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**Short Form
Return of Organization Exempt From Income Tax**

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

2016

**Open to Public
Inspection**

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-EZ and its instructions is at www.irs.gov/form990.

A For the 2016 calendar year, or tax year beginning _____, and ending _____

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: **MOLDOVA MISSIONS**

D Employer identification number: **46-3843502**

Number and street (or P O box, if mail is not delivered to street address) Room/suite
400 NEWTON ROAD

E Telephone number

City or town, state or province, country, and ZIP or foreign postal code
RALEIGH NC 27615

F Group Exemption Number ▶

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

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

I Website: ▶ **N/A**

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

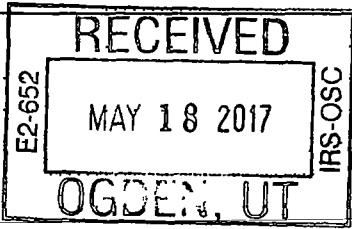
K Form of organization: Corporation Trust Association Other _____

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total asset (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **163,128**

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

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

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	163,128
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	5
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
c	Less: direct expenses from gaming and fundraising events	6c		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8		
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	163,128
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	201,475
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe in Schedule O)	16	
		17	Total expenses. Add lines 10 through 16	17
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-38,347
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	42,683
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	4,336



4
95

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

X

Table with columns for question number, question text, Yes, and No. Rows include questions 33 through 45b regarding organizational activities, financials, and compliance.

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Table with Yes/No columns and value 46, X

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

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

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

47 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

Table with Yes/No columns and value 47, X

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

Table with Yes/No columns and value 48, X

49a Did the organization make any transfers to an exempt non-charitable related organization?

Table with Yes/No columns and value 49a, X

b If "Yes," was the related organization a section 527 organization?

Table with Yes/No columns and value 49b

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

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation, (d) Health benefits, (e) Estimated amount of other compensation. Row 1 contains 'NONE'.

f Total number of other employees paid over \$100,000

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

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation. Row 1 contains 'NONE'.

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a completed Schedule A

Yes No (X) No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here: Signature of officer PAUL STOREY, Date 5/15/2017, Type or print name and title OFFICER

Paid Preparer Use Only: Print/Type preparer's name ANNA HERGENRADER, Preparer's signature, Date 05/10/17, Check self-employed, PTIN P00632157, Firm's name JAMES A. LUCAS AND COMPANY, LLP, Firm's EIN 56-1137607, Firm's address 4909 WESTERN BLVD STE 200 RALEIGH, NC 27606-1749, Phone no 919-851-4696

May the IRS discuss this return with the preparer shown above? See instructions

Yes No (X) Yes

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2016

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Inspection

Name of the organization

MOLDOVA MISSIONS

Employer identification number

46-3843502

FORM 990-EZ, PART III - PRIMARY EXEMPT PURPOSE

THE ENTITY EXISTS TO BUILD, SUPPORT AND SUSTAIN A CHILDREN'S CAMP AND SAFE HOUSE FOR ORPHANS AND OTHER AT-RISK CHILDREN IN THE COUNTRY OF MOLDOVA IN PARTNERSHIP WITH A LOCAL CHURCH. THE ENTITY WILL RUN SPORTS CAMPS, FAMILY RETREATS, PASTOR RETREATS AND CHILDREN'S CAMPS AS WELL AS OTHER PROGRAMS FOR THE BENEFIT OF CHILDREN AND FAMILIES IN MOLDOVA.

FORM 990-EZ, PART V, LINE 34 - CHANGES TO ORGANIZATIONAL DOCUMENTS

SINCE INCEPTION, THE ENTITY WAS INTENDED TO BE A 501(C)3 NON PROFIT ORGANIZATION. THE STRUCTURE OF THE ENTITY WAS INADVERTANTLY SET UP AS A PRIVATE FOUNDATION, SO THE ENTITY FILED FORM 990-PF FOR TAX YEAR'S 2013, 2014 AND 2015. THIS MISTAKE HAS BEEN CORRECTED WITH THE INTERNAL REVENUE SERVICE, AND THE ENTITY IS NOW REQUIRED TO FILE A FORM 990 OR 990-EZ FOR TAX YEAR'S 2016 AND FORWARD. A COPY OF THE IRS DETERMINATION LETTER TO THIS EFFECT IS ATTACHED.