ ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. ∜

Open to Public

Inspection

2014, and ending 20 15 June 30 For the 2014 calendar year, or tax year beginning D Employer identification number Check if applicable C Name of organization Integrity Discipleship Partners 46-2247628 Address change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change П 901-753-7954 Initial return 8653 Riverchase Drive City or town, state or province, country, and ZIP or foreign postal code Final return/terminate G Gross receipts \$ 293,198 38 Germantown, TN 38139 Amended return H(a) Is this a group return for subordinates? Yes No F Name and address of principal officer Taylor Park, President Application pending H(b) Are all subordinates included? 🔲 Yes 🔲 No 8740 Guyboro Cove, Germantown, TN 38139 If "No," attach a list (see instructions) **✓** 501(c)(3) ☐ 501(c) () **◄** (insert no) ☐ 4947(a)(1) or 527 Tax-exempt status H(c) Group exemption number ▶ No subordinat Website: ▶ Form of organization 🗸 Corporation 🗌 Trust Association ☐ Other ▶ L Year of formation M State of legal domicile 2013 Briefly describe the organization's mission or most significant activities: Promote religious education and discipleship internationally, encouraging Christian believers to become leaders in their communities, schools, and governments. Activities include college campus meetings and church programs. Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 3 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 3 5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 Prior Year **Current Year** Contributions and grants (Part VIII, line, 1h). 293,198.38 8 67,032.00 Program service revenue (Part VIII, line 2g) 9 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 10 11.99 46.35 Other revenue (Part VIII) column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 12 Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12) 67,043.99 293,244.73 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 60.970.00 284.583.00 Benefits paid to or for members (Part IX, column (A), line 4) 14 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 0 0 Professional fundaising fees (Part IX, column (A), line 11e) . . . 16a 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 876.27 2,745.98 18 Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) 61,846.27 287,328 98 Revenue less expenses. Subtract line 18 from line 12 19 5,915.75 5,197.72 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 7,125,68 13,041.43 21 Total liabilities (Part X, line 26) . 22 Net assets or fund balances Subtract line 21 from line 20 7,125.68 13,041 43 Signature_Block Under penalties of perjury, I de lare 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 De on all information of which preparer has any knowledge Sign Here Print/Type preparer's name Preparer's signature Date Check [] If Paid self-employed **Preparer** Firm's EIN ▶ Firm's name

☐ Yes ☐ No Form 990 (2014)

Phone no

Cat No 11282Y

Use Only

Firm's address ▶

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

	Promote religious education and discipleship internationally, encouraging Christian believers to become leaders in their communities, schools, and governments.
	communities, schools, and governments.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$216,308.00 including grants of \$216,308.00) (Revenue \$0)
	Integrity Life, Czech Republic. Outreach programs to university students in the Czech Republic and Slovakia.
	Approximately 3,750 students participated in English camps, sports camps, student conferences, and Bible studies.
	Approximately 90 students were mentored by In-Life staff members and student leaders. [Foreign organization.]
4b	(Code:) (Expenses \$ 37,208.00 including grants of \$ 37,208.00) (Revenue \$ 0)
	International Church of Prague (located in Prague, Czech Republic) provides religious celebration, worship services, spiritual
	education to children and adults, and relational coaching to strengthen the common good of the congregation averaging 250 people
	each week including many U.S. expatriats. Other services include food and shelter to homeless individuals [Foreign organization.]
4c	(Code:) (Expenses \$ 30,000.00 including grants of \$ 30,000.00) (Revenue \$ 0)
	Rivenhill in Prague, Czech Republic continues to pursue its goals of supporting Christian and democratic values in a post-
	Communist and highly atherstic culture. It continued construction on its administrative and conference facilities,
	and hosted several guests who are investigating supporting the ministry. [Foreign organization.]
	•
	•
4d	Other program services (Describe in Schedule O.)
4 -	(Expenses \$ 1,067.00 including grants of \$ 1,067.00) (Revenue \$ 0)
4e	Total program service expenses ▶ 284,583.00



Form 99	0 (2014)	Ü	F	age 3
Part				
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	/	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		✓
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		✓
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		→
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	» \$	ilip-	*
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	-4	-
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		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	1	
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	<u> </u>	1
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		1
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		\ \ \
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	-	1
20 a		20a	\vdash	1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		Ė

Part I	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 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
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		√
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
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		1
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).	58	*	* 1
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	
			00	0.0044

Part	V , Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		<u>.</u>	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			-
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10		-
Za	Statements, filed for the calendar year ending with or within the year covered by this return 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		-
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			١,
	account)?	4a		/
b	If "Yes," enter the name of the foreign country:	ļ		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			l
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		 _
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		+
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		<u> </u>	1
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		/
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	_		
	gifts were not tax deductible?	6b		1
7	Organizations that may receive deductible contributions under section 170(c).	3^	*	g.
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			.
L	and services provided to the payor?	7a	-	↓ ✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		+
·	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	``	1	+
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ ·	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	ļ	<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	l		
•	sponsoring organization have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		+-
10	Section 501(c)(7) organizations. Enter:		1	+
а	Initiation fees and capital contributions included on Part VIII, line 12			İ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b]		ŀ
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	4		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		1	
100	· · · · · · · · · · · · · · · · · · ·		+	-
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b	12a	1-	+
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	1	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	 	+
_	Note. See the instructions for additional information the organization must report on Schedule O.		1	1
b	Enter the amount of reserves the organization is required to maintain by the states in which	1		
	the organization is licensed to issue qualified health plans]	1	1
С	Enter the amount of reserves on hand	<u> </u>	<u> </u>	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
Ь	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b	1	1

Part '	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O contains a response or note to any line in this Part VI			ons. ☑
Section	on A. Governing Body and Management	· · · · ·	•	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			1
	If there are material differences in voting rights among members of the governing body, or		1	1
	if the governing body delegated broad authority to an executive committee or similar		1	
	committee, explain in Schedule O.	1		ļ
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 3			İ
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		. —	
	any other officer, director, trustee, or key employee?	2]	✓_
3	Did the organization delegate control over management duties customarily performed by or under the direct		Ì	,
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		<u>✓</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	6	-+	*
6	Did the organization have members or stockholders?	•		<u>~</u>
7a	one or more members of the governing body?	7a	İ	1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	/a		<u> </u>
D	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	10		
•	the year by the following:	*		
а	The governing body?	8a	1	~
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓_
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.)	
			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		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	- <u>*</u>		ļi
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	√	
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	•	
С	describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13		17
14	Did the organization have a written document retention and destruction policy?	14		12
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?			
а	The organization's CEO, Executive Director, or top management official	15a	√	
b	Other officers or key employees of the organization	15b	✓	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			ŧ.
16a			-	
	with a taxable entity during the year?	16a		✓
b				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
Coot	organization's exempt status with respect to such arrangements?	16b		Щ.
<u>Sect</u>	ion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Tennessee			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501	(c)(3)s	only)
	available for public inspection. Indicate how you made these available Check all that apply.		, , -	
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	terest	polic	y, and
-	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and re	ecords	: ▶	
	Jeff Nevels, 8653 Riverchase Dr., Germantown, TN 38139 (901)753-7954			
_		=	00/	(2014)

* Approved by the board October 5,2015.

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Page	•

Form	aan	/201	1

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if porther the expansation per any related expansation compensated any current officer, director, or trustee

Check this box if neither the organization no	r any relate	d orga	anız			ompe	nsa	ted any curren	t officer, director	, or trustee.
				(0	-					
(A)	(B)	(do n		Pos		than c	nne	(D)	(E)	(F)
Name and Title	Average hours per week (list any	box, i	unles er and	s pe la d	rson irect	is both or/trust	an ee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Taylor Park - President	22	1		✓				0	0	0
(2) Jon Roberts - Secretary	2	1		1				0	0	0
(3) Jeff Nevels - Treasurer	6	1		1				0	0	0
(4)										
(5)										
(6)										
(8)										
(9)										
(10)				-						
(11)	ļ									
(12)	-									
(13)	-									
(14)			T							

	(A) Name and title	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) week (list any o = = O X Ø X T T										(F) Estimated amount of
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	trom the organization (W-2/1099-MISC)	related organizatio (W-2/1099-M		other compensation from the organization and related organizations
(15)						l	_					
(16)												
(17)												
(18)								-				
(19)												
(20)												-
(21)												
(22)												
(23)		 										
(24)												
(25)												
1b c d	Sub-total	VII, Section		-	-	-	· ·	> > >	0		0	0
2	Total number of individuals (including bu reportable compensation from the organ	t not limited						e) v	vho received m	ore than \$1	00,00	00 of
3	Did the organization list any former o employee on line 1a? If "Yes," complete								ployee, or high	· · · · · · · · · · · · · · · · · · ·	nsate	3 /
4	For any individual listed on line 1a, is the organization and related organizations individual		•			•				•		1257 7881 4 686 7 1
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or ind	dıvıdu 	al 5 1
Secti	on B. Independent Contractors	· · · · · ·		-	-	-	•		• • • • • • • • • • • • • • • • • • • •			1, 4
1	Complete this table for your five highest compensation from the organization. Re year.	•										
	(A) Name and business ad	dress							(B) Description of	services		(C) Compensation
No co	ntractors were used.					_		F				
								F				
	Total number of independent contract	ors (includi	ng b	ut r	not	lım	ted to	o t	hose listed at	pove) who	<u> </u>	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	received more than \$100,000 of comper								0		N. S.	

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

Part	ΛΙĴΙ	Statement of Reve					D-4 VIII				
,		Check if Schedule O	contains	a res	oonse or note to	(A) Total revenue	(B) Related of exempt function revenue	r	(C) Unrelated business revenue	exc	(D) Revenue cluded from tax nder sections 512-514
ts	1a	Federated campaigns		1a	0					1	
퉏짓	ь	Membership dues .		1b	0						1
2 E	C	Fundraising events .		1c	0						f
# #	d	Related organizations		1d	0						
S, ∰	e	Government grants (con		1e	0						
Sig	f	All other contributions, gi								1	i
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts not incl		1f	293,198.38						1
풀이	g	Noncash contributions includ	led in lines 1a		0					'	1
2 5	h	Total. Add lines 1a-1				293,198.38					i
		TO CALLET A CONTRACT A			Business Code	200,100.00				†	
eur.	2a					l				- 	
Program Service Revenue	ь				 					+	
ဗ	c									+	
ervi	ď									+-	
пŠ	e									+	
јгаг	f	All other program sen									
č	g	Total. Add lines 2a-2				0			L	٠	
	3	Investment income	(including	dıvid	ends interest		 		T	Т	
	•	and other similar amo				40.25		^			46.25
	4	Income from investment	•			46.35		<u>0</u> 0) 	46.35
	5				•	0		0		<u>, </u>	0
	"	Royalties	(i) Rea	<u> </u>	(ii) Personal	<u>_</u>		<u> </u>	/4	<u>ار</u> ۱	0
	6a	Gross rents			(1) (1)	7		•			
									'	1 '	`
	b	Less rental expenses Rental income or (loss)				·> ·					
	C	Net rental income or ((1000)		· · · •				l		
	d 7a	Gross amount from sales of	(i) Securi	ties	(ii) Other	. 0	0 / (0	1	D	0
	'a	assets other than inventory	(i) decail	-	(ii) Other	/ \ ×					
	١.	Less: cost or other basis				-			* *	*	ı
	b	and sales expenses				*					
	_	·				1					
	C	Gain or (loss)			1				<u> </u>		
	d	Net gain or (loss) .		•	<u> ▶</u>	0		0		0	0
Revenue	8a	Gross income from fuevents (not including \$	ındraısıng							***************************************	
_	ľ	of contributions reported See Part IV, line 18 .		ic). · a	II						
Other	b	Less: direct expenses	s	. b]			1		
_	С	Net income or (loss) f			events . ►	0				0	0
	9a	Gross income from ga	aming activ	uties.							
		See Part IV, line 19		· a		ļ					
	ь	Less: direct expenses	s	. b		1]				
	С	Net income or (loss) f	rom gamı	ng act	ivities ►	0		O		oĺ	O
	10a	Gross sales of in	ventory,	less						1	
		returns and allowance	es	· a	1					-	
	Ь	Less: cost of goods s	sold	. b		1			1		
	С	Net income or (loss) f	rom sales	of inv	entory . >	1 .	1	0	1	اه	a
		Miscellaneous F			Business Code	1				+	
	11a	 .				1		-	1		
	Ь		••							\top	
	c	***************************************	•••			1			 	+	
	d	All other revenue .	••••••			<u> </u>	<u> </u>		 	+	
	e	Total. Add lines 11a-				 			T	+-	
	12	Total revenue. See				293 244 73	 				46.35

Part IX Statement of Functional Expenses

Sectioi	n 501(c)(3) and 501(c)(4) organizations must com			s must complete co	lumn (A).
	Check if Schedule O contains a respons	se or note to any lir		<u> </u>	
	include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,067.00	1,067 00		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0	`	-
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign			^	
	individuals. See Part IV, lines 15 and 16	283,516.00	283,516.00	•	
4	Benefits paid to or for members	0	0	*	
5	Compensation of current officers, directors,				<u> </u>
•	trustees, and key employees	ام	0	o	٥
6	Compensation not included above, to disqualified				<u>_</u>
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				^
-		0	0	0	
7 8	Other salaries and wages	0	0	0	0
0	section 401(k) and 403(b) employer contributions)	_ ا	_	_	_
•		0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (non-employees):				•
a	Management	0	0	0	0
D	Legal	0	0	0	0
C	Accounting	0	0	0	0
d	Lobbying	<u>-</u>	. 0	U	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column	0	0	0	0
9	(A) amount, list line 11g expenses on Schedule O.)				
40	- 1	0	U	0	- 0
12	Advertising and promotion	0	0		<u> </u>
13 14	Office expenses	21.94	0	21.94	0
15	Information technology	0	0		
16	Royalties	0	0		
17	Travel	0	0	0	0
18	Payments of travel or entertainment expenses			-	
	for any federal, state, or local public officials	0	,	0	_
19	Conferences, conventions, and meetings .	0	0		<u> </u>
20	Interest	0		· · · · · · · · · · · · · · · · · · ·	· · · · · ·
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0		 	
23	Insurance	0	· · · · · · · · · · · · · · · · · · ·		
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.)				
а	State of TN annual filing	20.00	O	20.00	0
b	Website donation fees	1,818.48		1,818.48	
С	Wire transfer fees (bank)	715.00		715.00	
d	PayPal fees	170.56		170.56	
е	All other expenses	0	c	0	0
25	Total functional expenses. Add lines 1 through 24e	287,328.98	284,583.00	2,745.98	0
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and		1		
	fundraising solicitation. Check here ▶ ☐ If				
	following SOP 98-2 (ASC 958-720)				

	art λ				
		Check if Schedule O contains a response or note to any line in this Pa	rt X	<u> </u>	<u></u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	7,125.68	1	13,041.43
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,	*< * '	Ü	
		trustees, key employees, and highest compensated employees.		Ť	
		Complete Part II of Schedule L	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section	· 14 () () W/()	300	· '
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and	State State Control	\$6 '	
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary	*******		
Ø		organizations (see instructions). Complete Part II of Schedule L	0	6	
Assets	7	Notes and loans receivable, net	0	7	0
As	8	Inventories for sale or use	0		0
	9	Prepaid expenses and deferred charges	0		0
	10a	Land, buildings, and equipment: cost or	•	Ť	Ĭ
		other basis. Complete Part VI of Schedule D 10a 0	\$ > & /		۲ .
	ь	Less: accumulated depreciation 10b 0	0	10c	0
	11	Investments – publicly traded securities	0	_	Ö
	12	Investments – other securities. See Part IV, line 11	0		0
	13	Investments—program-related. See Part IV, line 11	0		0
	14	Intangible assets	0	-	0
	15	Other assets. See Part IV, line 11		1	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	7,125.68		13,041.43
	17	Accounts payable and accrued expenses	7,123.00		13,041.43
	18	Grants payable	0		0
	19	Deferred revenue	0	_	0
	20	Tax-exempt bond liabilities	0		0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0		0
G	22	Loans and other payables to current and former officers, directors,	· · · · · · · · · · · · · · · · · · ·		
Liabilities		trustees, key employees, highest compensated employees, and	. 🔌 🛊 🗸		* ·
<u> </u>		disqualified persons. Complete Part II of Schedule L	0	22	
Ë	23	Secured mortgages and notes payable to unrelated third parties	0	_	0
	24	Unsecured notes and loans payable to unrelated third parties	0		0
	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	o	25	
	26	Total liabilities. Add lines 17 through 25	0	•	0
_		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
ės		complete lines 27 through 29, and lines 33 and 34.	« »,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,
anc	27	Unrestricted net assets	0	27	0
ä	28	Temporarily restricted net assets	0	† 	0
P	29	Permanently restricted net assets	0	+	0
ڃ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and		 _	
노		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	7,125.68	30	13,041.43
set	31	Paid-in or capital surplus, or land, building, or equipment fund	7,123.66	 -	13,041.43
Ą	32	Retained earnings, endowment, accumulated income, or other funds.	0	† -	0
et	33	Total net assets or fund balances	7,125.68	+ -	13,041.43
Z	34	Total liabilities and net assets/fund balances	7,125.68	+-	
			1 1.150.00		10,071.40

	Pa	ge 12
		_
	<u> </u>	
	293,2	<u>44.73</u>
	287,3	
		<u>15.75</u>
	7,1	<u> 25.68</u>
		0
		0
		0
		<u>0</u>
	13,0	41.43
		_
	• •	
	Yes	No
		200
2a		√
	120	

Form 99	30 (2014)			Page 12
Parl	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>	<u> Ц</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u> 293,244.73</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>287,328.98</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		5,915.75
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		7,125.68
5	Net unrealized gains (losses) on investments	5		0
6	Donated services and use of facilities	6		0
7	Investment expenses	7		0
8	Prior period adjustments	8		. 0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10		13,041.43
Parl	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u></u>	<u> </u>
				Yes No
1	Accounting method used to prepare the Form 990: 🗸 Cash 🔲 Accrual 🔲 Other			
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın ın		
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	✓
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled 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	✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a		
	separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		74	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	ersight		
	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, ex	plaın ın	4.4	第
	Schedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in		
	the Single Audit Act and OMB Circular A-133?		3a	✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo the		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b	

Form **990** (2014)

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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** 46-2247628 Integrity Discipleship Partners 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). 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.) 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 331/3% 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 331/3% 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. 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. 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iv) Is the organization (iii) Type of organization (v) Amount of monetan (vi) Amount of (described on lines 1-9 listed in your governing other support (see document? above or IRC section instructions) instructions) (see instructions)) Yes No (A) (B) (C) (D) (E)

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	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			· .	67,032.00	293,198.38	360,230.38
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge				0	0	0
4	Total. Add lines 1 through 3	-		<u>.</u>	67,032.00	293,198.38	360,230.38
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)	* *	* * * *		\(\frac{1}{2}\)	; * *	0
6	Public support. Subtract line 5 from line 4		<u> </u>				360,230.38
Secti	on B. Total Support	•	<u> </u>				
Calen	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4				67,032.00	293,198.38	360,230.38
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				11.99	46.35	58.34
9	Net income from unrelated business activities, whether or not the business is regularly carried on				0	0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				0	0	0
11	Total support. Add lines 7 through 10		<u></u>		**** - 4		360,288.72
12	Gross receipts from related activities, etc	•				12	360,230.38
13	First five years. If the Form 990 is for the	-					
	organization, check this box and stop he		<u> </u>		· · · · ·		· · > 🗸
	on C. Computation of Public Support					T 1	
14	Public support percentage for 2014 (line					14	<u>%</u>
15	Public support percentage from 2013 Sci				 d loog 4.4 o 221	15	%
16a	331/3% support test—2014. If the organi box and stop here. The organization qua						
b	331/3% support test—2013. If the organ	•		•			
U	check this box and stop here. The organ						
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the "torganization	014. If the org	anization did n -and-circumsta	ot check a bo inces" test, ch	c on line 13, 16 eck this box a	a, or 16b, and	line 14 is Explain in supported
L	•					 So 16h 17-	► □
ь	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	ation meets the meets the "fact	e "facts-and-c ts-and-circums	ircumstances" stances" test.	' test, check ti The organization	his box and st	t op here . a publicty
10	supported organization					k this hav and	▶ [] Isee
18	instructions						

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.

Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number Integrity Discipleship Partners 46-2247628 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I 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? . . . ✓ Yes □ No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of offices in the region (a) Region (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total employees, agents, and independent region (by type) (e.g., fundraising, program services, investments, a program service, describe specific type of service(s) in region expenditures for and investments in region contractors in region grants to recipients located in the region) (1) Czech Republic 0 0 program services discipleship / training 283,516.00 (2) (3)(4) (5) (6)(7) (8) (9) (10)(11) (12) (13)(14) (15) (16)(17)Sub-total За 283,516 00 Total from continuation sheets to Part I . . . 0

c Totals (add lines 3a and 3b)

283,516.00

Schedule F (Form 990) 2014

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

	- 21.4,	2,5		ו מונוץ, ווופ וט, וטו מון וכסוף מון וכסוף מו וווסוס נוומו לכן כסוים מון מו מון מון וכסוף מון אווס וכסוף מון וווסוס נוומו לכן כסוים מון מון וכסוף מון מון וווסוס נוומו לכן מון לכן מון מון וווסוס נוומו לכן מון מון מון מון מון מון מון מון מון מו	3,000,000	ייים שמיים שה סמי			1.
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other) -
Ξ			Czech Republic	Staff salaries/program	216,308.00	216,308.00 wire transfer	0		
<u>(8</u>			Czech Republic	Church programs	37,208.00	37,208.00 wire transfer	0		
<u> </u>			Czech Republic	Construction/salary	30,000.00	30,000.00 wire transfer	0		
3									ì
(2)									
(9)									
8			:						
8									
6									
(10)									
E					:				
(12)									
(13)									
£.									
(15)									
(16)									
8	Enter total nu	mber of recipie	ent organizations lis	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt	gnized as charitie	s by the foreign coun	itry, recognized as ta	ax-exempt	
1		ration to the time						٠ ــــــــــــــــــــــــــــــــــــ	

Schedule F (Form 990) 2014

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entitles

က

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2014

Part III Grants ar

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(a) Type of grant or assistance	(b) Region	recipients	cash grant	cash disbursement	non-cash assistance	(g) Description of non-cash assistance	(book, FMV, appraisal, other)
(1) man							
(2)							
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Part	IV	Foreign Forms		
1	the	s the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign poration (see Instructions for Form 926).	☐ Yes	√ No
2	ma _. Red	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization by be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and ceipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	☐ Yes	 ✓ No
3	the	I the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Italian Foreign Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	qua Info	is the organization a direct or indirect shareholder of a passive foreign investment company or a alified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, ormation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing and (see Instructions for Form 8621)	☐ Yes	✓ No
5	the	If the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain reign Partnerships (see Instructions for Form 8865)	☐ Yes	☑ No
6	"Ye	the organization have any operations in or related to any boycotting countries during the tax year? If es," the organization may be required to file Form 5713, International Boycott Report (see Instructions Form 5713, do not file with Form 990)	☐ Yes	☑ No

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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).

In order to receive grant funds, foreign organizations must complete a grant application. The board of Integrity Discipleship Partners reviews
the application in detail to ensure the requesting organization meets the mission and purpose criteria. If the application is approved and
funds are provided, the receiving organization must provide the following reports on a semi-annual basis:
a. Grant Project Report - a narrative describing organization activities, goals achieved since the last report, objectives for the next
reporting period, and challenges faced in meeting stated goals.
b. Grant Fund Transaction Report - a spreadsheet listing the funds transferred to the receiving organization with a section for the
organization to detail how the funds were used.
In addition to the above reports, board members frequently travel to the Czech Republic and meet with receiving organization leaders to
observe organization activities.
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SCHEDULE 0 (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.

OMB No 1545-0047 2014

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Integrity Discipleship Partners

► 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.

Inspection Employer identification number

46-2247628

Form 990 Part III, line 4d: \$1,067.00 donated to Cord Ministries, a U.S. non-profit organized to support and encourage those involved in
ministry overseas, a mission similar to that of Integrity Discipleship Partners.
Form 990 Part VI, line 11b the final version of the annual Form 990 is made available to the directors to review before filing. In addition th
draft return is reviewed by a certified public accountant pro bono.
Form 990 Part VI, line 12c: the Conflict of Interest Policy clearly outlines each board members' duty to report an actual or possible conflic
of interest to the other board members for evaluation and disposition. This policy is reviewed and affirmed annually by all board members
Form 990 Part VI, line 15a & 15b none of the organization's board members or directors receive compensation.
Form 990 Part VI, line 19: the statement "Copies of governing documents, the conflict of interest policy, and financial statements are
available upon request. Requests can be forwarded to integritydiscipleshippartners@gmail.com" is posted to donation receipts and the
donation website.