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OMB No 1545-0052

Open to Public

Department of the Treasury Internal Revenue Service

Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

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

▶ Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>. Inspection

| | | ndar year 2015, or tax year beginning 04-0 | 1-2015 | , a | nd ending 0 | | |
|---------------------------------------|----------------------|--|------------------------------------|-----|------------------------|--|--|
| | e of four CHNICAL | ndation LASSISTANCE MISSION | | | ' ' | entification numb | er |
| | | | | | 23-7241202 | | |
| | | street (or P O $$ box number if mail is not delivered to street address) AINE STREET | Room/suite | | | nber (see instruction | is) |
| | | | | | (989) 635-7186 | | |
| | | state or province, country, and ZIP or foreign postal code II 48453 | | | C If exemption | application is pendin | g, check here |
| G C | neck all | that apply Initial return Initial return of a f | former public charity | | D 1. Foreign or | ganizations, check h | ere • |
| | | Final return A mended return | | | | | Γ |
| | | Address change Name change | | | | ganizations meeting chere and attach co | |
| H Ch | eck ty | pe of organization | te foundation | | | ndation status was in 507(b)(1)(A), chec | |
| S | ection | 4947(a)(1) nonexempt charitable trust Other taxab | • | | | | - |
| of۱ | ear <i>(fr</i> | t value of all assets at end rom Part II, col (c), Second for a first formula of the first fo | V Cash | al | 1 | tion is in a 60-mont i 507(b)(1)(B), chec | |
| Pa | rt I | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) | Revenue and expenses per (a) books | (b) | Net investment income | Adjusted net (c) income | Disbursements for charitable purposes (d) (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , received (attach | | | | | |
| | | schedule) | 500,000 | | | | |
| | 2 | Check ► ☐ If the foundation is not required to attach | | | | | |
| | 3 | Sch B Interest on savings and temporary cash investments | 19,653 | | 19,653 | | |
| | 4 | Dividends and interest from securities | 35,350 | | 35,350 | | |
| | 5a | Gross rents | 40,764 | | 40,764 | | |
| | ь | Net rental income or (loss)9,077 | | | | | |
| E e | 6a | Net gain or (loss) from sale of assets not on line 10 | 12,739 | | | | |
| Reverkie | ь | Gross sales price for all assets on line 6a 992,739 | | | | | |
| _ | 7 | Capital gain net income (from Part IV, line 2) | | | 12,739 | | |
| | 8 | Net short-term capital gain | | | | | |
| | 9 | Income modifications | | | | | |
| | 10a | Gross sales less returns and allowances | | | | | |
| | b | Less Cost of goods sold | | | | | |
| | c | Gross profit or (loss) (attach schedule) | | | | | |
| | 11 | Other income (attach schedule) | | | | | |
| | 12 | Total.Add lines 1 through 11 | 608,506 | | 108,506 | | |
| | 13 | Compensation of officers, directors, trustees, etc | | | | | |
| | 14 | Other employee salaries and wages | | | | | |
| 6S | 15 | Pension plans, employee benefits | | | | | |
| Sus | 16a | Legal fees (attach schedule) | | | | | |
| × | b | Accounting fees (attach schedule) | 5,775 | | | | 4,331 |
| ė. H | С | Other professional fees (attach schedule) | 7,350 | | 1,838 | | |
| ⋛ | 17 | Interest | | | | | |
| <u> </u> | 18 | Taxes (attach schedule) (see instructions) | 9 872 | | 872 | | |
| ≣ | 19 | Depreciation (attach schedule) and depletion | 29,987 | | | | |
| 들 | 20 | Occupancy | | | | | |
| <u> </u> | 21 | Travel, conferences, and meetings | | | | | |
| ਰ | 22 | Printing and publications | 95-1 45-015 | | 21 697 | | 12 614 |
| Operating and Administrative Expenses | 23 | Other expenses (attach schedule) | 45,915 | | 31,687 | | 13,614 |
| era | 24 | Total operating and administrative expenses. Add lines 13 through 23 | 89,899 | | 34,397 | | 17,945 |
| ă O | 25 | Contributions, gifts, grants paid | 303,524 | | J 1 ,J3/ | | 303,524 |
| | 26 | Total expenses and disbursements. Add lines 24 and | 555,521 | | | | 333,321 |
| | | 25 | 393,423 | | 34,397 | | 321,469 |
| | 27 | Subtract line 26 from line 12 | | | | | |
| | a | Excess of revenue over expenses and disbursements | 215,083 | | | | 1 |
| | b | Net investment income (If negative, enter -0-) | | | 74,109 | | |
| | С | Adjusted net income(If negative, enter -0-) | | | | | |

| ij | rt II | Ralance Sheets Attached schedules and amounts in the description column | beginning of year | | na oi | ı year |
|--------------|--------|--|------------------------|-------------------|-------|-----------------------|
| | | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | 78,378 | 18, | ,039 | 18,039 |
| | 2 | Savings and temporary cash investments | 2,481,129 | 1,516, | ,132 | 1,516,132 |
| | 3 | Accounts receivable ► | | | | 1 |
| | | Less allowance for doubtful accounts ▶ | | | | ĺ |
| | 4 | Pledges receivable ▶ | | | | |
| | | Less allowance for doubtful accounts ▶ | | | | |
| | 5 | Grants receivable | | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | | |
| | | disqualified persons (attach schedule) (see instructions) | | | | |
| | 7 | Other notes and loans receivable (attach schedule) ▶ | | | | |
| | | Less allowance for doubtful accounts ▶ | | | | |
| | 8 | Inventories for sale or use | | | | |
| cts | 9 | Prepaid expenses and deferred charges | | | | |
| Assets | 10a | Investments—U S and state government obligations (attach schedule) | | | | |
| | b | Investments—corporate stock (attach schedule) | | | | |
| | С | Investments—corporate bonds (attach schedule) | | | | |
| | 11 | Investments—land, buildings, and equipment basis ► 642,457 | | | | |
| | | Less accumulated depreciation (attach schedule) ► 228,025 | 426,765 | 414, | ,432 | 240,750 |
| | 12 | Investments—mortgage loans | | | | · |
| | 13 | Investments—other (attach schedule) | 3,238,568 | 4 ,521, | .307 | 4,470,138 |
| | 14 | Land, buildings, and equipment basis ► | | | | · · · |
| | | Less accumulated depreciation (attach schedule) ▶ 230,252 | 555,337 | 4 525, | .350 | 462,250 |
| | 15 | Other assets (describe) | | | | |
| | 16 | Total assets(to be completed by all filers—see the | | | | |
| | 10 | Instructions Also, see page 1, item I) | 6,780,177 | 6,995, | 260 | 6,707,309 |
| | 17 | Accounts payable and accrued expenses | | ,,,,,, | | |
| | 18 | Grants payable | | | | 1 |
| 98 | 19 | Deferred revenue | | | | |
| _iabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | |
| abı | 21 | Mortgages and other notes payable (attach schedule) | | | | |
| Π | 22 | Other liabilities (describe ► | | | | |
| | 23 | Total liabilities(add lines 17 through 22) | | | Ω | |
| | 23 | Foundations that follow SFAS 117, check here | | | _ | |
| Sé | | · · · · · · · · · · · · · · · · · · · | | | | |
| nce | 24 | and complete lines 24 through 26 and lines 30 and 31. | | | | |
| ala | 24 | Unrestricted | | | | |
| Fund Balance | 25 | Temporarily restricted | | | | |
| ınd | 26 | Permanently restricted | | | | |
| | | Foundations that do not follow SFAS 117, check here | | | | |
| 0 | | and complete lines 27 through 31. | | | | |
| Assets | 27 | Capital stock, trust principal, or current funds | | | | |
| 155 | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | | 1 |
| it A | 29 | Retained earnings, accumulated income, endowment, or other funds | 6,780,177 | 6,995, | | |
| Net | 30 | Total net assets or fund balances(see instructions) | 6,780,177 | | | |
| | 31 | Total liabilities and net assets/fund balances(see instructions) | 6,780,177 | 6,995, | ,260 | <u>I</u> |
| Pa | rt III | Analysis of Changes in Net Assets or Fund Balances | | | | |
| 1 | | Total net assets or fund balances at beginning of year—Part II, column (| (a), line 30 (must a | gree | | |
| | | with end-of-year figure reported on prior year's return) $\dots \dots$ | | 1 | | 6,780,177 |
| 2 | | Enter amount from Part I, line 27a | | 2 | | 215,083 |
| 3 | | Other increases not included in line 2 (itemize) ▶ | | 3 | | |
| 4 | | Add lines 1, 2, and 3 | | 4 | | 6,995,260 |
| 5 | | Decreases not included in line 2 (itemize) ▶ | | 5 | | |
| 6 | | Total net assets or fund balances at end of year (line 4 minus line 5)—Pa | art II, column (b), lı | ine 30 . 6 | | 6,995,260 |

Part IV Capital Gains and Losses for Tax on Investment Income

How acquired

| | | ehouse, or common stock, 200 shs | | P—Purchase (b) D—Donation | | mo , day, yr) | (d) (mo , day, yr) |
|--------------|---|--|--|-----------------------------------|-------|------------------|---|
| 1a | | | | | | | |
| b | | | | | | | |
| С | | | | | | | |
| d | | | | | | | |
| e | | | | | | | |
| (e |) Gross sales price | Depreciation allowed (f) (or allowable) | | or other basis expense of sale | | | or (loss) (f) minus (g) |
| а | | | | | | | |
| b | | | | | | | |
| С | | | | | | | |
| d | | | | | | | |
| e | | | | | | | |
| Со | mplete only for assets s | showing gain in column (h) and owne | d by the foundation | on 12/31/69 | + | Gains (Col | (h) gain minus |
| | FM V as of 12/31/69 | A djusted basis (j) as of 12/31/69 | Exc | ess of col (ı) col (j), ıf any | (1) | ol (k), but no | t less than -0-) or from col (h)) |
| а | | | | | | | |
| b | | | | | | | |
| С | | | | | | | |
| d | | | | | | | |
| e | | | | | | | |
| 2 | Capital gain net incoi | | If gain, also enter i If (loss), enter -0- | | 2 | | 12,739 |
| 3 | • | al gain or (loss) as defined in section Part I, line 8, column (c) (see instru | | | . _ | | |
| | <u> </u> | | · · · · | · · · / | 3 | | |
| f section | ional use by domestic pon 4940(d)(2) applies, l | Jnder Section 4940(e) for Reprivate foundations subject to the seleave this part blank e section 4942 tax on the distributation of qualify under section 4940(e). | ection 4940(a) tax of any state | on net investment | incon | ne) | ⊤Yes 🗸 No |
| 1 Ent | ter the appropriate amo | unt in each column for each year, se | e instructions befo | re makıng anv ent | ries | | |
| Base | (a) period years Calendar | (b) Adjusted qualifying distributions | (c) Net value of nonchar | <u> </u> | | (d) Distributio | |
| year (c | or tax year beginning in) 2014 | 284,182 | | 5,952,475 | | (col (b) divided | 0 047742 |
| | 2014 | 285,769 | | 6,064,410 | | | 0 047742 |
| | 2012 | 260,231 | | 6,059,152 | | | 0 042948 |
| | 2011 | 197,126 | | 7,066,422 | | | 0 027896 |
| | 2010 | 198,387 | | 7,152,394 | | | 0 027737 |
| 2 | Totalof line 1, column | n (d) | | | 2 | | 0 193445 |
| 3 | A verage distribution | ratio for the 5-year base period—div the foundation has been in existence | ride the total on line | e 2 by 5, or by | 3 | | 0 038689 |
| 4 | Enter the net value o | f noncharitable-use assets for 2015 | from Part X, line 5 | [| 4 | | 5,882,023 |
| 5 | Multiply line 4 by line | 23 | | [| 5 | | 227,570 |
| 6 | | stment income (1% of Part I, line 27 | | <u> </u> | 6 | | 741 |
| 7 | | | • | <u> </u> | 7 | | 228,311 |
| 8 | | ibutions from Part XII, line 4 | | L | 8 | | 321,469 |
| | | greater than line 7, check the box i | | _ | | sıng a 1% tax | <u>.</u> |

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation.

If "Yes," complete Part XIV

and addresses

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names

8h

9

10

Yes

No

No

| Par | t VII-A Statements Regarding Activities (continued) | | | age • |
|------------|---|--------|----------|-------|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | | |
| | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | No |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had | | | |
| | advisory privileges? If "Yes," attach statement (see instructions) | . 12 | | No |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Yes | |
| | Website address ►N/A | | | |
| 14 | The books are in care of ▶CHRISTY HINES Telephone no ▶(989) | 9)635- | 7186 | |
| | Located at ▶POBOX 335 MARLETTE MI ZIP+4 ▶48453 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here | | ▶ □ | _ |
| | and enter the amount of tax-exempt interest received or accrued during the year | | - 1 | |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over | | Yes | No |
| | a bank, securities, or other financial account in a foreign country? | 16 | | No |
| | See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial | | | |
| | Accounts (FBAR) If "Yes", enter the name of the foreign country ▶ | | | |
| Pai | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1 a | During the year did the foundation (either directly or indirectly) | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | ļ | | ļ |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | <u> </u> | ļ |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | ļ | | ļ |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| | for the benefit or use of a disqualified person)? $lacksquare$ Yes $lacksquare$ No | | | |
| | (6) A gree to pay money or property to a government official? (Exception. Check "No" | | | |
| | ıf the foundation agreed to make a grant to or to employ the official for a period | | | |
| | after termination of government service, if terminating within 90 days) Yes 🔽 No | | | ļ |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | l |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, | 1 | | I |
| | that were not corrected before the first day of the tax year beginning in 2015? | 1c | | |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | |
| | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| а | At the end of tax year 2015, did the foundation have any undistributed income (lines 6d | | | |
| | and 6e, Part XIII) for tax year(s) beginning before 2015? Yes ▼ No | ! | | ļ |
| | If "Yes," list the years ▶ 20, 20, 20 | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) | ٦. | | |
| _ | to all years listed, answer "No" and attach statement—see instructions) | 2b | | |
| С | ► 20 | | | |
| За | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at | | | |
| | any time during the year? | | | |
| b | If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation | i | | İ |
| | or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved | | | |
| | by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) | | | |
| | the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine | | | |
| | ıf the foundation had excess business holdings in 2015) | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | No |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | | |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? | 4b | L | No |

| | 990-PF (2 t VII-B | | ardir | na Activities for | Wh | ich Form 4720 | Max | Be Required <i>(Cont</i> | inue | d) | Page 6 |
|------------|-----------------------------|-------------------------------------|---------|------------------------------|--------|-----------------------|-------|--|-----------|----------|---------------|
| 5a | | year did the foundation | | | | | , | De Required (serve | | -, | |
| Ju | _ | on propaganda, or othe | | • | | ıslatıon (section 49 | 45(e |)) [?] | - No | | |
| | (2) Influer | nce the outcome of any | spec | ific public election (| see | section 4955), or to | carı | · | , 110 | | i |
| | | ectly or indirectly, any | • | · | | , , | | · | _ No | | |
| | (3) Provid | e a grant to an individ | ual for | travel, study, or oth | nersi | mılar purposes? | | ☐ Yes 「 | Z No | İ | İ |
| | (4) Provid | e a grant to an organiz | ation | other than a charita | ble, e | etc , organization de | scrib | • | , 110 | i i | İ |
| | in sect | cion 4945(d)(4)(A)? (s | ee in: | structions) | | | | · · · · TYes | _ ✓ No | | |
| | | e for any purpose othe | | | | | | , , , , | | İ | j |
| | educat | tional purposes, or for | the pr | evention of cruelty t | o ch | ıldren or anımals?. | | · · · F Yes 5 | _ ∕ No | | |
| b | If any ans | werıs "Yes" to 5a(1)- | (5), d | ıd any of the transac | tions | fail to qualify under | the | exceptions described in | | İ | j |
| | Regulation | ns section 53 4945 or | ın a c | urrent notice regard | ıng c | isaster assistance | (see | instructions)? | | 5b | |
| | O rganızatı | ons relying on a curre | nt not | ice regarding disast | eras | sistance check here | e | | | | |
| | T.C | | _ , | | | | | Γ | _ | 1 1 | 1 |
| С | | wer is "Yes" to question | , | • • | | • | | | _ | | |
| | | | | | | | • | · · · · · TYes | No | | l I |
| _ | • | tach the statement req | | , , | | ` , | | | | | |
| 6 a | | Indation, during the ye | • | • | • | | prer | | _ | | |
| | | benefit contract? | | | | | • | · · · Tyes | | | |
| Ь | | | ar, pa | y premiums, directly | or I | ndirectly, on a perso | onal | penefit contract? | • | 6b | No |
| _ | | 6b, file Form 8870 | | | | | | | | | |
| | • | e during the tax year, | | | | | | 1 .65 [| • | | |
| b | | | | | | | | he transaction? | | 7b | |
| Par | | Information Abou and Contractors | it Of | ficers, Directors | , Tı | ustees, Founda | itio | n Managers, Highly | Paid | Emplo | yees, |
| <u> </u> | | cers, directors, truste | es, foi | undation managers a | nd t | heir compensation (| see i | nstructions). | | | |
| | | · · | Í | Title, and average | | Compensation(If | | (d) | | | |
| | (a) Nan | ne and address | | hours per week | (, | not paid, enter | | Contributions to | 1 | | account, |
| | | | (b) | devoted to position | | -0-) | | mployee benefit plans deferred compensation | (e) (| otner am | owances |
| DAVID | HALL | | PRE | SIDENT | | 0 | | . 0 | | | 0 |
| РО В | O X 335 | | 2 00 |) | | | | | | | |
| | LETTE,MI | 48453 | | | | | | | | | |
| | OTTE HALL | | TRE | ASURER | | 0 | | 0 | | | 0 |
| | OX 335 LETTE,MI | 48453 | 1 00 | , | | | | | | | |
| | TY HINES | 10.133 | SEC | RETARY | | 0 | | 0 | | | 0 |
| | O X 335 | | 1 00 | | | · · | | · · | | | · · |
| MAR | LETTE,MI | 48453 | | | | | | | | | |
| _2 | Compensat | ion of five highest-pai | d emp | oloyees (other than t | thos | e included on line 1- | -see | instructions). If none, e | nter "N | IONE." | |
| | | (a) | | Title, and aver | | | | Contributions to employee benefit | | vnanca | account, |
| Nan | | ess of each employee | paıd | hours per wee | | (c) Compensatio | n | plans and deferred | | | owances |
| | mor | e than \$50,000 | | (b) devoted to posi | tion | | | (d) compensation | <u> </u> | | |
| NON | E | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
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| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | 1 | | |

Total number of other employees paid over \$50,000.

3,530,602

2,226,245

5,971,597

214,750

741

293,360

293.360

293,360

321,469

321,469

320,728

Form **990-PF** (2015)

741

Minimum Investment Return

| | | | | , | | |
|---|------|--------|--------|---------|--------|------|
| (| (All | domest | ic fou | ndatioi | ns mus | st c |

Part X

Distributable Amount

Fair market value of all other assets (see instructions).

Reduction claimed for blockage or other factors reported on lines 1a and

check here ► and do not complete this part.)

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

complete this part. Foreign foundations, see instructions.)

Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes

1e

1a 1b 1c

1d

2

3

2c

3

4

5

6

7

1a

1b

2

За

3b

4

5

5,971,597

4 89,574 5 5,882,023 294,101 (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations 1 294,101

Part XI 1

2a

3

4

5

6

7

1

2

5

Part XII

2

3

5

Tax on investment income for 2015 from Part VI, line 5. 2a Income tax for 2015 (This does not include the tax from Part VI). . .

2b Distributable amount before adjustments Subtract line 2c from line 1. Recoveries of amounts treated as qualifying distributions.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Deduction from distributable amount (see instructions).

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, qifts, etc —total from Part I, column (d), line 26.

| P | art XIII Undistributed Income (see instr | uctions) | | | |
|----|---|----------|---------------------|---------|---------------|
| | | (a) | (b) | (c) | (d) |
| | | Corpus | Years prior to 2014 | 2014 | 2015 |
| | Distributable amount for 2015 from Part XI, line 7 | | | | 293,360 |
| | Undistributed income, if any, as of the end of 2015 | | | 174 472 | |
| | Enter amount for 2014 only | | | 174,473 | |
| | Total for prior years 20, 20, 20 | | | | |
| | Excess distributions carryover, if any, to 2015 | | | | |
| a | | | | | |
| b | | | | | |
| C. | From 2013 | | | | |
| | From 2014 | | | | |
| | Total of lines 3a through e | | | | |
| | Qualifying distributions for 2015 from Part | | | | |
| _ | XII, line 4 \$ 321,469 | | | | |
| а | Applied to 2014, but not more than line 2a | | | 174,473 | |
| | Applied to undistributed income of prior years | | | | |
| _ | (Election required—see instructions) | | | | |
| c | Treated as distributions out of corpus (Election | | | | |
| | required—see instructions) | | | | |
| d | Applied to 2015 distributable amount | | | | 146,996 |
| е | Remaining amount distributed out of corpus | | | | |
| 5 | Excess distributions carryover applied to 2015 | | | | |
| | (If an amount appears ın column (d), the same amount must be shown ın column (a)) | | | | |
| 6 | Enter the net total of each column as indicated below: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| | Prior years' undistributed income Subtract | | | | |
| _ | line 4b from line 2b | | | | |
| c | Enter the amount of prior years' undistributed | | | | |
| | income for which a notice of deficiency has | | | | |
| | been issued, or on which the section 4942(a) tax has been previously assessed. | | | | |
| ч | Subtract line 6c from line 6b Taxable amount | | | | |
| u | —see instructions | | | | |
| e | Undistributed income for 2014 Subtract line | | | | |
| | 4a from line 2a Taxable amount—see | | | | |
| | instructions | | | | |
| f | Undistributed income for 2016 Subtract | | | | |
| | lines 4d and 5 from line 1 This amount must be distributed in 2015 | | | | 146,364 |
| 7 | A mounts treated as distributions out of | | | | |
| • | corpus to satisfy requirements imposed by | | | | |
| | section 170(b)(1)(F) or 4942(g)(3) (Election may | | | | |
| | be required - see instructions) | | | | |
| 8 | Excess distributions carryover from 2010 not | | | | |
| _ | applied on line 5 or line 7 (see instructions) | | | | |
| 7 | Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a | | | | |
| 0 | Analysis of line 9 | | | | |
| | Excess from 2011 | | | | |
| | Excess from 2012 | | | | |
| | Excess from 2013 | | | | |
| | Excess from 2014 | | | | |
| е | Excess from 2015 | | | | |
| | | | | Form | 990-PF (2015) |

| or | m 990-PF (2015) | | | | | Page 10 |
|--------|--|---------------------------|---------------------|----------------------|-----------------------|----------------|
| | Part XIV Private Operating Foundate | t ions (see instru | ictions and Part | VII-A, question | 1 9) | |
| | If the foundation has received a ruling or determined foundation, and the ruling is effective for 2015, | enter the date of t | he ruling | ▶ ∟ | | |
| | Check box to indicate whether the organization | is a private operat | ting foundation de | scribed in section | 4942(j)(3) or | 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | | (e) Total |
| | investment return from Part X for each | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | |
| | year listed | | | | | |
| b | 85% of line 2a | | | | | |
| С | Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d | A mounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| е | Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the | | | | | |
| | alternative test relied upon | | | | | |
| а | "Assets" alternative test—enter | | | | | |
| | (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b | "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| С | "Support" alternative test—enter | | | | | |
| | Total support other than gross investment income (interest, | | | | | |
| | dividends, rents, payments on securities loans (section | | | | | |
| | 512(a)(5)), or royalties) | | | | | |
| | (2) Support from general public and 5 or more exempt | | | | | |
| | organizations as provided in section 4942(j)(3)(B)(III) | | | | | |
| | (3) Largest amount of support | | | | | |
| | from an exempt organization | | | | | |
| P)= | (4) Gross investment income Int XV Supplementary Information (4) | Complete this | nart only if th | e organizatio | | more in |
| - 0 | assets at any time during the | | | e organizatio | ii iiaa 45,000 oi | more m |
| L a | Information Regarding Foundation Managers: List any managers of the foundation who have o | ontributed more th | an 2% of the tota | | | tion |
| | before the close of any tax year (but only if the | • | | | | |
| b | List any managers of the foundation who own 10 ownership of a partnership or other entity) of whether the state of the foundation who own 10 ownership or other entity) of whether the state of the foundation who own 10 ownership or other entity) of whether the foundation who own 10 ownership or other entity) of whether the foundation who own 10 ownership or other entity) of whether the foundation who own 10 ownership or other entity) of whether the foundation who own 10 ownership or other entity) of which is the foundation who own 10 ownership or other entity) of whether entity of the foundation who own 10 ownership or other entity) of which is the foundation who ownership or other entity) of which is the foundation of the foundation who ownership or other entity) of the foundation who ownership or other entity) of the foundation whether the foundation where the foundation whether the foundation where the foundation wher | | • | | vlarge portion of the | |
| 2 | Information Regarding Contribution, Grant, Gif | t, Loan, Scholarshi | p, etc., Programs: | | | |
| | Check here $\blacktriangleright \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $ | n makes gifts, gran | | - | • | under |
| а | The name, address, and telephone number or e | mail address of the | e person to whom | applications shou | ld be addressed | |
| b | The form in which applications should be subm | itted and informati | on and materials t | they should includ | e | |
| c | Any submission deadlines | | | | | |
| d | Any restrictions or limitations on awards, such factors | as by geographica | al areas, charitabl | e fields, kinds of i | nstitutions, or other | |

Form 990-PF (2015)

Part XV Supplementary Information(continued)

| Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | | | | |
|---|---|-------------------------|---------------------|---------|--|--|--|--|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or | A mount | | | | |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | contribution | | | | | |
| Name and address (home or business) a Paid during the year See Additional Data TableSee Additional Data Table | or substantial contributor | recipient | Contribution | | | | | |
| | | | | | | | | |
| | <u> </u> | | ▶ 3a | 303,524 | | | | |
| b Approved for future payment | | | | | | | | |
| Total | | | ▶ 3b | | | | | |

| Enter gross | s amounts unless otherwise indicated | Unrelated bu | siness income | Excluded by section | 512, 513, or 514 | (e) Related or exempt |
|--------------------------------|---|--|-----------------------|-----------------------|-----------------------|--|
| 1 Progran | n service revenue | (a) Business code | (b) A mount | (c) Exclusion code | (d) A mount | function income (See instructions) |
| a | | | | | | , |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| f | | | | | | |
| _ | and contracts from government agencies ership dues and assessments | | | | | |
| 3 Interes | st on savings and temporary cash ments | | | 14 | 19,653 | |
| | nds and interest from securities | | | 14 | 35,350 | |
| | ntal income or (loss) from real estate | | | | | |
| | -financed property ebt-financed property | | | 16 | 9,077 | |
| 6 Net rer | ntal income or (loss) from personal ty | | | | | |
| 8 Gain oi | nvestment income | | | | | |
| | ome or (loss) from special events | | | 14 | 12,739 | |
| | profit or (loss) from sales of inventory | | | | | |
| | revenue a | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | al Add columns (b), (d), and (e). | | | 1 | 76,819 3 | 76,819 |
| | add line 12 collimns (b) (d) and (e). | | | | | , 0,013 |
| (See w | dd line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify | calculations) | | | | |
| (See w | vorksheet in line 13 instructions to verify -B Relationship of Activities to | calculations) o the Accomp | | | | ntly to |
| (See w | vorksheet in line 13 instructions to verify | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
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| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |
| (See w Part XVI Line No. | rorksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's | calculations) o the Accomp ich income is rep | oorted in column | (e) of Part XVI-A co | ntributed importa | |

| Part | | | egardin | n Transfers 1 | To and Trans | actions and | Relationships With | | Ра | ge 1. |
|----------------------|------------------|--|------------------------|--------------------|--|-------------------------------------|--|------------------|---------|-------|
| | | Noncharitable | | | | | Troid troil on po Trici. | | | |
| | | rganızatıon dırectly or ıı 01(c) of the Code (othe | | | | | | | Yes | No |
| orga | anızat | ions? | | | | | | | | ł |
| a Tra | nsfers | from the reporting four | ndation to | a noncharitable | exempt organiza | ation of | | | | |
| (1) | Cash | | | | | | | 1a(1) | | No |
| (2) | Othe | rassets | | | | | | 1a(2) | | No |
| b Oth | er tra | nsactions | | | | | | | | |
| | | | | | | | | 1b(1) | | No |
| | | hases of assets from a | | | | | | 1b(2) | | No |
| | | | | | | | | 1b(3) | | No |
| | | bursement arrangemen | | | | | | 1b(4) | | No |
| | | | | | | | | 1b(5) | | No |
| | | | | - | | | | 1b(6) | | No |
| | _ | | - | • | | | | 1 c | | No |
| of t | ne god ny tra | ods, other assets, or se | rvices giv angement | en by the reporti | ing foundation I (d) the value of | f the foundation the goods, othe | ould always show the fair mereceived less than fair marerassets, or services receind of transfers, transactions, and s | ket value ⁄ed | | nts |
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| des √ ſ | cribed No | indation directly or indif in section 501(c) of the complete the following s (a) Name of organization | ne Code (d schedule | ther than sectio | • | in section 527? | corganizations corporations (c) Description of rela | · | ?s | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Sign | the | | nd belief, | it is true, correc | t, and complete | | mpanying schedules and si preparer (other than taxpay May | | ed on | all |
| Here |) | | rustas | | 2016-11-10 | | retu with belo | the prepar | er show | vn |
| | | Signature of officer or t | rustee | | Date | , Title | (see | ınstr)? | Yes 1 | No |
| | | Print/Type preparer's DAVID J MILLHOU | | Preparer's Sıgr | nature | Date 2016-11-10 | Check if self- employed ▶ ☐ PTIN | 9000871 | .88 | |
| Paid Prepa Use | arer | Firm's name ► LEWIS & KNOPF CPA | S | | | | Firm's EIN ▶ 38-32056 | 62 | | |
| Only | | Firm's address ► 5206 GATEWAY CEN 48507 | TRE SUIT | TE 100 FLINT, M | 41 | | Phone no (810) 238-46 | 517 | | |

| Name and address (home or business) a Paid during the year AFRICAN CHRISTIAN UNIVERS AFRICAN CHRISTIAN UNIV PO BOX 1212 PO BOX 1212 FAYETTEVILLE, AR 72702 ABWE ABWE PO BOX 8585 PO BOX 8585 HARRISBURG, PA 17105 AFRICA INLAND MISSION AFRICA INLAND MISSION PO BOX 10965 PO BOX 10965 PEARL RIVER, NY 10965 ALLERGO ORGANIZATIONAL SOLUTIONS ALLERGO ORGANIZATIONAL SOLUTIONS 5535 MEMORIAL DR 5535 MEMORIAL DR HUSTON, TX 77007 BAPTIST INTL OUTREACH BAPTIST INTL OUTREACH PO BOX 639 PO BOX 639 PO BOX 639 MAYNARDVILLE, TN 37807 BAPTIST BIBLE FELLOWSHIP BAPTIST BIBLE FELLOWSHIP BAPTIST BIBLE FELLOWSHIP PO BOX 802757 PO BOX 802757 KANSAS CITY, MO 64180 | recipient is an individual, show any relationship to any foundation manager or substantial contributor. ONE ONE ONE | Foundation status of recipient | Purpose of grant or contribution GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT | 1,700 10,580 20,400 |
|--|--|--------------------------------------|---|---------------------------|
| a Paid during the year AFRICAN CHRISTIAN UNIVERS AFRICAN CHRISTIAN UNIV PO BOX 1212 PO BOX 1212 FAYETTEVILLE, AR 72702 ABWE ABWE PO BOX 8585 PO BOX 8585 HARRISBURG, PA 17105 AFRICA INLAND MISSION AFRICA INLAND MISSION PO BOX 10965 PO BOX 10965 PEARL RIVER, NY 10965 ALLERGO ORGANIZATIONAL SOLUTIONS ALLERGO ORGANIZATIONAL SOLUTIONS ALLERGO ORGANIZATIONAL SOLUTIONS 5535 MEMORIAL DR HUSTON, TX 77007 BAPTIST INTL OUTREACH BAPTIST INTL OUTREACH PO BOX 639 PO BOX 639 PO BOX 639 MAYNARDVILLE, TN 37807 BAPTIST BIBLE FELLOWSHIP BAPTIST BIBLE FELLOWSHIP PO BOX 802757 PO BOX 802757 KANSAS CITY, MO 64180 | ONE ONE ONE | recipient | GENERAL SUPPORT GENERAL SUPPORT | 10,580 |
| AFRICAN CHRISTIAN UNIVERS AFRICAN CHRISTIAN UNIV PO BOX 1212 PO BOX 1212 FAYETTEVILLE, AR 72702 ABWE ABWE PO BOX 8585 PO BOX 8585 HARRISBURG, PA 17105 AFRICA INLAND MISSION AFRICA INLAND MISSION PO BOX 10965 PEARL RIVER, NY 10965 ALLERGO ORGANIZATIONAL SOLUTIONS ALLERGO ORGANIZATIONAL SOLUTIONS 5535 MEMORIAL DR 5535 MEMORIAL DR 5535 MEMORIAL DR HUSTON, TX 77007 BAPTIST INTL OUTREACH BAPTIST INTL OUTREACH PO BOX 639 PO BOX 639 MAYNARDVILLE, TN 37807 BAPTIST BIBLE FELLOWSHIP BAPTIST BIBLE FELLOWSHIP PO BOX 802757 PO BOX 802757 KANSAS CITY, MO 64180 | O N E | | GENERAL SUPPORT GENERAL SUPPORT | 10,580 |
| AFRICAN CHRISTIAN UNIV PO BOX 1212 PO BOX 1212 FAYETTEVILLE, AR 72702 ABWE ABWE PO BOX 8585 PO BOX 8585 HARRISBURG, PA 17105 AFRICA INLAND MISSION AFRICA INLAND MISSION PO BOX 10965 PO BOX 10965 PEARL RIVER, NY 10965 ALLERGO ORGANIZATIONAL SOLUTIONS ALLERGO ORGANIZATIONAL SOLUTIONS ALLERGO ORGANIZATIONAL SOLUTIONS ALLERGO ORGANIZATIONAL SOLUTIONS 5535 MEMORIAL DR HUSTON, TX 77007 BAPTIST INTL OUTREACH BAPTIST INTL OUTREACH PO BOX 639 PO BOX 639 MAYNARDVILLE, TN 37807 BAPTIST BIBLE FELLOWSHIP BAPTIST BIBLE FELLOWSHIP PO BOX 802757 PO BOX 802757 KANSAS CITY, MO 64180 | O N E | | GENERAL SUPPORT GENERAL SUPPORT | 10,580 |
| ABWE PO BOX 8585 PO BOX 8585 HARRISBURG, PA 17105 AFRICA INLAND MISSION AFRICA INLAND MISSION PO BOX 10965 PO BOX 10965 PEARL RIVER, NY 10965 ALLERGO ORGANIZATIONAL SOLUTIONS ALLERGO ORGANIZATIONAL SOLUTIONS 5535 MEMORIAL DR HUSTON, TX 77007 BAPTIST INTL OUTREACH BAPTIST INTL OUTREACH PO BOX 639 PO BOX 639 MAYNARDVILLE, TN 37807 BAPTIST BIBLE FELLOWSHIP BAPTIST BIBLE FELLOWSHIP PO BOX 802757 PO BOX 802757 KANSAS CITY, MO 64180 | ONE | | GENERAL SUPPORT | |
| AFRICA INLAND MISSION PO BOX 10965 PO BOX 10965 PEARL RIVER, NY 10965 ALLERGO ORGANIZATIONAL SOLUTIONS ALLERGO ORGANIZATIONAL SOLUTIONS 5535 MEMORIAL DR 5535 MEMORIAL DR HUSTON, TX 77007 BAPTIST INTL OUTREACH BAPTIST INTL OUTREACH PO BOX 639 PO BOX 639 MAYNARDVILLE, TN 37807 BAPTIST BIBLE FELLOWSHIP BAPTIST BIBLE FELLOWSHIP PO BOX 802757 PO BOX 802757 KANSAS CITY, MO 64180 | ONE | | | 20,400 |
| SOLUTIONS ALLERGO ORGANIZATIONAL SOLUTIONS 5535 MEMORIAL DR 5535 MEMORIAL DR HUSTON,TX 77007 BAPTIST INTL OUTREACH BAPTIST INTL OUTREACH PO BOX 639 PO BOX 639 MAYNARDVILLE,TN 37807 BAPTIST BIBLE FELLOWSHIP BAPTIST BIBLE FELLOWSHIP PO BOX 802757 PO BOX 802757 KANSAS CITY,MO 64180 | | | GENERAL SUPPORT | |
| BAPTIST INTL OUTREACH PO BOX 639 PO BOX 639 MAYNARDVILLE,TN 37807 BAPTIST BIBLE FELLOWSHIP BAPTIST BIBLE FELLOWSHIP PO BOX 802757 PO BOX 802757 KANSAS CITY, MO 64180 | ONE | | | 1,400 |
| BAPTIST BIBLE FELLOWSHIP PO BOX 802757 PO BOX 802757 KANSAS CITY, MO 64180 | | | GENERAL SUPPORT | 1,300 |
| BAPTIST MID-MISSION NO | ONE | | GENERAL SUPPORT | 4,100 |
| BAPTIST MID MISSION PO BOX 308011 PO BOX 308011 CLEVLAND,OH 44130 | O N E | | GENERAL SUPPORT | 4,250 |
| BAPTIST WORLD MISSION BAPTIST WORLD MISSION PO BOX 2149 PO BOX 2149 DECTAUR,AL 35602 | ONE | | GENERAL SUPPORT | 6,800 |
| BAPTIST INTL MISSIONS BAPTIST INTL MISSIONS PO BOX 9215 PO BOX 9215 CHATTANOGA, TN 37412 | ONE | | GENERAL SUPPORT | 4,400 |
| BIBLICAL MINISTRIES WORLD BIBLICAL MINISTRIES WORLD 1595 HERRINGTON RD 1595 HERRINGTON RD LAWRENCEVILLE, GA 30043 | ONE | | GENERAL SUPPORT | 4,300 |
| BETHESDA OUTREACH MINISTRIES NO INTL BETHESDA OUTREACH MINISTRIES INTL PO BOX 249 PO BOX 249 ELKHART,IN 46515 | ONE | | GENERAL SUPPORT | 4,200 |
| CENTRAL MISSIONARY CLEARI CENTRAL MISSIONARY CLEAR PO BOX 219228 PO BOX 219228 HOUSTON,TX 77218 | ONE | | GENERAL SUPPORT | 3,400 |
| CROSSWORLD CROSSWORLD PO BOX 306 PO BOX 306 BALA,PA 19004 | ONE | | GENERAL SUPPORT | 18,800 |
| FRONTIERS FRONTIERS PO BOX 60730 PO BOX 60730 PHOENIX, AZ 85082 | ONE | | GENERAL SUPPORT | 1,400 |
| GLOBAL FAITH MISSION GLOBAL FAITH MISSION PO BOX 3326 PO BOX 3326 CHATTANOOGA,TN 37404 | O N E | | GENERAL SUPPORT | 1,700 |
| Total | | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Foundation Purpose of grant or Recipient If recipient is an individual, Amount show any relationship to status of contribution Name and address (home or any foundation manager recipient business) or substantial contributor a Paid during the year HELLENIC MINISTRIES - USA NONE GENERAL SUPPORT 2,100 HELLENIC MINISTRIES - USA PO BOX 726 PO BOX 726 WHEATON, IL 60187 NEW TRIBES MISSION NONE GENERAL SUPPORT 112,100 NEW TRIBES MISSION 100 EAST FIRST ST 100 EAST FIRST ST SANFORD, FL 32771 NEW TRIBES MISSION NONE SUPPORT OF TECH CENTER 41,535 NEW TRIBES MISSION 100 EAST FIRST ST 100 EAST FIRST ST SANFORD, FL 32771 DAN STOKES 100 EAST FIRST ST NONE MISSIONARY SUPPORT 2,000 100 EAST FIRST ST SANFORD, FL 32771 PIONEER BIBLE TRANSLATORS NONE GENERAL SUPPORT 1,400 PIONEER BIBLE TRANSLATORS 819 3RD STREET 819 3RD STREET CAWKER CITY, KS 67430 NONE GENERAL SUPPORT PIONEERS 4.700 **PIONEERS** 10123 WILLIAM CAREY DRIVE 10123 WILLIAM CAREY DRIVE ORLANDO,FL 32832 POWER COMPANY KIDS CLUB NONE GENERAL SUPPORT 22,200 POWER CO KIDS CLUB PO BOX 432126 PO BOX 432126 PONTIAC, MI 48343 POWER COMPANY KIDS CLUB NONE PURCHASE OF VAN 4,309 POWER CO KIDS CLUB PO BOX 432126 PO BOX 432126 PONTIAC, MI 48343 SIM USA NONE GENERAL SUPPORT 3,700 SIM USA PO BOX 7900 PO BOX 7900 CHARLOTTE, NC 28241 NONE TFAM GENERAL SUPPORT 2,700 TEAM PO BOX 969 PO BOX969 WHEATON, IL 60189 NONE TEAM EXPANSION GENERAL SUPPORT 1,300 TEAM EXPANSION 4112 OLD BOUTT RD 4112 OLD BOUTT RD LOUISVILLE, KY 40299 TRANS WORLD RADIO NONE GENERAL SUPPORT 2,700 TRANS WORLD RADIO PO BOX 8700 PO BOX 8700 CARY, NC 27512 CHUCK AND DARLENE SAUNDERS NONE MISSIONARY SUPPORT 200 PO BOX 8700 PO BOX 8700 CARY, NC 27512 WYCLIFFE BIBLE TRANSLATORS GENERAL SUPPORT 1,700 NONE WYCLIFFE BIBLE TRANSLATORS PO BOX 628200 PO BOX 628200 ORLANDO, FL 32862 MARLETTE BAPTIST CHURCH NONE GENERAL SUPPORT 1,150 MARLETTE BAPTIST CHURCH 6469 CHARD ST 6469 CHARD ST MARLETTE, MI 48453 303,524

Recipient If recipient is an individual, Foundation Purpose of grant or A mount show any relationship to status of contribution Name and address (home or any foundation manager recipient business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| a Paid during the year | | | |
|---|------|-----------------|-------|
| PORT SANILAC BAPTIST CHURCH PORT SANILAC BAPTIST CHURCH 6363 E SANILAC RD 6363 SANILAC RD PORT SANILAC,MI 48469 | NONE | GENERAL SUPPORT | 6,000 |

| 6363 E SANILAC RD 6363 SANILAC RD PORT SANILAC,MI 48469 | | | |
|--|------|-----------------|-------|
| BROWN CITY MISSIONARY FAMILY CAMP BROWN CITY MISSIONARY FAMILY CAMP 8686 WILCOX RD 8686 WILCOX RD | NONE | GENERAL SUPPORT | 5,000 |

| BROWN CITY MISSIONARY FAMILY | NONE | GENERAL SUPPORT | 5,000 |
|------------------------------|------|-----------------|-------|
| CAMP | | | |
| BROWN CITY MISSIONARY FAMILY | | | |
| CAMP | | | |
| 8686 WILCOX RD | | | |
| 8686 WILCOX RD | | | |
| BROWN CITY, MI 48416 | | | |

303,524

Total.

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491316003066 | | | | | | | | | |
|--------------------------------------|------------------------------|---------------------|--|--|--|--|--|--|--|--|--|
| TY 2015 Accounting Fees Schedule | | | | | | | | | | | |
| | TECHNICAL ASSISTANCE MISSION | N | | | | | | | | | |
| EIN: | 23-7241202 | | | | | | | | | | |

| EIN: 23-7241202 | | | | | | | | | | |
|------------------------|--------|--------------------------|------------------------|---|--|--|--|--|--|--|
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | | | | | |
| ACCOUNTING | 5,775 | | | 4,331 | | | | | | |

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: TECHNICAL ASSISTANCE MISSION

EIN: 23-7241202

| Description of Property | Date Acquired | Cost or Other Basıs | Prior Years' Depreciation | Computation Method | Rate / Life (# of years) | Current Year's Depreciation Expense | Net Investment Income | Adjusted Net Income | Cost of Goods Sold Not Included |
|-----------------------------------|------------------|------------------------|------------------------------|--------------------|-----------------------------|---|--------------------------|------------------------|---------------------------------------|
| LAKESHORE HOUSE | 2010-06-01 | 636,882 | 123,131 | S/L | 25 0000 | 25,475 | | | |
| OFFICE COMPUTER AND PRINTER | 2015-01-15 | 1,054 | 53 | 200DB | 5 0000 | 400 | | | |
| LAKESHORE PROP-BLDG IMPROV | 1997-03-31 | 7,625 | 5,643 | S/L | 25 0000 | 305 | | | |
| LAKESHORE PROP-BLDG IMPROV | 1998-10-31 | 21,250 | 14,875 | S/L | 25 0000 | 850 | | | |
| LAKESHORE PROP-BLDG IMPROV | 1998-10-08 | 12,297 | 8,116 | S/L | 25 0000 | 492 | | | |
| LAKESHORE PROP-BLDG IMPROV | 1999-10-01 | 4,132 | 2,561 | S/L | 25 0000 | 166 | | | |
| LAKESHORE PROP-BLDG IMPROV | 2011-07-27 | 670 | 351 | S/L | 7 0000 | 96 | | | |
| LAKESHORE PROP- F&F/APPLIANCES | 2011-06-27 | 1,421 | 761 | S/L | 7 0000 | 203 | | | |
| LAKESHORE PROP-LAND | 1996-05-03 | 12,500 | | | | | | | |
| LAKESHORE PROP- F&F/APPLIANCES | 2000-02-08 | 752 | 752 | S/L | 7 0000 | | | | |
| LAKESHORE PROP- F&F/APPLIANCES | 2000-07-27 | 948 | 948 | S/L | 7 0000 | | | | |
| LAKESHORE PROP- F&F/APPLIANCES | 2000-08-02 | 743 | 743 | S/L | 7 0000 | | | | |
| LAKESHORE PROP- F&F/APPLIANCES | 2000-11-16 | 404 | 404 | S/L | 7 0000 | | | | |
| LAKESHORE PROP- F&F/APPLIANCES | 2001-08-03 | 787 | 787 | S/L | 7 0000 | | | | |
| LAKESHORE PROP- F&F/APPLIANCES | 2003-12-01 | 2,500 | 2,500 | S/L | 7 0000 | | | | |
| LAKESHORE PROP- F&F/APPLIANCES | 2004-10-15 | 318 | 318 | S/L | 7 0000 | | | | |
| LAKESHORE PROP- F&F/APPLIANCES | 2005-02-21 | 1,322 | 1,322 | S/L | 7 0000 | | | | |
| LAKESHORE PROP-BLDG | 1996-05-03 | 50,000 | 37,000 | S/L | 25 0000 | 2,000 | | | |

| ote: To capture the full content of this document, please select landscape mode (11" $	imes$ 8.5") when printing. | | | | | | | | | | | |
|---|---|-----|------|-----------|-------------|-------|-------|-------|-------|-------------|--|
| TY 2015 Gain/Loss from Sale of Other Assets Schedule | | | | | | | | | | | |
| | Name: TECHNICAL ASSISTANCE MISSION EIN: 23-7241202 | | | | | | | | | | |
| Name | Date | How | Date | Purchaser | Gross Sales | Basis | Basis | Sales | Total | Accumulated | |

DLN: 93491316003066

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| Name | Date Acquired | How A cquired | Date Sold | Purchaser Name | Gross Sales Price | Basis | Basis Method | Sales Expenses | Total (net) | Accumulated Depreciation |
|--------------------------------|------------------|------------------|--------------|-------------------|----------------------|---------|-----------------|-------------------|----------------|-----------------------------|
| DISCOVER BK GREENWOOD DE CD | 2014-06 | PURCHASE | 2015-07 | | 245,000 | 245,000 | | | | |
| ST BK OF INDIA CD | 2014-06 | PURCHASE | 2015-06 | | 245,000 | 245,000 | | | | |
| EVERBANK CD | 2014-06 | PURCHASE | 2015-06 | | 245,000 | 245,000 | | | | |
| FIRST BANK CD | 2014-06 | PURCHASE | 2015-06 | | 245,000 | 245,000 | | | | |

| TY 2015 Investments - Land Schedule | |
|-------------------------------------|--|
| Name: TECHNICAL ASSISTANCE MISSION | |

DLN: 93491316003066

42,600

19,500

178,650

305,000

37,500

71,932

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LAND HELD FOR INVESTMENT

BUILDING AND EQUIPMENT

LAND

| • | | , 100101711102111100 | 10.1 | | | | | | |
|------------------------|---------------------|-----------------------------|------------|----------------------------------|--|--|--|--|--|
| EIN: 23-7241202 | | | | | | | | | |
| Category/ Item | Cost/Other Basis | Accumulated Depreciation | Book Value | End of Year Fair Market Value | | | | | |

228,025

305,000

37,500

299,957

| Category/ Item | Listed at Cost or | Book Value | End of Year Fair Market Value | | | | | | | | |
|--------------------------------------|------------------------------------|------------|----------------------------------|--|--|--|--|--|--|--|--|
| EIN: | 23-7241202 | | | | | | | | | | |
| Name: | Name: TECHNICAL ASSISTANCE MISSION | | | | | | | | | | |
| TY 2015 Investments - Other Schedule | | | | | | | | | | | |
| efile GRAPHIC print - DO NOT PROCESS | AS FIIEU Data - | DL | N: 93491316003066 | | | | | | | | |

AT COST

AT COST

3,012,805

1,457,333

3,000,000

1,521,307

CERTIFICATES OF DEPOSIT

MUTUAL FUNDS

| TY 2015 Land, Etc. | SS As Filed Da | a - | DLN | l: 93491316003066 |
|--------------------|-----------------------|-----------------------------|------------|----------------------------------|
| Schedule | | | | |
| Name | : TECHNICAL A | SSISTANCE MISS | ION | |
| EIN | N: 23-7241202 | | | |
| Category / Item | Cost / Other Basis | Accumulated Depreciation | Book Value | End of Year Fair Market Value |

229,799

453

742,048

1,054

12,500

455,750

6,500

512,249

601

12,500

OFFICE EQUIPMENT

LAND

BUILDINGS AND EQUIPMENT

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491316003066 | | |
|--------------------------------------|-----------------|---------------------|--|--|
| | | | | |
| TV 204 F Other Francisco Cohedrilo | | | | |

TY 2015 Other Expenses Schedule

Name: TECHNICAL ASSISTANCE MISSION

| | EIN: 23-7241202 | | | |
|----------------------------|--------------------------------|--------------------------|---------------------|--|
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| LAKESHORE RENTAL PROPERTY | | | | |
| TRASH REMOVAL | 612 | 612 | | |
| CULLIGAN | 473 | 473 | | |
| INSURANCE | 2,945 | 2,945 | | |
| REPAIRS AND MAINTENANCE | 2,697 | 2,697 | | |
| LAWN CARE AND SNOW REMOVAL | 1,110 | 1,110 | | |
| UTILITIES | 2,654 | 2,654 | | |
| PROPERTY TAXES | 8,593 | 8,593 | | |
| MISCELLANEOUS EXPENSES | 270 | 270 | | |
| INVESTMENT DEPRECIATION | 12,333 | 12,333 | | |
| EXPENSES | | | | |
| LICENSE | 20 | | | |
| BUILDING EXPENSES | 13,614 | | | 13,614 |
| OFFICE EXPENSES | 594 | | | |
| ROUNDING | | | | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 9349131600 |
|--------------------------------------|-----------------|-----------------|
| TY 2015 Other Professional Fee | es Schedule | |

Name: TECHNICAL ASSISTANCE MISSION

ETNI 22 72/1202

7,350

| E1N: 23-7241202 | | | | |
|-----------------|--------|----------------|--------|--|
| Category | Amount | Net Investment | Adjust | |

Disbursements for

PROFESSIONAL FEES

1,838

DLN: 93491316003066

ted Net Income

Charitable

Purposes

Income

| cine distille print De Not I Redebe | AS THEU DUTU | | DEM 35 13252000000 |
|-------------------------------------|-----------------|----------------|--------------------|
| TY 2015 Taxes Schedule | | | |
| Name: | TECHNICAL ASSIS | STANCE MISSION | |
| EIN: | 23-7241202 | | |

DLN: 93491316003066

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| 20.72.7202 | | | | |
|---------------------------------|--------|--------------------------|------------------------|---|
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| PROPERTY TAXES ON LAND HELD FOR | 872 | 872 | | |

| efile GRAPHIC print - | DO NOT PROCESS | As Filed Data - | | | DLN: 93491316003066 |
|--|---|---|---|---------------------------|---------------------|
| Schedule B | | Schedu | lle of Contributors | | OMB No 1545-0047 |
| (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service | Z, Attach to Form 990, 990-EZ, or 990-PF Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at 20° | | 2015 | | |
| Name of the organizati | | | | Employer ide | entification number |
| —————————————————————————————————————— | MCE MISSION | | | 23-724120 | 2 |
| Organization type (ch | eck one) | | | | |
| Filers of: | Section: | | | | |
| Form 990 or 990-EZ | ┌─ 501(c)() | (enter number) org | anization | | |
| | 4947(a)(1 |) nonexempt charit | able trust not treated as a private for | undation | |
| | 527 politic | al organization | | | |
| Form 990-PF | √ 501(c)(3) | exempt private fou | ndation | | |
| | 4947(a)(1 |) nonexempt charit | able trust treated as a private founda | ation | |
| | 501(c)(3) taxable private foundation | | | | |
| - | - | | hat received, during the year, contrib ts I and II See instructions for determ | | |
| Special Rules | | | | | |
| under sections t received from a | 509(a)(1) and 170(b)(| 1)(A)(vı), that chec ırıng the year, total | Form 990 or 990-EZ that met the 33 ¹ /3 ked Schedule A (Form 990 or 990-Ez contributions of the greater of (1) \$5. s I and II | Z), Part II, line 13, 16a | , or 16b, and that |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III | | | | | |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year | | | | | |
| Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) | | | | | |

Name of organization
TECHNICAL ASSISTANCE MISSION

Employer identification number 23-7241202

| Part I | Contributors (see instructions) Use duplicate copies of Part I if addi | itional space is needed | |
|------------|--|----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | | | Person 🗸 |
| | DAVID AND CHARLOTTE HALL 2764 LORRAINE | | Payroll |
| | | \$ 500,000 | Noncash <u></u> |
| | MARLETTE, MI48453 | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| - | | s | Payroll |
| | | | Noncash |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| | | s | Payroll |
| | | | Noncash |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| | | s | Payroli |
| | | | Noncash |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| | | s | Payroll |
| | | | Noncash |
| | | | (Complete Part II for noncash contributions) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Total contributions | Type of contribution Person |
| | | | Payroll |
| | | \$ | |
| | | | Noncash — |
| | | | (Complete Part II for noncash contributions) |

Page 3

TECHNICAL ASSISTANCE MISSION 23-7241202 Noncash Property Part II (see instructions) Use duplicate copies of Part II if additional space is needed (c) (b) (d) (a) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (a) (b) (d) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (b) (a) (d) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (b) (d) (a) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (b) (d) (a) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (d) (a) (b) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)