

**Estes, Bridgewater & Ogden  
901 S. Second St  
Springfield, IL 62704  
217-528-8473**

May 20, 2021

**CONFIDENTIAL**

MIDWEST MISSION DISTRIBUTION CENTER  
1001 MISSION DRIVE  
PAWNEE, IL 62558

Dear Bill:

This letter is to confirm and specify the terms of our engagement with you and to clarify the nature and extent of the services we will provide. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom returns are prepared to confirm the following arrangements.

We will prepare your federal and state exempt organization returns from information which you will furnish to us. We will not audit or otherwise verify the data you submit, although it may be necessary to ask you for clarification of some of the information.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all the documents, cancelled checks and other data that form the basis of these returns. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the tax returns and, therefore, you should review them carefully before you sign them.

Our work in connection with the preparation of your tax returns does not include any procedures designed to discover defalcations and/or other irregularities, should any exist. We will render such accounting and bookkeeping assistance as determined to be necessary for preparation of the tax returns.

The law provides various penalties that may be imposed when taxpayers understate their tax liability. If you would like information on the amount or the circumstances of these penalties, please contact us.

Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you and will render additional invoices for the time and expenses incurred.

Our fee for these services will be based upon the amount of time required at standard billing rates plus out-of-pocket expenses. All invoices are due and payable upon presentation.

If the foregoing fairly sets forth your understanding, please sign the enclosed copy of this letter in the space indicated and return it to our office. However, if there are other tax returns you expect us to prepare, please inform us by noting so at the end of the return copy of this letter.

We want to express our appreciation for this opportunity to work with you.

Very truly yours,

Estes, Bridgewater & Ogden

Accepted By: \_\_\_\_\_

Date: \_\_\_\_\_

## Forms 990 / 990-EZ Return Summary

For calendar year 2020, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

37-1391589

### MIDWEST MISSION DISTRIBUTION CENTER

**Net Asset / Fund Balance at Beginning of Year** 4,606,247

**Revenue**

Contributions	<u>13,060,471</u>	
Program service revenue		
Investment income	<u>40,819</u>	
Capital gain / loss		
Fundraising / Gaming:		
Gross revenue _____		
Direct expenses _____		
Net income _____		
Other income	<u>0</u>	
<b>Total revenue</b>		<u>13,101,290</u>

**Expenses**

Program services	<u>10,666,815</u>	
Management and general	<u>106,516</u>	
Fundraising	<u>72,179</u>	
<b>Total expenses</b>		<u>10,845,510</u>
<b>Excess / (deficit)</b>		<u>2,255,780</u>

Changes 36,879

**Net Asset / Fund Balance at End of Year** 6,898,906

**Reconciliation of Revenue**

Total revenue per financial statements	<u>13,138,169</u>
Less:	
Unrealized gains	<u>36,879</u>
Donated services	
Recoveries	
Other	
Plus:	
Investment expenses	
Other	
<b>Total revenue per return</b>	<u>13,101,290</u>

**Reconciliation of Expenses**

Total expenses per financial statements	<u>10,845,510</u>
Less:	
Donated services	
Prior year adjustments	
Losses	
Other	
Plus:	
Investment expenses	
Other	
<b>Total expenses per return</b>	<u>10,845,510</u>

**Balance Sheet**

	Beginning	Ending	Differences
Assets	<u>4,632,094</u>	<u>6,965,651</u>	
Liabilities	<u>25,847</u>	<u>66,745</u>	
Net assets	<u>4,606,247</u>	<u>6,898,906</u>	<u>2,292,659</u>

**Miscellaneous Information**

Amended return \_\_\_\_\_  
 Return / extended due date 11/15/21  
 Failure to file penalty \_\_\_\_\_

Form **8879-EO**

### IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue Service

For calendar year 2020, or fiscal year beginning . . . . . 2020, and ending . . . . . 20 . . . . .

**2020**

**Do not send to the IRS. Keep for your records.**  
**Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization or person subject to tax

Taxpayer identification number

**MIDWEST MISSION DISTRIBUTION CENTER**

**37-1391589**

Name and title of officer or person subject to tax **REV. CLAYTON COFFEY  
CHAIRPERSON**

#### Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

<b>1a</b> Form 990 check here <input checked="" type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990, Part VIII, column (A), line 12)	<b>1b</b> <u>13,101,290</u>
<b>2a</b> Form 990-EZ check here <input type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990-EZ, line 9)	<b>2b</b> _____
<b>3a</b> Form 1120-POL check here <input type="checkbox"/>	<b>b</b> Total tax (Form 1120-POL, line 22)	<b>3b</b> _____
<b>4a</b> Form 990-PF check here <input type="checkbox"/>	<b>b</b> Tax based on investment income (Form 990-PF, Part VI, line 5)	<b>4b</b> _____
<b>5a</b> Form 8868 check here <input type="checkbox"/>	<b>b</b> Balance due (Form 8868, line 3c)	<b>5b</b> _____
<b>6a</b> Form 990-T check here <input type="checkbox"/>	<b>b</b> Total tax (Form 990-T, Part III, line 4)	<b>6b</b> _____
<b>7a</b> Form 4720 check here <input type="checkbox"/>	<b>b</b> Total tax (Form 4720, Part III, line 1)	<b>7b</b> _____

#### Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that  I am an officer of the above organization or  I am a person subject to tax with respect to (name of organization) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

#### PIN: check one box only

I authorize **ESTES, BRIDGEWATER & OGDEN** to enter my PIN **91589** as my signature  
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax } Date } **05/11/21**

#### Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**37131762704**  
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature } Date } **05/11/21**

**ERO Must Retain This Form — See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2020)

Form **990**

Department of the Treasury  
Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**  
Open to Public Inspection

**A For the 2020 calendar year, or tax year beginning , and ending**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <p style="text-align: center;"><b>MIDWEST MISSION DISTRIBUTION CENTER</b></p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p style="text-align: center;"><b>1001 MISSION DRIVE</b></p> City or town, state or province, country, and ZIP or foreign postal code <p style="text-align: center;"><b>PAWNEE IL 62558</b></p>	<b>D</b> Employer identification number <p style="text-align: center;"><b>37-1391589</b></p> <b>E</b> Telephone number <p style="text-align: center;"><b>217-483-7911</b></p> <b>G</b> Gross receipts \$ <b>13,101,290</b>
<b>F</b> Name and address of principal officer: <p style="text-align: center;"><b>REV. CLAYTON COFFEY</b> <b>1001 MISSION DRIVE</b> <b>PAWNEE IL 62558</b></p>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions

<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) <input type="checkbox"/> t (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>J</b> Website: <b>WWW.MIDWESTMISSION.ORG</b>	<b>H(c)</b> Group exemption number <b>u</b>
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <b>u</b>	<b>L</b> Year of formation: <b>1999</b>	<b>M</b> State of legal domicile: <b>IL</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <p style="text-align: center;"><b>TO PROVIDE MATERIALS FOR VICTIMS OF NATURAL DISASTERS.</b></p>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>14</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>14</b>
	<b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	<b>11</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>567</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>4,922,109</b>	<b>13,060,471</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>35,271</b>	<b>40,819</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>0</b>	<b>0</b>
	<b>12</b> Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>4,957,380</b>	<b>13,101,290</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<b>0</b>	
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>0</b>	
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<b>287,820</b>	<b>313,803</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>0</b>	
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>u</b>	<b>72,179</b>	
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	<b>3,514,146</b>	<b>10,531,707</b>
<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<b>3,801,966</b>	<b>10,845,510</b>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>1,155,414</b>	<b>2,255,780</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	<b>4,632,094</b>	<b>6,965,651</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>25,847</b>	<b>66,745</b>
		<b>4,606,247</b>	<b>6,898,906</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <p style="text-align: center;"><b>REV. CLAYTON COFFEY</b></p> Type or print name and title	Date <p style="text-align: center;"><b>CHAIRPERSON</b></p>
	Print/Type preparer's name <p><b>JAMES LEGG</b></p>	Preparer's signature Date <p><b>05/20/21</b></p>
<b>Paid Preparer Use Only</b>	Firm's name } <b>ESTES, BRIDGEWATER &amp; OGDEN</b> Firm's address } <b>901 S. SECOND ST</b> <b>SPRINGFIELD, IL 62704</b>	Firm's EIN } <b>37-0265152</b> Phone no. } <b>217-528-8473</b>

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

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission:

**TO PROVIDE MATERIALS FOR VICTIMS OF NATURAL DISASTERS.**

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

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 \$ **10,666,815** including grants of \$ ) (Revenue \$ )

**TO PROVIDE SUPPLIES TO VICTIMS OF NATURAL OR MAN-MADE DISASTERS.**

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**N/A**

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**N/A**

**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses **u 10,666,815**

**Part IV Checklist of Required Schedules**

		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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
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		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	X	
c	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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
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		X
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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		X

**Part IV Checklist of Required Schedules** *(continued)*

		Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	X	

**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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

1a	5
1b	0

**Part V Statements Regarding Other IRS Filings and Tax Compliance** (continued)

		Yes	No		
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b>	<b>11</b>		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>		<b>X</b>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>			<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<b>3b</b>			
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>			<b>X</b>
<b>b</b>	If "Yes," enter the name of the foreign country <b>u</b> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>			<b>X</b>
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>			<b>X</b>
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>			
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>			<b>X</b>
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>			
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>				
<b>a</b>	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?	<b>7a</b>			<b>X</b>
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>			
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>			<b>X</b>
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>			
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>			<b>X</b>
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>			<b>X</b>
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>			<b>X</b>
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>			<b>X</b>
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>			
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>				
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>			
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>			
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:				
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>			
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>			
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:				
<b>a</b>	Gross income from members or shareholders	<b>11a</b>			
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>			
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>			
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>			
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>				
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>			
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>			
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>			
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>			<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>			
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>			<b>X</b>
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>			<b>X</b>



**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
<b>2</b>	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?		<b>X</b>
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		<b>X</b>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<b>X</b>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		<b>X</b>
<b>6</b>	Did the organization have members or stockholders?		<b>X</b>
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<b>X</b>	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>X</b>	
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	<b>X</b>	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	<b>X</b>	
<b>9</b>	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 on Schedule O		<b>X</b>

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		<b>X</b>
<b>b</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?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>X</b>	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>X</b>	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>X</b>	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>X</b>	
<b>13</b>	Did the organization have a written whistleblower policy?	<b>X</b>	
<b>14</b>	Did the organization have a written document retention and destruction policy?	<b>X</b>	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	<b>X</b>	
<b>b</b>	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		<b>X</b>
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<b>X</b>
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **IL**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 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 records **u**

**CHANTEL CORRIE** **1001 MISSION DRIVE** **IL 62558** **217-483-7911**  
**PAWNEE**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, 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. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CHANTEL CORRIE ..... EXECUTIVE DIRECTOR	40.00 ..... 0.00			X				56,200	0	0
(2) DON ARCHAMBEAU ..... DIRECTOR	5.00 ..... 0.00	X						0	0	0
(3) PATRICK BAUMER ..... DIRECTOR	5.00 ..... 0.00	X						0	0	0
(4) JOEL CERTA-WERNER ..... DIRECTOR	5.00 ..... 0.00	X						0	0	0
(5) REV. CLAYTON COFFEY ..... CHAIRPERSON	10.00 ..... 0.00	X		X				0	0	0
(6) DON FOWLER ..... DIRECTOR	5.00 ..... 0.00	X						0	0	0
(7) RITA LOUISE GAITHER-GANT ..... DIRECTOR	5.00 ..... 0.00	X						0	0	0
(8) LYNNETTE JORDAN ..... DIRECTOR	5.00 ..... 0.00	X						0	0	0
(9) JEFFEREY KOCH ..... TREASURER	5.00 ..... 0.00	X		X				0	0	0
(10) PATTI NELSON ..... DIRECTOR	5.00 ..... 0.00	X						0	0	0
(11) TANYA OBERG ..... SECRETARY	5.00 ..... 0.00	X		X				0	0	0

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) LINDA PRIEST ..... DIRECTOR	5.00 0.00	X						0	0	0
(13) ANGIE RANSOM ..... DIRECTOR	5.00 0.00	X						0	0	0
(14) KYLE ROMINGER ..... VICE CHAIRPERSON	5.00 0.00	X		X				0	0	0
(15) LYNDY ZABEL ..... DIRECTOR	5.00 0.00	X						0	0	0
<b>1b Subtotal</b> .....							<b>u</b>	<b>56,200</b>		
<b>c Total from continuation sheets to Part VII, Section A</b> .....							<b>u</b>			
<b>d Total (add lines 1b and 1c)</b> .....							<b>u</b>	<b>56,200</b>		

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u 0**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		<b>X</b>
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> .....		<b>X</b>
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....		<b>X</b>

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **u 0**

**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	13,060,471				
	g Noncash contributions included in lines 1a-1f	1g	\$ 11,976,762				
	<b>h Total. Add lines 1a-1f</b>	<b>u</b>	<b>13,060,471</b>				
<b>Program Service Revenue</b>	2a	Business Code					
	b						
	c						
	d						
	e						
	f All other program service revenue						
	<b>g Total. Add lines 2a-2f</b>	<b>u</b>					
<b>Other Revenue</b>	3 Investment income (including dividends, interest, and other similar amounts)	<b>u</b>	40,819			40,819	
	4 Income from investment of tax-exempt bond proceeds	<b>u</b>					
	5 Royalties	<b>u</b>					
	6a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)	<b>u</b>					
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)	<b>u</b>					
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events	<b>u</b>						
9a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities	<b>u</b>						
10a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory	<b>u</b>						
<b>Miscellaneous Revenue</b>	11a	Business Code					
	b						
	c						
	d All other revenue						
	<b>e Total. Add lines 11a-11d</b>	<b>u</b>					
<b>12 Total revenue. See instructions</b>	<b>u</b>	<b>13,101,290</b>	<b>0</b>	<b>0</b>	<b>40,819</b>		

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	56,200	44,960	5,620	5,620
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	229,019	183,215	22,902	22,902
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	7,418	5,934	742	742
10 Payroll taxes	21,166	16,932	2,117	2,117
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	5,450		5,450	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	12,690	12,690		
13 Office expenses	35,103	30,625	2,239	2,239
14 Information technology				
15 Royalties				
16 Occupancy	55,746	44,597	7,841	3,308
17 Travel	21,244	17,488	3,756	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	113,463	90,771	22,692	
23 Insurance	25,964	20,771	5,193	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>IN-KIND DISASTER SUPPLIES</b>	10,134,864	10,134,864		
b <b>FUNDRAISING</b>	33,029			33,029
c <b>VEHICLE REPAIR</b>	15,396	12,317	3,079	
d <b>DUES &amp; SUBSCRIPTIONS</b>	13,927		13,927	
e All other expenses	64,831	51,651	10,958	2,222
25 Total functional expenses. Add lines 1 through 24e	10,845,510	10,666,815	106,516	72,179
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part X 

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	1	Cash—non-interest-bearing	330,466	1	448,716
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	24,055	4	37,228
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	1,854,939	8	3,916,988
	9	Prepaid expenses and deferred charges	7,952	9	13,138
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,593,791		
	b	Less: accumulated depreciation	10b 999,317	10c	1,594,474
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11	877,815	12	955,107
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 33)	4,632,094	16	6,965,651	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	25,847	17	17,356
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	49,389
	26	<b>Total liabilities.</b> Add lines 17 through 25	25,847	26	66,745
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>				
	27	Net assets without donor restrictions	3,728,432	27	5,943,799
	28	Net assets with donor restrictions	877,815	28	955,107
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	<b>Total net assets or fund balances</b>	4,606,247	32	6,898,906
33	<b>Total liabilities and net assets/fund balances</b>	4,632,094	33	6,965,651	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	<b>13,101,290</b>
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	<b>10,845,510</b>
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	<b>2,255,780</b>
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	<b>4,606,247</b>
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	<b>36,879</b>
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	<b>6,898,906</b>

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>X</b>	
<b>2c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	<b>X</b>	
<b>3a</b>	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?		<b>X</b>
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

**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.

**u Attach to Form 990 or Form 990-EZ.**

**u Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Name of the organization

**MIDWEST MISSION DISTRIBUTION CENTER**

Employer identification number

**37-1391589**

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

The organization is not a private foundation because it is: (For lines 1 through 12, 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 (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....
- 10  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						



Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc. (see instructions) 12
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f)) 14 %
15 Public support percentage from 2019 Schedule A, Part II, line 14 15 %
16a 33 1/3% support test—2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
17a 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
b 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	729,981	1,063,433	933,445	4,922,109	13,060,471	20,709,439
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	729,981	1,063,433	933,445	4,922,109	13,060,471	20,709,439
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						20,709,439

**Section B. Total Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6	729,981	1,063,433	933,445	4,922,109	13,060,471	20,709,439
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	192	34,975	3,975	35,271	40,819	115,232
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b	192	34,975	3,975	35,271	40,819	115,232
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	730,173	1,098,408	937,420	4,957,380	13,101,290	20,824,671
<b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> <input type="checkbox"/>						

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

<b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	<b>15</b>	99.45 %
<b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15	<b>16</b>	99.10 %

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

<b>17</b> Investment income percentage for <b>2020</b> (line 10c, column (f), divided by line 13, column (f))	<b>17</b>	1 %
<b>18</b> Investment income percentage from <b>2019</b> Schedule A, Part III, line 17	<b>18</b>	1 %

- 19a 33 1/3% support tests—2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations (continued)**

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

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

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

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

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a governmental entity (see instructions).</i>		
<b>2</b> Activities Test. <i>Answer lines 2a and 2b below.</i>		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
<b>2a</b>		
<b>b</b> Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>3b</b>		

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

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

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i> )	
6 Other distributions ( <i>describe in Part VI</i> ). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	
9 Distributable amount for 2020 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required— <i>explain in Part VI</i> ). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015 .....			
b From 2016 .....			
c From 2017 .....			
d From 2018 .....			
e From 2019 .....			
f <b>Total</b> of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020 Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 <b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016 .....			
b Excess from 2017 .....			
c Excess from 2018 .....			
d Excess from 2019 .....			
e Excess from 2020 .....			



**Schedule B**  
 (Form 990, 990-EZ,  
 or 990-PF)  
 Department of the Treasury  
 Internal Revenue Service

**Schedule of Contributors**

OMB No. 1545-0047

**2020**

**u Attach to Form 990, Form 990-EZ, or Form 990-PF.**  
**u Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

Name of the organization <b>MIDWEST MISSION DISTRIBUTION CENTER</b>	Employer identification number <b>37-1391589</b>
--	---

Organization type (check one):

- Filers of:**                      **Section:**
- Form 990 or 990-EZ             501(c)( **3** ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization
- Form 990-PF                       501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1/3</sup>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- 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 (entering "N/A" in column (b) instead of the contributor name and address), 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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).



Name of organization

**MIDWEST MISSION DISTRIBUTION CENTER**

Employer identification number

**37-1391589**

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FIRST UMC- KINMUNDY IL PO BOX 158 KINMUNDY IL 62854	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	UNITED METHODIST FOUNDATION 1001 MISSION DRIVE PAWNEE IL 62558	\$ 6,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	CAROL KESSLER 1001 MISSION DRIVE PAWNEE IL 62558	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	EAST OHIO ANNUAL CONFERENCE 1001 MISSION DRIVE PAWNEE IL 62558	\$ 8,453	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	IGRC-SPRINGFIELD IL 1001 MISSION DRIVE PAWNEE IL 62558	\$ 15,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	IOWA INGATHERING 1001 MISSION DRIVE PAWNEE IL 62558	\$ 56,072	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

MIDWEST MISSION DISTRIBUTION CENTER

Employer identification number

37-1391589

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	GRAND PRAIRIE CEMETARY ASSOCIATION 1001 MISSION DRIVE PAWNEE IL 62558	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	KAREN HOELZER 1001 MISSION DRIVE PAWNEE IL 62558	\$ 8,085	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	MARK VANDERMYDE 1001 MISSION DRIVE PAWNEE IL 62558	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	UMC - NEW LENOX 329 W HAVEN AVE NEW LENOX IL 60451	\$ 10,148	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	EDDIE CARPENTER 1001 MISSION DRIVE PAWNEE IL 62558	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	COMMUNITY CHILD CARE CONNECTION 1001 MISSION DRIVE PAWNEE IL 62558	\$ 26,021	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

MIDWEST MISSION DISTRIBUTION CENTER

Employer identification number

37-1391589

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	HEALTH CARE SERVICE CORP 1001 MISSION DRIVE PAWNEE IL 62558	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	UMC - TROY, IL 407 EDWARDSVILLE RD TROY IL 62294	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	PHYLLIS MENZER ESTATE 1001 MISSION DRIVE PAWNEE IL 62558	\$ 14,850	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	ELLEN SMITH ESTATE 1001 MISSION DRIVE PAWNEE IL 62558	\$ 12,094	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	CLARK FAMILY FOUNDATION 1001 MISSION DRIVE PAWNEE IL 62558	\$ 96,127	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	DARRELL RADER 1001 MISSION DRIVE PAWNEE IL 62558	\$ 8,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. u Attach to Form 990.

u Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

Employer identification number

MIDWEST MISSION DISTRIBUTION CENTER

37-1391589

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate values, and yes/no questions about donor advisement.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number of easements, and various monitoring and reporting questions.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

**3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange program
- e** Other

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	877,815	740,999	776,328	428,854	378,734
<b>b</b> Contributions	49,012	43,864	33,709	290,489	35,819
<b>c</b> Net investment earnings, gains, and losses	84,719	152,760	-21,587	89,994	41,398
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs	56,439	59,808	47,451	33,009	27,097
<b>f</b> Administrative expenses					
<b>g</b> End of year balance	955,107	877,815	740,999	776,328	428,854

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment **u** %
- b** Permanent endowment **u** %
- c** Term endowment **u** %

The percentages on lines 2a, 2b, and 2c should equal 100%.

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations
- (ii)** Related organizations

	Yes	No
<b>3a(i)</b>		<b>X</b>
<b>3a(ii)</b>		<b>X</b>
<b>3b</b>		

**b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

**4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land				
<b>b</b> Buildings		2,110,583		2,110,583
<b>c</b> Leasehold improvements		62,951		62,951
<b>d</b> Equipment		420,257	999,317	-579,060
<b>e</b> Other				

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) **u** 1,594,474

**Part VII Investments – Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other <b>ENDOWMENT MONEY MARKET AND MUT</b>	<b>955,107</b>	<b>MARKET</b>
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)	<b>955,107</b>	

**Part VIII Investments – Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) <b>PPP LOAN</b>	<b>49,389</b>
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>49,389</b>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII







**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2020**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

**u** Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
**u** Attach to Form 990.  
**u** Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

**MIDWEST MISSION DISTRIBUTION CENTER**

Employer identification number

**37-1391589**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded				
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other <b>u</b> ( )				
26 Other <b>u</b> (DISASTER SUPPLY)	<b>X</b>	<b>1</b>	<b>11,976,762</b>	<b>FMV OF ITEMS DONATED</b>
27 Other <b>u</b> ( )				
28 Other <b>u</b> ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		<b>X</b>
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		<b>X</b>
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		<b>X</b>
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

**Part II Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

**SCHEDULE M - SUPPLEMENTAL INFORMATION**

**ITEMS INCLUDE SCHOOL SUPPLIES, BATHROOM SUPPLIES, CLEANING SUPPLIES, AND EQUIPMENT.**

**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.

u Attach to Form 990 or 990-EZ.  
u Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization

**MIDWEST MISSION DISTRIBUTION CENTER**

Employer identification number

**37-1391589**

**FORM 990, PART I, LINE 6**

**VOLUNTEERS PROVIDE SERVICES SUCH AS; WOODWORKING, EQUIPMENT REPAIR,  
BUILDING REPAIR, PACKAGING DISASTER SUPPLIES, SORTING SUPPLIES, SHIPPING,  
OPENING MAIL, AND SEWING QUILTS AND OTHER ITEMS.**

**FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS**

**THE OFFICERS ARE ELECTED ANNUALLY BY THE BOARD OF DIRECTORS AT A REGULAR  
ANNUAL MEETING OF THE BOARD OF DIRECTORS.**

**FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS**

**DECISIONS BASED ON BOARD APPROVAL ARE BUDGETS, CHECK PAYMENTS, GIFTS,  
COMPENSATION, AND USE OF ENDOWMENT FUND INCOME.**

**FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990**

**THE TREASURER WILL REVIEW 990 BEFORE IT IS SENT TO THE IRS.**

**FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY**

**CONFLICT OF INTEREST POLICY IS ENFORCED BY WRITTEN POLICIES AND HAVING THE  
BOARD MEMBERS SIGN A DISCLOSURE STATEMENT.**

**FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL**

**COMPENSATION IS APPROVED BY THE BOARD FOR ALL EMPLOYEES AND EXECUTIVE  
DIRECTOR.**

**FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION**

Name of the organization

Employer identification number

**MIDWEST MISSION DISTRIBUTION CENTER**

**37-1391589**

**GOVERNING DOCUMENT ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.**

Form **4562**

Department of the Treasury  
Internal Revenue Service (99)

Name(s) shown on return

**Depreciation and Amortization**  
**(Including Information on Listed Property)**

u Attach to your tax return.

u Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

OMB No. 1545-0172

**2020**

Attachment Sequence No. **179**

**MIDWEST MISSION DISTRIBUTION CENTER**

Identifying number  
**37-1391589**

Business or activity to which this form relates

**INDIRECT DEPRECIATION**

**Part I Election To Expense Certain Property Under Section 179**

**Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	<b>1,040,000</b>
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	<b>2,590,000</b>
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2019 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12	13	

**Note:** Don't use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	<b>113,462</b>

**Part III MACRS Depreciation (Don't include listed property. See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2020	17	<b>0</b>
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/> u		

**Section B—Assets Placed in Service During 2020 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	

**Section C—Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System**

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	<b>Total.</b> Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	<b>113,462</b>
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

DAA

37-1391589

## Federal Asset Report

FYE: 12/31/2020

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
<b>Other Depreciation:</b>									
1	PICNIC SHELTER	12/07/05	7,684			7,684	15 MO S/L	7,428	256
2	PICNIC SHELTER (ELECTICAL WORK)	6/08/06	1,033			1,033	15 MO S/L	930	69
3	RV PARK	10/01/01	14,583			14,583	20 MO S/L	13,215	730
4	WAREHOUSE IMPROVEMENTS	8/11/03	1,532			1,532	20 MO S/L	1,258	76
5	GIFT STORE	10/01/01	84,000			84,000	39 MO S/L	39,219	2,153
6	GIFT STORE IMPROV	10/01/02	3,360			3,360	39 MO S/L	1,482	87
7	GIFT STORE BATH IMPROV	3/15/03	2,338			2,338	39 MO S/L	1,009	60
8	WAREHOUSE ADD (material & labor)	6/25/05	27,311			27,311	39 MO S/L	10,154	700
9	WAREHOUSE BUILDING	1/01/04	290,614			290,614	39 MO S/L	119,226	7,452
10	WAREHOUSE BUILDING DOORS	5/01/04	2,269			2,269	15 MO S/L	2,269	0
11	WAREHOUSE INSULATION	2/25/04	5,917			5,917	39 MO S/L	2,391	152
12	WAREHOUSE ADDITIONS	7/25/05	151			151	39 MO S/L	56	4
13	WAREHOUSE ADDITION 07	11/27/07	143,640			143,640	39 MO S/L	46,039	3,683
14	WAREHOUSE ADD VARIOUS	1/01/08	25,642			25,642	39 MO S/L	7,561	658
15	PROJECT SHCOOL ROOM	1/02/02	18,720			18,720	39 MO S/L	8,621	480
16	LANDSCAPING	5/13/03	250			250	15 MO S/L	250	0
17	SIDEWALKS, CURBS, DRIVEWAY	5/14/03	4,462			4,462	15 MO S/L	4,462	0
18	DORMITORY BUILDING	7/01/01	262,000			262,000	39 MO S/L	124,015	6,718
19	DORMITORY UTILITY BUILDING	7/01/01	18,000			18,000	39 MO S/L	8,521	461
20	DORM FURNITURE	7/01/01	2,197			2,197	7 MO S/L	2,197	0
21	DORM- GENERATOR	2/28/08	3,285			3,285	39 MO S/L	969	84
22	DUPLEX	12/31/04	135,559			135,559	39 MO S/L	48,662	3,476
23	APPLIANCES-DUPLEX	6/30/05	2,661			2,661	5 MO S/L	2,661	0
24	FURNITURE- DUPLEX	6/30/05	4,924			4,924	7 MO S/L	4,924	0
25	DUPLEX IMPROVEMENTS	6/30/05	27,818			27,818	39 MO S/L	10,343	713
26	DUPLEX DRIVEWAY	9/01/06	482			482	15 MO S/L	434	32
27	STAFF HOUSE	12/01/02	84,000			84,000	39 MO S/L	36,706	2,153
28	HOUSE IMPROVEMENTS	10/23/03	8,723			8,723	39 MO S/L	3,785	224
29	HOUSE LANDSCAPING	5/19/03	315			315	15 MO S/L	315	0
30	HOUSE IMPROVEMENTS	8/01/04	1,978			1,978	20 MO S/L	1,525	98
31	BED	1/13/05	499			499	7 MO S/L	499	0
32	DISTRIBUTION CENTER	3/01/00	280,081			280,081	39 MO S/L	142,884	7,181
33	PALLET RACKS	3/01/00	2,000			2,000	15 MO S/L	2,000	0
34	NEW FOYER	11/04/06	4,056			4,056	39 MO S/L	1,404	104
35	2 SEWER PUMPS	6/12/08	6,785			6,785	39 MO S/L	2,001	174
36	OFFICE ADDITION	5/10/05	1,748			1,748	39 MO S/L	650	45
37	OFFICE REMODELING	4/04/06	1,921			1,921	39 MO S/L	665	49
38	PALLET JACK 2 1/2	9/17/04	364			364	7 MO S/L	364	0
40	CARGO TRAILER	3/15/01	4,200			4,200	7 MO S/L	4,200	0
41	SIGNS FOR CARGO TRAILER	4/14/03	600			600	5 MO S/L	600	0
42	FORKLIFT	6/02/03	6,000			6,000	7 MO S/L	6,000	0
43	LAND - LEASE INTEREST	4/01/01	62,951			62,951	100 MO S/L	11,803	630
44	LAWN MOWER	7/09/01	1,400			1,400	7 MO S/L	1,400	0
45	MOWER	7/14/04	1,654			1,654	3 MO S/L	1,654	0
46	PRINTER	1/12/01	260			260	7 MO S/L	260	0
47	DELL COMPUTER	3/05/04	1,186			1,186	5 MO S/L	1,186	0
48	PRINTER	3/19/04	300			300	5 MO S/L	300	0
49	COMPUTER AND EQUIP	5/26/05	3,684			3,684	5 MO S/L	3,684	0
50	COMPUTER & EQU	11/16/05	733			733	5 MO S/L	733	0
51	PALLET JACK	4/25/01	394			394	7 MO S/L	394	0
52	PLATFORM JACK	9/28/00	2,192			2,192	7 MO S/L	2,192	0
53	SNOWBLOWER	12/01/01	858			858	7 MO S/L	858	0
54	TRACTOR 6 BUSH HOG	7/11/03	4,300			4,300	5 MO S/L	4,300	0
57	1992 3/4 TON DODGE PICK-UP	12/14/06	5,000			5,000	3 MO S/L	5,000	0
59	LAPTOP COMPUTER	11/10/07	2,000			2,000	5 MO S/L	2,000	0
60	PROJECTOR	11/10/07	800			800	7 MO S/L	800	0
62	SNOW PLOW	2/28/08	2,592			2,592	7 MO S/L	2,592	0
63	JOHN DEER MOWER	4/24/08	8,600			8,600	7 MO S/L	8,600	0
64	2 4x8 SIGNS-REFLECTIVE	8/08/08	1,020			1,020	15 MO S/L	782	68
65	10' TABLESAW	12/09/08	2,999			2,999	7 MO S/L	2,999	0
66	DUST COLLECTOR	12/09/08	549			549	7 MO S/L	549	0
67	Improvements to Warehouse	2/06/09	16,905			16,905	39 MO S/L	4,732	433
68	woodshop improvements	3/20/09	15,862			15,862	39 MO S/L	4,372	407
69	LAMINATE FLOOR CHURCH	12/15/09	1,044			1,044	10 MO S/L	1,044	0
70	SUMP PUMP DRAIN	11/10/10	1,476			1,476	15 MO S/L	902	98
71	COUCH	4/28/10	471			471	7 MO S/L	471	0
72	TRAILER	4/07/10	400			400	5 MO S/L	400	0
73	ROUTER	6/11/10	323			323	7 MO S/L	323	0

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## Federal Asset Report

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
74	WEED EATER	8/05/10	321			321	7 MO S/L	321	0
75	COUCH	4/28/10	792			792	7 MO S/L	792	0
76	DRIVEWAY	5/25/10	2,413			2,413	15 MO S/L	1,542	161
77	ROOF	3/23/10	16,305			16,305	39 MO S/L	4,076	418
78	FOUR ROOM	9/21/10	18,142			18,142	39 MO S/L	4,303	465
79	ELECTRICAL WORK	1/18/10	1,825			1,825	15 MO S/L	1,207	121
80	INSULATION	1/05/11	5,250			5,250	15 MO S/L	3,150	350
81	POWER DRILL	3/11/11	160			160	7 MO S/L	160	0
82	2004 CHEVY VAN	6/24/11	7,500			7,500	5 MO S/L	7,500	0
83	DUST VACUUM	10/18/11	699			699	7 MO S/L	699	0
84	AIR COMPRESSOR	11/15/11	360			360	7 MO S/L	360	0
85	TWO COMPUTER MONITORS	5/03/11	1,140			1,140	5 MO S/L	1,140	0
86	ONE COMPUTER	6/10/11	550			550	5 MO S/L	550	0
87	DIGITAL CAMERA	8/25/11	600			600	7 MO S/L	600	0
88	HP OFFICE PRINTER	12/01/11	240			240	5 MO S/L	240	0
89	SNOW JAX	2/10/11	3,742			3,742	15 MO S/L	2,224	250
90	20" PLANER	9/01/12	1,768			1,768	7 MO S/L	1,768	0
91	WAREHOUSE ADDITION	1/01/12	72,497			72,497	39 MO S/L	14,871	1,859
92	NEW LIGHTS	7/16/12	5,446			5,446	15 MO S/L	2,693	363
93	STOVE	11/26/13	400			400	7 MO S/L	348	52
94	MICROWAVE	6/10/13	250			250	7 MO S/L	235	15
95	DEHUMIDIFIER	6/18/13	231			231	7 MO S/L	214	17
96	SUMP PUMP	7/18/13	155			155	7 MO S/L	142	13
97	DESKTOP PRINTER	5/20/13	150			150	5 MO S/L	150	0
98	DESKTOP PRINTER	7/01/13	150			150	5 MO S/L	150	0
99	CONDENSER FOR FURNACE	6/03/13	5,932			5,932	15 MO S/L	2,604	395
100	PRINTER - OFFICE	9/12/13	2,995			2,995	5 MO S/L	2,995	0
101	COMPUTER AND MONITOR	10/29/13	520			520	5 MO S/L	520	0
102	FLOOR SCRUBBER	5/13/13	4,255			4,255	7 MO S/L	4,052	203
103	BOSE SPEAKERS	8/17/13	100			100	7 MO S/L	90	10
104	WAREHOUSE ADDITION	1/01/18	145,579			145,579	39 MO S/L	7,466	3,732
105	REFRIGERATOR FOR DORM	8/20/15	800			800	7 MO S/L	495	114
106	ROUTER VOIP OPTIMIZED	8/24/15	115			115	3 MO S/L	115	0
107	WAREHOUSE	1/01/18	36,177			36,177	39 MO S/L	1,855	928
109	TV & Mount	4/05/16	473			473	3 MO S/L	473	0
110	Furnace	5/24/16	4,900			4,900	7 MO S/L	2,508	700
111	Air Compressor	7/14/16	479			479	3 MO S/L	479	0
112	Electric Heat/AC for Chapel	8/15/16	623			623	3 MO S/L	623	0
113	Lawnmower	9/06/16	254			254	3 MO S/L	254	0
114	TV for Dorm	10/25/16	378			378	3 MO S/L	378	0
115	4' Hydrant for RV Park	10/25/16	294			294	5 MO S/L	186	59
116	4 computers	11/15/16	1,600			1,600	3 MO S/L	1,600	0
117	4 hydrants	11/29/16	252			252	5 MO S/L	155	51
118	Backup system	11/29/16	649			649	3 MO S/L	649	0
119	Router	11/29/16	400			400	3 MO S/L	400	0
120	Hard Drive	11/30/16	174			174	3 MO S/L	174	0
121	Deck	4/14/16	887			887	5 MO S/L	665	178
122	Roof	12/23/16	16,325			16,325	30 MO S/L	1,633	544
124	A/C UNIT - OFFICE	10/20/17	10,334			10,334	15 MO S/L	1,493	689
125	NEW ROOF - DUPLEX	11/09/17	7,594			7,594	39 MO S/L	422	195
126	2 SMITH SOFAS	11/24/17	574			574	7 MO S/L	171	82
127	2 SMITH RECLINERS	11/24/17	510			510	7 MO S/L	152	73
128	2014 BOX TRUCK	1/04/17	40,500			40,500	5 MO S/L	24,300	8,100
129	SERVER	1/18/17	1,197			1,197	5 MO S/L	698	240
130	ROLING TOOL BOX	1/25/17	160			160	5 MO S/L	93	32
131	2 COMPUTERS	3/14/17	1,374			1,374	5 MO S/L	779	274
132	48 X 27 PALLET TRUCK	6/23/17	319			319	7 MO S/L	114	46
133	48 X 21 PALLET TRUCK	6/23/17	299			299	7 MO S/L	107	42
134	NEW FENCE	7/10/17	1,370			1,370	15 MO S/L	228	92
135	20 PADDED FOLDING CHAIRS	7/19/17	520			520	7 MO S/L	180	74
136	TOYOTA FORKLIFT	8/16/17	19,945			19,945	7 MO S/L	6,648	2,850
137	USED PALLET RACKING	9/29/17	2,496			2,496	7 MO S/L	802	357
138	2018 BRAVO TRAILER	10/06/17	3,155			3,155	5 MO S/L	1,420	631
139	2 VIKING SEWING MACHINES	11/14/17	800			800	7 MO S/L	248	114
140	STEEL BANDER & CART	12/06/17	512			512	7 MO S/L	152	74
141	2 NEW HYDRANTS	11/28/17	5,378			5,378	7 MO S/L	1,601	768
142	3 HEATERS	1/05/17	600			600	7 MO S/L	257	86
143	MMDC	1/01/18	54,474			54,474	39 MO S/L	2,794	1,396
144	SECURITY SYSTEM	1/16/18	937			937	10 MO S/L	180	93
145	2 HARD DRIVES	1/02/18	300			300	5 MO S/L	120	60
146	50" LED TV	2/06/18	383			383	7 MO S/L	105	55

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
147	SECURITY SYSTEM EQUIP	2/07/18	150			150	10 MO S/L	29	15
148	BARCODE SCANNER	2/20/18	111			111	5 MO S/L	41	22
149	POWER EDGE SERVER	3/22/18	5,050			5,050	5 MO S/L	1,768	1,010
150	WI FI RANGE EXTENDER	5/21/18	195			195	5 MO S/L	62	39
151	2018 FORD F250	5/23/18	47,618			47,618	5 MO S/L	15,079	9,524
152	18 VOLT DRILL	5/29/18	149			149	7 MO S/L	34	21
153	10 LAPTOPS	5/29/18	1,000			1,000	5 MO S/L	317	200
154	TV WORKROOM	5/31/18	428			428	7 MO S/L	97	61
155	STANDUP DESK	8/30/18	130			130	7 MO S/L	25	18
156	TOOLS/DEHUMIDIFIER	8/31/18	366			366	7 MO S/L	70	52
157	HAMMER DRILL	9/30/18	126			126	7 MO S/L	23	18
158	HUSKY MOUNT SHANK & PRO SERIES	1/15/19	337			337	7 MO S/L	48	48
159	30" ELECTRIC RANGE FOR STAFF HOU	2/15/19	610			610	7 MO S/L	80	87
160	STAFF HOUSE FURNITURE	3/06/19	698			698	7 MO S/L	83	100
161	5 6FT TABLES FOR DORM	3/06/19	200			200	7 MO S/L	24	28
162	RECLINER FOR STAFF HOUSE	3/07/19	329			329	7 MO S/L	39	47
163	FURNITURE FOR DORM	4/11/19	2,740			2,740	7 MO S/L	294	391
164	STANDING DESK	4/18/19	201			201	5 MO S/L	27	40
165	2008 ROCKWOOD TRAVEL TRAILER M	5/13/19	7,600			7,600	5 MO S/L	1,013	1,520
166	AIRLIFT 36" HEIGHT ADJUSTABLE DE	6/10/19	160			160	5 MO S/L	19	32
167	REPLACEMENT ENGINE FOR BOX TRU	6/13/19	30,216			30,216	5 MO S/L	3,525	6,043
168	TOYOTA FORKLIFT MODEL 8FGCU15	6/17/19	20,870			20,870	7 MO S/L	1,491	2,981
169	STAR TAG 24FT TANDEM AXLE	6/24/19	10,000			10,000	5 MO S/L	1,000	2,000
170	HVAC FOR WEST SIDE OF DORM	8/05/19	6,200			6,200	10 MO S/L	258	620
171	WASHING MACHINE FOR DUPLEX	8/10/19	397			397	7 MO S/L	24	56
172	DRYER FOR DUPLEX	8/10/19	397			397	7 MO S/L	24	56
173	FLOORING FOR STAFF HOUSE GUEST	9/01/19	502			502	10 MO S/L	17	50
174	DESKTOP COMPUTER	9/04/19	235			235	5 MO S/L	16	47
175	BIKE REPAIR STAND	9/13/19	575			575	7 MO S/L	27	83
176	BIKE REPAIR STAND	9/13/19	575			575	7 MO S/L	27	83
177	BIKE REPAIR STAND	9/13/19	575			575	7 MO S/L	27	83
178	PRESENTATION PROJECTOR	10/01/19	359			359	7 MO S/L	13	51
179	BED LINER FOR FORD PICKUP	10/21/19	500			500	5 MO S/L	17	100
180	USED TRAILER	10/21/19	800			800	5 MO S/L	27	160
181	2019 WELLS CARGO 7X16FT TRAILER	11/11/19	4,650			4,650	5 MO S/L	155	930
182	WHIRLPOOL REFRIGERATOR FOR EAS	11/14/19	629			629	7 MO S/L	15	90
183	2017 FORD F250 PICKUP	11/23/19	45,000			45,000	5 MO S/L	750	9,000
184	HUSKY 3.5K POWER JACK	11/26/19	262			262	7 MO S/L	3	38
185	2020 BRAVO TRAILER - 8.5X16FT	11/26/19	6,950			6,950	5 MO S/L	116	1,390
186	SEMI TRAILER - STORAGE	12/03/19	4,000			4,000	5 MO S/L	67	800
187	TRAX SHEET BOARD CUTTING MACH	12/30/19	498			498	7 MO S/L	0	71
189	SEMI TRAILER - STORAGE	1/08/20	4,000			4,000	5 MO S/L	0	800
190	48" X 27" ULINE PALLET TRUCK SCAL	1/15/20	1,753			1,753	7 MO S/L	0	250
191	WHITE FOREST RIVER 7' X 16' TRAILE	1/22/20	2,700			2,700	5 MO S/L	0	495
192	2020 BRAVO TRAILER W/ POWER JACI	1/24/20	6,562			6,562	5 MO S/L	0	1,203
193	SEMI TRAILER - STORAGE	3/24/20	4,000			4,000	5 MO S/L	0	600
194	LIFT GATE FOR 2020 INTERNATIONAL	4/24/20	7,955			7,955	5 MO S/L	0	1,061
195	FENCING FOR STAFF HOUSE	4/27/20	1,137			1,137	10 MO S/L	0	76
196	2020 BRAVO TRAILER	5/01/20	3,700			3,700	5 MO S/L	0	493
197	METAL ROOF FOR CHAPEL	8/05/20	2,560			2,560	30 MO S/L	0	36
198	3.5 TON TEMPSTAR HEAT PUMP	5/06/20	5,780			5,780	15 MO S/L	0	257
199	INSULATION	5/12/20	2,333			2,333	39 MO S/L	0	40
200	GARAGE	7/15/20	6,310			6,310	39 MO S/L	0	81
201	2020 DELTA TANDEM DUAL GOOSENE	8/06/20	13,500			13,500	5 MO S/L	0	1,125
202	30 X 35' STEELMASTER BUILDING	8/11/20	3,825			3,825	0 -- Memo	0	0
203	48' SEMI TRAILER	8/21/20	2,500			2,500	5 MO S/L	0	167
204	LIGHT FIXTURES FOR WAREHOUSE S	9/09/20	2,551			2,551	15 MO S/L	0	57
205	MACBOOK PRO 13"	11/16/20	1,519			1,519	5 MO S/L	0	25
206	2012 INTERNATIONAL SEMI TRUCK &	11/18/20	15,000			15,000	5 MO S/L	0	250
207	2012 CONTINENTAL 16' UTILITY TRAI	11/23/20	3,500			3,500	5 MO S/L	0	58
208	MX-5070N SHARP COPIER	11/30/20	4,075			4,075	5 MO S/L	0	68
209	3RD WAREHOUSE	5/04/20	69,404			69,404	39 MO S/L	0	1,186
210	OFFICE ADDITION	12/30/20	74,109			74,109	39 MO S/L	0	0
<b>Total Other Depreciation</b>			<u>2,593,794</u>			<u>2,593,794</u>		<u>885,863</u>	<u>113,462</u>
<b>Total ACRS and Other Depreciation</b>			<u>2,593,794</u>			<u>2,593,794</u>		<u>885,863</u>	<u>113,462</u>



**Federal Asset Report**

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
	<b>Grand Totals</b>		2,593,794			2,593,794		885,863	113,462
	<b>Less: Dispositions and Transfers</b>		0			0		0	0
	<b>Less: Start-up/Org Expense</b>		0			0		0	0
	<b>Net Grand Totals</b>		<u>2,593,794</u>			<u>2,593,794</u>		<u>885,863</u>	<u>113,462</u>

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## IL Asset Report

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Asset	Description	Date In Service	Cost	Basis for Depr	IL Prior	IL Current	Federal Current	Difference Fed - IL
<b>Other Depreciation:</b>								
1	PICNIC SHELTER	12/07/05	7,684	7,684	7,214	470	256	-214
2	PICNIC SHELTER (ELECTICAL WORK)	6/08/06	1,033	1,033	936	69	69	0
3	RV PARK	10/01/01	14,583	14,583	13,307	729	730	1
4	WAREHOUSE IMPROVEMENTS	8/11/03	1,532	1,532	1,258	76	76	0
5	GIFT STORE	10/01/01	84,000	84,000	39,308	2,154	2,153	-1
6	GIFT STORE IMPROV	10/01/02	3,360	3,360	1,486	86	87	1
7	GIFT STORE BATH IMPROV	3/15/03	2,338	2,338	1,009	60	60	0
8	WAREHOUSE ADD (material & labor)	6/25/05	27,311	27,311	10,154	700	700	0
9	WAREHOUSE BUILDING	1/01/04	290,614	290,614	119,226	7,452	7,452	0
10	WAREHOUSE BUILDING DOORS	5/01/04	2,269	2,269	2,269	0	0	0
11	WAREHOUSE INSULATION	2/25/04	5,917	5,917	2,402	152	152	0
12	WAREHOUSE ADDITIONS	7/25/05	151	151	56	4	4	0
13	WAREHOUSE ADDITION 07	11/27/07	143,640	143,640	44,504	3,683	3,683	0
14	WAREHOUSE ADD VARIOUS	1/01/08	25,642	25,642	7,890	657	658	1
15	PROJECT SHCOOL ROOM	1/02/02	18,720	18,720	8,640	480	480	0
16	LANDSCAPING	5/13/03	250	250	250	0	0	0
17	SIDEWALKS, CURBS, DRIVEWAY	5/14/03	4,462	4,462	4,462	0	0	0
18	DORMITORY BUILDING	7/01/01	262,000	262,000	124,290	6,718	6,718	0
19	DORMITORY UTILITY BUILDING	7/01/01	18,000	18,000	8,538	462	461	-1
20	DORM FURNITURE	7/01/01	2,197	2,197	2,197	0	0	0
21	DORM- GENERATOR	2/28/08	3,285	3,285	997	84	84	0
22	DUPLEX	12/31/04	135,559	135,559	52,138	3,476	3,476	0
23	APPLIANCES-DUPLEX	6/30/05	2,661	2,661	2,661	0	0	0
24	FURNITURE- DUPLEX	6/30/05	4,924	4,924	4,924	0	0	0
25	DUPLEX IMPROVEMENTS	6/30/05	27,818	27,818	10,343	713	713	0
26	DUPLEX DRIVEWAY	9/01/06	482	482	429	32	32	0
27	STAFF HOUSE	12/01/02	84,000	84,000	36,795	2,154	2,153	-1
28	HOUSE IMPROVEMENTS	10/23/03	8,723	8,723	3,616	224	224	0
29	HOUSE LANDSCAPING	5/19/03	315	315	315	0	0	0
30	HOUSE IMPROVEMENTS	8/01/04	1,978	1,978	1,525	98	98	0
31	BED	1/13/05	499	499	499	0	0	0
32	DISTRIBUTION CENTER	3/01/00	280,081	280,081	142,434	7,182	7,181	-1
33	PALLET RACKS	3/01/00	2,000	2,000	2,000	0	0	0
34	NEW FOYER	11/04/06	4,056	4,056	1,369	104	104	0
35	2 SEWER PUMPS	6/12/08	6,785	6,785	2,015	174	174	0
36	OFFICE ADDITION	5/10/05	1,748	1,748	657	45	45	0
37	OFFICE REMODELING	4/04/06	1,921	1,921	677	49	49	0
38	PALLET JACK 2 1/2	9/17/04	364	364	364	0	0	0
40	CARGO TRAILER	3/15/01	4,200	4,200	4,200	0	0	0
41	SIGNS FOR CARGO TRAILER	4/14/03	600	600	600	0	0	0
42	FORKLIFT	6/02/03	6,000	6,000	6,000	0	0	0
43	LAND - LEASE INTEREST	4/01/01	62,951	62,951	11,803	630	630	0
44	LAWN MOWER	7/09/01	1,400	1,400	1,400	0	0	0
45	MOWER	7/14/04	1,654	1,654	1,654	0	0	0
46	PRINTER	1/12/01	260	260	260	0	0	0
47	DELL COMPUTER	3/05/04	1,186	1,186	1,186	0	0	0
48	PRINTER	3/19/04	300	300	300	0	0	0
49	COMPUTER AND EQUIP	5/26/05	3,684	3,684	3,684	0	0	0
50	COMPUTER & EQU	11/16/05	733	733	733	0	0	0
51	PALLET JACK	4/25/01	394	394	394	0	0	0
52	PLATFORM JACK	9/28/00	2,192	2,192	2,192	0	0	0
53	SNOWBLOWER	12/01/01	858	858	858	0	0	0
54	TRACTOR 6 BUSH HOG	7/11/03	4,300	4,300	4,300	0	0	0
57	1992 3/4 TON DODGE PICK-UP	12/14/06	5,000	5,000	5,000	0	0	0
59	LAPTOP COMPUTER	11/10/07	2,000	2,000	2,000	0	0	0
60	PROJECTOR	11/10/07	800	800	800	0	0	0
62	SNOW PLOW	2/28/08	2,592	2,592	2,592	0	0	0
63	JOHN DEER MOWER	4/24/08	8,600	8,600	8,600	0	0	0
64	2 4x8 SIGNS-REFLECTIVE	8/08/08	1,020	1,020	776	68	68	0
65	10' TABLESAW	12/09/08	2,999	2,999	2,999	0	0	0
66	DUST COLLECTOR	12/09/08	549	549	549	0	0	0
67	Improvements to Warehouse	2/06/09	16,905	16,905	4,732	433	433	0
68	woodshop improvements	3/20/09	15,862	15,862	4,372	407	407	0
69	LAMINATE FLOOR CHURCH	12/15/09	1,044	1,044	1,044	0	0	0
70	SUMP PUMP DRAIN	11/10/10	1,476	1,476	902	98	98	0
71	COUCH	4/28/10	471	471	471	0	0	0
72	TRAILER	4/07/10	400	400	400	0	0	0
73	ROUTER	6/11/10	323	323	323	0	0	0

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Asset	Description	Date In Service	Cost	Basis for Depr	IL Prior	IL Current	Federal Current	Difference Fed - IL
74	WEED EATER	8/05/10	321	321	321	0	0	0
75	COUCH	4/28/10	792	792	792	0	0	0
76	DRIVEWAY	5/25/10	2,413	2,413	1,542	161	161	0
77	ROOF	3/23/10	16,305	16,305	4,076	418	418	0
78	FOUR ROOM	9/21/10	18,142	18,142	4,303	465	465	0
79	ELECTRICAL WORK	1/18/10	1,825	1,825	1,207	121	121	0
80	INSULATION	1/05/11	5,250	5,250	3,150	350	350	0
81	POWER DRILL	3/11/11	160	160	160	0	0	0
82	2004 CHEVY VAN	6/24/11	7,500	7,500	7,500	0	0	0
83	DUST VACUUM	10/18/11	699	699	699	0	0	0
84	AIR COMPRESSOR	11/15/11	360	360	360	0	0	0
85	TWO COMPUTER MONITORS	5/03/11	1,140	1,140	1,140	0	0	0
86	ONE COMPUTER	6/10/11	550	550	550	0	0	0
87	DIGITAL CAMERA	8/25/11	600	600	600	0	0	0
88	HP OFFICE PRINTER	12/01/11	240	240	240	0	0	0
89	SNOW JAX	2/10/11	3,742	3,742	2,224	250	250	0
90	20" PLANER	9/01/12	1,768	1,768	1,768	0	0	0
91	WAREHOUSE ADDITION	1/01/12	72,497	72,497	14,871	1,859	1,859	0
92	NEW LIGHTS	7/16/12	5,446	5,446	2,693	363	363	0
93	STOVE	11/26/13	400	400	348	52	52	0
94	MICROWAVE	6/10/13	250	250	235	15	15	0
95	DEHUMIDIFIER	6/18/13	231	231	214	17	17	0
96	SUMP PUMP	7/18/13	155	155	142	13	13	0
97	DESKTOP PRINTER	5/20/13	150	150	150	0	0	0
98	DESKTOP PRINTER	7/01/13	150	150	150	0	0	0
99	CONDENSER FOR FURNACE	6/03/13	5,932	5,932	2,604	395	395	0
100	PRINTER - OFFICE	9/12/13	2,995	2,995	2,995	0	0	0
101	COMPUTER AND MONITOR	10/29/13	520	520	520	0	0	0
102	FLOOR SCRUBBER	5/13/13	4,255	4,255	4,052	203	203	0
103	BOSE SPEAKERS	8/17/13	100	100	90	10	10	0
104	WAREHOUSE ADDITION	1/01/18	14,579	14,579	748	373	3,732	3,359
105	REFRIGERATOR FOR DORM	8/20/15	800	800	495	114	114	0
106	ROUTER VOIP OPTIMIZED	8/24/15	115	115	115	0	0	0
107	WAREHOUSE	1/01/18	36,177	36,177	1,855	928	928	0
109	TV & Mount	4/05/16	473	473	473	0	0	0
110	Furnace	5/24/16	4,900	4,900	2,508	700	700	0
111	Air Compressor	7/14/16	479	479	479	0	0	0
112	Electric Heat/AC for Chapel	8/15/16	623	623	623	0	0	0
113	Lawnmower	9/06/16	254	254	254	0	0	0
114	TV for Dorm	10/25/16	378	378	378	0	0	0
115	4' Hydrant for RV Park	10/25/16	294	294	186	59	59	0
116	4 computers	11/15/16	1,600	1,600	1,600	0	0	0
117	4 hydrants	11/29/16	252	252	155	51	51	0
118	Backup system	11/29/16	649	649	649	0	0	0
119	Router	11/29/16	400	400	400	0	0	0
120	Hard Drive	11/30/16	174	174	174	0	0	0
121	Deck	4/14/16	887	887	665	178	178	0
122	Roof	12/23/16	16,325	16,325	1,633	544	544	0
124	A/C UNIT - OFFICE	10/20/17	10,334	10,334	1,493	689	689	0
125	NEW ROOF - DUPLEX	11/09/17	7,594	7,594	422	195	195	0
126	2 SMITH SOFAS	11/24/17	574	574	171	82	82	0
127	2 SMITH RECLINERS	11/24/17	510	510	152	73	73	0
128	2014 BOX TRUCK	1/04/17	40,500	40,500	24,300	8,100	8,100	0
129	SERVER	1/18/17	1,197	1,197	698	240	240	0
130	ROLING TOOL BOX	1/25/17	160	160	93	32	32	0
131	2 COMPUTERS	3/14/17	1,374	1,374	779	274	274	0
132	48 X 27 PALLET TRUCK	6/23/17	319	319	114	46	46	0
133	48 X 21 PALLET TRUCK	6/23/17	299	299	107	42	42	0
134	NEW FENCE	7/10/17	1,370	1,370	228	92	92	0
135	20 PADDED FOLDING CHAIRS	7/19/17	520	520	180	74	74	0
136	TOYOTA FORKLIFT	8/16/17	19,945	19,945	6,648	2,850	2,850	0
137	USED PALLET RACKING	9/29/17	2,496	2,496	802	357	357	0
138	2018 BRAVO TRAILER	10/06/17	3,155	3,155	1,420	631	631	0
139	2 VIKING SEWING MACHINES	11/14/17	800	800	248	114	114	0
140	STEEL BANDER & CART	12/06/17	512	512	152	74	74	0
141	2 NEW HYDRANTS	11/28/17	5,378	5,378	1,601	768	768	0
142	3 HEATERS	1/05/17	600	600	257	86	86	0
143	MMDC	1/01/18	54,474	54,474	2,794	1,396	1,396	0
144	SECURITY SYSTEM	1/16/18	937	937	180	93	93	0
145	2 HARD DRIVES	1/02/18	300	300	120	60	60	0
146	50" LED TV	2/06/18	383	383	105	55	55	0

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Asset	Description	Date In Service	Cost	Basis for Depr	IL Prior	IL Current	Federal Current	Difference Fed - IL
147	SECURITY SYSTEM EQUIP	2/07/18	150	150	29	15	15	0
148	BARCODE SCANNER	2/20/18	111	111	41	22	22	0
149	POWER EDGE SERVER	3/22/18	5,050	5,050	1,768	1,010	1,010	0
150	WI FI RANGE EXTENDER	5/21/18	195	195	62	39	39	0
151	2018 FORD F250	5/23/18	47,618	47,618	15,079	9,524	9,524	0
152	18 VOLT DRILL	5/29/18	149	149	34	21	21	0
153	10 LAPTOPS	5/29/18	1,000	1,000	317	200	200	0
154	TV WORKROOM	5/31/18	428	428	97	61	61	0
155	STANDUP DESK	8/30/18	130	130	25	18	18	0
156	TOOLS/DEHUMIDIFIER	8/31/18	366	366	70	52	52	0
157	HAMMER DRILL	9/30/18	126	126	23	18	18	0
158	HUSKY MOUNT SHANK & PRO SERIES	1/15/19	337	337	48	48	48	0
159	30" ELECTRIC RANGE FOR STAFF HOU	2/15/19	610	610	80	87	87	0
160	STAFF HOUSE FURNITURE	3/06/19	698	698	83	100	100	0
161	5 6FT TABLES FOR DORM	3/06/19	200	200	24	28	28	0
162	RECLINER FOR STAFF HOUSE	3/07/19	329	329	39	47	47	0
163	FURNITURE FOR DORM	4/11/19	2,740	2,740	294	391	391	0
164	STANDING DESK	4/18/19	201	201	27	40	40	0
165	2008 ROCKWOOD TRAVEL TRAILER M	5/13/19	7,600	7,600	1,013	1,520	1,520	0
166	AIRLIFT 36" HEIGHT ADJUSTABLE DE	6/10/19	160	160	19	32	32	0
167	REPLACEMENT ENGINE FOR BOX TRU	6/13/19	30,216	30,216	3,525	6,043	6,043	0
168	TOYOTA FORKLIFT MODEL 8FGCU15	6/17/19	20,870	20,870	1,491	2,981	2,981	0
169	STAR TAG 24FT TANDEM AXLE	6/24/19	10,000	10,000	1,000	2,000	2,000	0
170	HVAC FOR WEST SIDE OF DORM	8/05/19	6,200	6,200	258	620	620	0
171	WASHING MACHINE FOR DUPLEX	8/10/19	397	397	24	56	56	0
172	DRYER FOR DUPLEX	8/10/19	397	397	24	56	56	0
173	FLOORING FOR STAFF HOUSE GUEST	9/01/19	502	502	17	50	50	0
174	DESKTOP COMPUTER	9/04/19	235	235	16	47	47	0
175	BIKE REPAIR STAND	9/13/19	575	575	27	83	83	0
176	BIKE REPAIR STAND	9/13/19	575	575	27	83	83	0
177	BIKE REPAIR STAND	9/13/19	575	575	27	83	83	0
178	PRESENTATION PROJECTOR	10/01/19	359	359	13	51	51	0
179	BED LINER FOR FORD PICKUP	10/21/19	500	500	17	100	100	0
180	USED TRAILER	10/21/19	800	800	27	160	160	0
181	2019 WELLS CARGO 7X16FT TRAILER	11/11/19	4,650	4,650	155	930	930	0
182	WHIRLPOOL REFRIGERATOR FOR EAS	11/14/19	629	629	15	90	90	0
183	2017 FORD F250 PICKUP	11/23/19	45,000	45,000	750	9,000	9,000	0
184	HUSKY 3.5K POWER JACK	11/26/19	262	262	3	38	38	0
185	2020 BRAVO TRAILER - 8.5X16FT	11/26/19	6,950	6,950	116	1,390	1,390	0
186	SEMI TRAILER - STORAGE	12/03/19	4,000	4,000	67	800	800	0
187	TRAX SHEET BOARD CUTTING MACH	12/30/19	498	498	0	71	71	0
189	SEMI TRAILER - STORAGE	1/08/20	4,000	4,000	0	800	800	0
190	48" X 27" ULINE PALLET TRUCK SCAL	1/15/20	1,753	1,753	0	250	250	0
191	WHITE FOREST RIVER 7' X 16' TRAILE	1/22/20	2,700	2,700	0	495	495	0
192	2020 BRAVO TRAILER W/ POWER JACI	1/24/20	6,562	6,562	0	1,203	1,203	0
193	SEMI TRAILER - STORAGE	3/24/20	4,000	4,000	0	600	600	0
194	LIFT GATE FOR 2020 INTERNATIONAL	4/24/20	7,955	7,955	0	1,061	1,061	0
195	FENCING FOR STAFF HOUSE	4/27/20	1,137	1,137	0	76	76	0
196	2020 BRAVO TRAILER	5/01/20	3,700	3,700	0	493	493	0
197	METAL ROOF FOR CHAPEL	8/05/20	2,560	2,560	0	36	36	0
198	3.5 TON TEMPSTAR HEAT PUMP	5/06/20	5,780	5,780	0	257	257	0
199	INSULATION	5/12/20	2,333	2,333	0	40	40	0
200	GARAGE	7/15/20	6,310	6,310	0	81	81	0
201	2020 DELTA TANDEM DUAL GOOSENE	8/06/20	13,500	13,500	0	1,125	1,125	0
202	30 X 35' STEELMASTER BUILDING	8/11/20	3,825	3,825	0	0	0	0
203	48' SEMI TRAILER	8/21/20	2,500	2,500	0	167	167	0
204	LIGHT FIXTURES FOR WAREHOUSE S	9/09/20	2,551	2,551	0	57	57	0
205	MACBOOK PRO 13"	11/16/20	1,519	1,519	0	25	25	0
206	2012 INTERNATIONAL SEMI TRUCK &	11/18/20	15,000	15,000	0	250	250	0
207	2012 CONTINENTAL 16' UTILITY TRAI	11/23/20	3,500	3,500	0	58	58	0
208	MX-5070N SHARP COPIER	11/30/20	4,075	4,075	0	68	68	0
209	3RD WAREHOUSE	5/04/20	69,404	69,404	0	1,186	1,186	0
210	OFFICE ADDITION	12/30/20	74,109	74,109	0	0	0	0
<b>Total Other Depreciation</b>			<u>2,462,794</u>	<u>2,462,794</u>	<u>881,199</u>	<u>110,318</u>	<u>113,462</u>	<u>3,144</u>
<b>Total ACRS and Other Depreciation</b>			<u>2,462,794</u>	<u>2,462,794</u>	<u>881,199</u>	<u>110,318</u>	<u>113,462</u>	<u>3,144</u>

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Asset	Description	Date In Service	Cost	Basis for Depr	IL Prior	IL Current	Federal Current	Difference Fed - IL
	<b>Grand Totals</b>		2,462,794	2,462,794	881,199	110,318	113,462	3,144
	<b>Less: Dispositions</b>		0	0	0	0	0	0
	<b>Less: Start-up/Org Expense</b>		0	0	0	0	0	0
	<b>Net Grand Totals</b>		<u>2,462,794</u>	<u>2,462,794</u>	<u>881,199</u>	<u>110,318</u>	<u>113,462</u>	<u>3,144</u>

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**AMT Asset Report**

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
<b>Other Depreciation:</b>										
1	PICNIC SHELTER	12/07/05	0				0	0	HY	0
2	PICNIC SHELTER (ELECTICAL WORK)	6/08/06	0				0	0	HY	0
3	RV PARK	10/01/01	0				0	0	HY	0
4	WAREHOUSE IMPROVEMENTS	8/11/03	0				0	0	HY	0
5	GIFT STORE	10/01/01	0				0	0	HY	0
6	GIFT STORE IMPROV	10/01/02	0				0	0	HY	0
7	GIFT STORE BATH IMPROV	3/15/03	0				0	0	HY	0
8	WAREHOUSE ADD (material & labor)	6/25/05	0				0	0	HY	0
9	WAREHOUSE BUILDING	1/01/04	0				0	0	HY	0
10	WAREHOUSE BUILDING DOORS	5/01/04	0				0	0	HY	0
11	WAREHOUSE INSULATION	2/25/04	0				0	0	HY	0
12	WAREHOUSE ADDITIONS	7/25/05	0				0	0	HY	0
13	WAREHOUSE ADDITION 07	11/27/07	0				0	0	HY	0
14	WAREHOUSE ADD VARIOUS	1/01/08	0				0	0	HY	0
15	PROJECT SHCOOL ROOM	1/02/02	0				0	0	HY	0
16	LANDSCAPING	5/13/03	0				0	0	HY	0
17	SIDEWALKS, CURBS, DRIVEWAY	5/14/03	0				0	0	HY	0
18	DORMITORY BUILDING	7/01/01	0				0	0	HY	0
19	DORMITORY UTILITY BUILDING	7/01/01	0				0	0	HY	0
20	DORM FURNITURE	7/01/01	0				0	0	HY	0
21	DORM- GENERATOR	2/28/08	0				0	0	HY	0
22	DUPLEX	12/31/04	0				0	0	HY	0
23	APPLIANCES-DUPLEX	6/30/05	0				0	0	HY	0
24	FURNITURE- DUPLEX	6/30/05	0				0	0	HY	0
25	DUPLEX IMPROVEMENTS	6/30/05	0				0	0	HY	0
26	DUPLEX DRIVEWAY	9/01/06	0				0	0	HY	0
27	STAFF HOUSE	12/01/02	0				0	0	HY	0
28	HOUSE IMPROVEMENTS	10/23/03	0				0	0	HY	0
29	HOUSE LANDSCAPING	5/19/03	0				0	0	HY	0
30	HOUSE IMPROVEMENTS	8/01/04	0				0	0	HY	0
31	BED	1/13/05	0				0	0	HY	0
32	DISTRIBUTION CENTER	3/01/00	0				0	0	HY	0
33	PALLET RACKS	3/01/00	0				0	0	HY	0
34	NEW FOYER	11/04/06	0				0	0	HY	0
35	2 SEWER PUMPS	6/12/08	0				0	0	HY	0
36	OFFICE ADDITION	5/10/05	0				0	0	HY	0
37	OFFICE REMODELING	4/04/06	0				0	0	HY	0
38	PALLET JACK 2 1/2	9/17/04	0				0	0	HY	0
40	CARGO TRAILER	3/15/01	0				0	0	HY	0
41	SIGNS FOR CARGO TRAILER	4/14/03	0				0	0	HY	0
42	FORKLIFT	6/02/03	0				0	0	HY	0
43	LAND - LEASE INTEREST	4/01/01	0				0	0	HY	0
44	LAWN MOWER	7/09/01	0				0	0	HY	0
45	MOWER	7/14/04	0				0	0	HY	0
46	PRINTER	1/12/01	0				0	0	HY	0
47	DELL COMPUTER	3/05/04	0				0	0	HY	0
48	PRINTER	3/19/04	0				0	0	HY	0
49	COMPUTER AND EQUIP	5/26/05	0				0	0	HY	0
50	COMPUTER & EQU	11/16/05	0				0	0	HY	0
51	PALLET JACK	4/25/01	0				0	0	HY	0
52	PLATFORM JACK	9/28/00	0				0	0	HY	0
53	SNOWBLOWER	12/01/01	0				0	0	HY	0
54	TRACTOR 6 BUSH HOG	7/11/03	0				0	0	HY	0
57	1992 3/4 TON DODGE PICK-UP	12/14/06	0				0	0	HY	0
59	LAPTOP COMPUTER	11/10/07	0				0	0	HY	0
60	PROJECTOR	11/10/07	0				0	0	HY	0
62	SNOW PLOW	2/28/08	0				0	0	HY	0
63	JOHN DEER MOWER	4/24/08	0				0	0	HY	0
64	2 4x8 SIGNS-REFLECTIVE	8/08/08	0				0	0	HY	0
65	10' TABLESAW	12/09/08	0				0	0	HY	0
66	DUST COLLECTOR	12/09/08	0				0	0	HY	0
67	Improvements to Warehouse	2/06/09	0				0	0	HY	0
68	woodshop improvements	3/20/09	0				0	0	HY	0
69	LAMINATE FLOOR CHURCH	12/15/09	0				0	0	HY	0
70	SUMP PUMP DRAIN	11/10/10	0				0	0	HY	0
71	COUCH	4/28/10	0				0	0	HY	0
72	TRAILER	4/07/10	0				0	0	HY	0
73	ROUTER	6/11/10	0				0	0	HY	0

37-1391589

## AMT Asset Report

FYE: 12/31/2020

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
74	WEED EATER	8/05/10	0			0	0 HY	0	0
75	COUCH	4/28/10	0			0	0 HY	0	0
76	DRIVEWAY	5/25/10	0			0	0 HY	0	0
77	ROOF	3/23/10	0			0	0 HY	0	0
78	FOUR ROOM	9/21/10	0			0	0 HY	0	0
79	ELECTRICAL WORK	1/18/10	0			0	0 HY	0	0
80	INSULATION	1/05/11	5,250			5,250	15 MO S/L	3,150	350
81	POWER DRILL	3/11/11	160			160	7 MO S/L	160	0
82	2004 CHEVY VAN	6/24/11	7,500			7,500	5 MO S/L	7,500	0
83	DUST VACUUM	10/18/11	699			699	7 MO S/L	699	0
84	AIR COMPRESSOR	11/15/11	360			360	7 MO S/L	360	0
85	TWO COMPUTER MONITORS	5/03/11	1,140			1,140	5 MO S/L	1,140	0
86	ONE COMPUTER	6/10/11	550			550	5 MO S/L	550	0
87	DIGITAL CAMERA	8/25/11	600			600	7 MO S/L	600	0
88	HP OFFICE PRINTER	12/01/11	240			240	5 MO S/L	240	0
89	SNOW JAX	2/10/11	3,742			3,742	15 MO S/L	2,224	250
90	20" PLANER	9/01/12	1,768			1,768	7 MO S/L	1,768	0
91	WAREHOUSE ADDITION	1/01/12	72,497			72,497	39 MO S/L	14,871	1,859
92	NEW LIGHTS	7/16/12	5,446			5,446	15 MO S/L	2,693	363
93	STOVE	11/26/13	0			0	0 HY	0	0
94	MICROWAVE	6/10/13	0			0	0 HY	0	0
95	DEHUMIDIFIER	6/18/13	0			0	0 HY	0	0
96	SUMP PUMP	7/18/13	0			0	0 HY	0	0
97	DESKTOP PRINTER	5/20/13	0			0	0 HY	0	0
98	DESKTOP PRINTER	7/01/13	0			0	0 HY	0	0
99	CONDENSER FOR FURNACE	6/03/13	0			0	0 HY	0	0
100	PRINTER - OFFICE	9/12/13	0			0	0 HY	0	0
101	COMPUTER AND MONITOR	10/29/13	0			0	0 HY	0	0
102	FLOOR SCRUBBER	5/13/13	0			0	0 HY	0	0
103	BOSE SPEAKERS	8/17/13	0			0	0 HY	0	0
104	WAREHOUSE ADDITION	1/01/18	0			0	0 HY	0	0
105	REFRIGERATOR FOR DORM	8/20/15	0			0	0 HY	0	0
106	ROUTER VOIP OPTIMIZED	8/24/15	0			0	0 HY	0	0
107	WAREHOUSE	1/01/18	0			0	0 HY	0	0
109	TV & Mount	4/05/16	0			0	0 HY	0	0
110	Furnace	5/24/16	0			0	0 HY	0	0
111	Air Compressor	7/14/16	0			0	0 HY	0	0
112	Electric Heat/AC for Chapel	8/15/16	0			0	0 HY	0	0
113	Lawnmower	9/06/16	0			0	0 HY	0	0
114	TV for Dorm	10/25/16	0			0	0 HY	0	0
115	4' Hydrant for RV Park	10/25/16	0			0	0 HY	0	0
116	4 computers	11/15/16	0			0	0 HY	0	0
117	4 hydrants	11/29/16	0			0	0 HY	0	0
118	Backup system	11/29/16	0			0	0 HY	0	0
119	Router	11/29/16	0			0	0 HY	0	0
120	Hard Drive	11/30/16	0			0	0 HY	0	0
121	Deck	4/14/16	0			0	0 HY	0	0
122	Roof	12/23/16	0			0	0 HY	0	0
124	A/C UNIT - OFFICE	10/20/17	0			0	0 HY	0	0
125	NEW ROOF - DUPLEX	11/09/17	0			0	0 HY	0	0
126	2 SMITH SOFAS	11/24/17	0			0	0 HY	0	0
127	2 SMITH RECLINERS	11/24/17	0			0	0 HY	0	0
128	2014 BOX TRUCK	1/04/17	0			0	0 HY	0	0
129	SERVER	1/18/17	0			0	0 HY	0	0
130	ROLING TOOL BOX	1/25/17	0			0	0 HY	0	0
131	2 COMPUTERS	3/14/17	0			0	0 HY	0	0
132	48 X 27 PALLET TRUCK	6/23/17	0			0	0 HY	0	0
133	48 X 21 PALLET TRUCK	6/23/17	0			0	0 HY	0	0
134	NEW FENCE	7/10/17	0			0	0 HY	0	0
135	20 PADDED FOLDING CHAIRS	7/19/17	0			0	0 HY	0	0
136	TOYOTA FORKLIFT	8/16/17	0			0	0 HY	0	0
137	USED PALLET RACKING	9/29/17	0			0	0 HY	0	0
138	2018 BRAVO TRAILER	10/06/17	0			0	0 HY	0	0
139	2 VIKING SEWING MACHINES	11/14/17	0			0	0 HY	0	0
140	STEEL BANDER & CART	12/06/17	0			0	0 HY	0	0
141	2 NEW HYDRANTS	11/28/17	0			0	0 HY	0	0
142	3 HEATERS	1/05/17	0			0	0 HY	0	0
143	MMDC	1/01/18	0			0	0 HY	0	0
144	SECURITY SYSTEM	1/16/18	0			0	0 HY	0	0
145	2 HARD DRIVES	1/02/18	0			0	0 HY	0	0
146	50" LED TV	2/06/18	0			0	0 HY	0	0

37-1391589

## AMT Asset Report

FYE: 12/31/2020

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
147	SECURITY SYSTEM EQUIP	2/07/18	0			0	0 HY	0	0
148	BARCODE SCANNER	2/20/18	0			0	0 HY	0	0
149	POWER EDGE SERVER	3/22/18	0			0	0 HY	0	0
150	WI FI RANGE EXTENDER	5/21/18	0			0	0 HY	0	0
151	2018 FORD F250	5/23/18	0			0	0 HY	0	0
152	18 VOLT DRILL	5/29/18	0			0	0 HY	0	0
153	10 LAPTOPS	5/29/18	0			0	0 HY	0	0
154	TV WORKROOM	5/31/18	0			0	0 HY	0	0
155	STANDUP DESK	8/30/18	0			0	0 HY	0	0
156	TOOLS/DEHUMIDIFIER	8/31/18	0			0	0 HY	0	0
157	HAMMER DRILL	9/30/18	0			0	0 HY	0	0
158	HUSKY MOUNT SHANK & PRO SERIES	1/15/19	0			0	0 HY	0	0
159	30" ELECTRIC RANGE FOR STAFF HOU	2/15/19	0			0	0 HY	0	0
160	STAFF HOUSE FURNITURE	3/06/19	0			0	0 HY	0	0
161	5 6FT TABLES FOR DORM	3/06/19	0			0	0 HY	0	0
162	RECLINER FOR STAFF HOUSE	3/07/19	0			0	0 HY	0	0
163	FURNITURE FOR DORM	4/11/19	0			0	0 HY	0	0
164	STANDING DESK	4/18/19	0			0	0 HY	0	0
165	2008 ROCKWOOD TRAVEL TRAILER M	5/13/19	0			0	0 HY	0	0
166	AIRLIFT 36" HEIGHT ADJUSTABLE DE	6/10/19	0			0	0 HY	0	0
167	REPLACEMENT ENGINE FOR BOX TRU	6/13/19	0			0	0 HY	0	0
168	TOYOTA FORKLIFT MODEL 8FGCU15	6/17/19	0			0	0 HY	0	0
169	STAR TAG 24FT TANDEM AXLE	6/24/19	0			0	0 HY	0	0
170	HVAC FOR WEST SIDE OF DORM	8/05/19	0			0	0 HY	0	0
171	WASHING MACHINE FOR DUPLEX	8/10/19	0			0	0 HY	0	0
172	DRYER FOR DUPLEX	8/10/19	0			0	0 HY	0	0
173	FLOORING FOR STAFF HOUSE GUEST	9/01/19	0			0	0 HY	0	0
174	DESKTOP COMPUTER	9/04/19	0			0	0 HY	0	0
175	BIKE REPAIR STAND	9/13/19	0			0	0 HY	0	0
176	BIKE REPAIR STAND	9/13/19	0			0	0 HY	0	0
177	BIKE REPAIR STAND	9/13/19	0			0	0 HY	0	0
178	PRESENTATION PROJECTOR	10/01/19	0			0	0 HY	0	0
179	BED LINER FOR FORD PICKUP	10/21/19	0			0	0 HY	0	0
180	USED TRAILER	10/21/19	0			0	0 HY	0	0
181	2019 WELLS CARGO 7X16FT TRAILER	11/11/19	0			0	0 HY	0	0
182	WHIRLPOOL REFRIGERATOR FOR EAS	11/14/19	0			0	0 HY	0	0
183	2017 FORD F250 PICKUP	11/23/19	0			0	0 HY	0	0
184	HUSKY 3.5K POWER JACK	11/26/19	0			0	0 HY	0	0
185	2020 BRAVO TRAILER - 8.5X16FT	11/26/19	0			0	0 HY	0	0
186	SEMI TRAILER - STORAGE	12/03/19	0			0	0 HY	0	0
187	TRAX SHEET BOARD CUTTING MACH	12/30/19	0			0	0 HY	0	0
189	SEMI TRAILER - STORAGE	1/08/20	0			0	0 HY	0	0
190	48" X 27" ULINE PALLET TRUCK SCAL	1/15/20	0			0	0 HY	0	0
191	WHITE FOREST RIVER 7' X 16' TRAI	1/22/20	0			0	0 HY	0	0
192	2020 BRAVO TRAILER W/ POWER JACI	1/24/20	0			0	0 HY	0	0
193	SEMI TRAILER - STORAGE	3/24/20	0			0	0 HY	0	0
194	LIFT GATE FOR 2020 INTERNATIONAL	4/24/20	0			0	0 HY	0	0
195	FENCING FOR STAFF HOUSE	4/27/20	0			0	0 HY	0	0
196	2020 BRAVO TRAILER	5/01/20	0			0	0 HY	0	0
197	METAL ROOF FOR CHAPEL	8/05/20	0			0	0 HY	0	0
198	3.5 TON TEMPSTAR HEAT PUMP	5/06/20	0			0	0 HY	0	0
199	INSULATION	5/12/20	0			0	0 HY	0	0
200	GARAGE	7/15/20	0			0	0 HY	0	0
201	2020 DELTA TANDEM DUAL GOSENE	8/06/20	0			0	0 HY	0	0
202	30 X 35' STEELMASTER BUILDING	8/11/20	0			0	0 HY	0	0
203	48' SEMI TRAILER	8/21/20	0			0	0 HY	0	0
204	LIGHT FIXTURES FOR WAREHOUSE S	9/09/20	0			0	0 HY	0	0
205	MACBOOK PRO 13"	11/16/20	0			0	0 HY	0	0
206	2012 INTERNATIONAL SEMI TRUCK &	11/18/20	0			0	0 HY	0	0
207	2012 CONTINENTAL 16' UTILITY TRAI	11/23/20	0			0	0 HY	0	0
208	MX-5070N SHARP COPIER	11/30/20	0			0	0 HY	0	0
209	3RD WAREHOUSE	5/04/20	0			0	0 HY	0	0
210	OFFICE ADDITION	12/30/20	0			0	0 HY	0	0
	<b>Total Other Depreciation</b>		<u>99,952</u>			<u>99,952</u>		<u>35,955</u>	<u>2,822</u>
	<b>Total ACRS and Other Depreciation</b>		<u>99,952</u>			<u>99,952</u>		<u>35,955</u>	<u>2,822</u>



**AMT Asset Report**

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
	<b>Grand Totals</b>		99,952			99,952		35,955	2,822
	<b>Less: Dispositions and Transfers</b>		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	<b>Net Grand Totals</b>		<u>99,952</u>			<u>99,952</u>		<u>35,955</u>	<u>2,822</u>

# Depreciation Adjustment Report

## All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
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There are no assets that meet the criteria of this report

37-1391589

**Future Depreciation Report****FYE: 12/31/21**

FYE: 12/31/2020

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
<b>Other Depreciation:</b>					
1	PICNIC SHELTER	12/07/05	7,684	0	0
2	PICNIC SHELTER (ELECTICAL WORK)	6/08/06	1,033	34	0
3	RV PARK	10/01/01	14,583	638	0
4	WAREHOUSE IMPROVEMENTS	8/11/03	1,532	77	0
5	GIFT STORE	10/01/01	84,000	2,154	0
6	GIFT STORE IMPROV	10/01/02	3,360	86	0
7	GIFT STORE BATH IMPROV	3/15/03	2,338	60	0
8	WAREHOUSE ADD (material & labor)	6/25/05	27,311	700	0
9	WAREHOUSE BUILDING	1/01/04	290,614	7,451	0
10	WAREHOUSE BUILDING DOORS	5/01/04	2,269	0	0
11	WAREHOUSE INSULATION	2/25/04	5,917	152	0
12	WAREHOUSE ADDITIONS	7/25/05	151	4	0
13	WAREHOUSE ADDITION 07	11/27/07	143,640	3,683	0
14	WAREHOUSE ADD VARIOUS	1/01/08	25,642	657	0
15	PROJECT SHCOOL ROOM	1/02/02	18,720	480	0
16	LANDSCAPING	5/13/03	250	0	0
17	SIDEWALKS, CURBS, DRIVEWAY	5/14/03	4,462	0	0
18	DORMITORY BUILDING	7/01/01	262,000	6,718	0
19	DORMINTORY UTILITY BUILDING	7/01/01	18,000	462	0
20	DORM FURNITURE	7/01/01	2,197	0	0
21	DORM- GENERATOR	2/28/08	3,285	84	0
22	DUPLEX	12/31/04	135,559	3,476	0
23	APPLIANCES-DUPLEX	6/30/05	2,661	0	0
24	FURNITURE- DUPLEX	6/30/05	4,924	0	0
25	DUPLEX IMPROVEMENTS	6/30/05	27,818	713	0
26	DUPLEX DRIVEWAY	9/01/06	482	16	0
27	STAFF HOUSE	12/01/02	84,000	2,154	0
28	HOUSE IMPROVEMENTS	10/23/03	8,723	223	0
29	HOUSE LANDSCAPING	5/19/03	315	0	0
30	HOUSE IMPROVEMENTS	8/01/04	1,978	99	0
31	BED	1/13/05	499	0	0
32	DISTRIBUTION CENTER	3/01/00	280,081	7,182	0
33	PALLET RACKS	3/01/00	2,000	0	0
34	NEW FOYER	11/04/06	4,056	104	0
35	2 SEWER PUMPS	6/12/08	6,785	174	0
36	OFFICE ADDITION	5/10/05	1,748	44	0
37	OFFICE REMODELING	4/04/06	1,921	49	0
38	PALLET JACK 2 1/2	9/17/04	364	0	0
40	CARGO TRAILER	3/15/01	4,200	0	0
41	SIGNS FOR CARGO TRAILER	4/14/03	600	0	0
42	FORKLIFT	6/02/03	6,000	0	0
43	LAND - LEASE INTEREST	4/01/01	62,951	629	0
44	LAWN MOWER	7/09/01	1,400	0	0
45	MOWER	7/14/04	1,654	0	0
46	PRINTER	1/12/01	260	0	0
47	DELL COMPUTER	3/05/04	1,186	0	0
48	PRINTER	3/19/04	300	0	0
49	COMPUTER AND EQUIP	5/26/05	3,684	0	0
50	COMPUTER & EQU	11/16/05	733	0	0
51	PALLET JACK	4/25/01	394	0	0
52	PLATFORM JACK	9/28/00	2,192	0	0
53	SNOWBLOWER	12/01/01	858	0	0
54	TRACTOR 6 BUSH HOG	7/11/03	4,300	0	0
57	1992 3/4 TON DODGE PICK-UP	12/14/06	5,000	0	0
59	LAPTOP COMPUTER	11/10/07	2,000	0	0
60	PROJECTOR	11/10/07	800	0	0
62	SNOW PLOW	2/28/08	2,592	0	0
63	JOHN DEER MOWER	4/24/08	8,600	0	0
64	2 4x8 SIGNS-REFLECTIVE	8/08/08	1,020	68	0
65	10" TABLESAW	12/09/08	2,999	0	0
66	DUST COLLECTOR	12/09/08	549	0	0
67	Improvements to Warehouse	2/06/09	16,905	434	0
68	woodshop improvements	3/20/09	15,862	407	0
69	LAMINATE FLOOR CHURCH	12/15/09	1,044	0	0
70	SUMP PUMP DRAIN	11/10/10	1,476	98	0
71	COUCH	4/28/10	471	0	0
72	TRAILER	4/07/10	400	0	0

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**Future Depreciation Report****FYE: 12/31/21**

FYE: 12/31/2020

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
73	ROUTER	6/11/10	323	0	0
74	WEED EATER	8/05/10	321	0	0
75	COUCH	4/28/10	792	0	0
76	DRIVEWAY	5/25/10	2,413	161	0
77	ROOF	3/23/10	16,305	418	0
78	FOUR ROOM	9/21/10	18,142	465	0
79	ELECTRICAL WORK	1/18/10	1,825	122	0
80	INSULATION	1/05/11	5,250	350	350
81	POWER DRILL	3/11/11	160	0	0
82	2004 CHEVY VAN	6/24/11	7,500	0	0
83	DUST VACUUM	10/18/11	699	0	0
84	AIR COMPRESSOR	11/15/11	360	0	0
85	TWO COMPUTER MONITORS	5/03/11	1,140	0	0
86	ONE COMPUTER	6/10/11	550	0	0
87	DIGITAL CAMERA	8/25/11	600	0	0
88	HP OFFICE PRINTER	12/01/11	240	0	0
89	SNOW JAX	2/10/11	3,742	249	249
90	20" PLANER	9/01/12	1,768	0	0
91	WAREHOUSE ADDITION	1/01/12	72,497	1,859	1,859
92	NEW LIGHTS	7/16/12	5,446	363	363
93	STOVE	11/26/13	400	0	0
94	MICROWAVE	6/10/13	250	0	0
95	DEHUMIDIFIER	6/18/13	231	0	0
96	SUMP PUMP	7/18/13	155	0	0
97	DESKTOP PRINTER	5/20/13	150	0	0
98	DESKTOP PRINTER	7/01/13	150	0	0
99	CONDENSER FOR FURNACE	6/03/13	5,932	395	0
100	PRINTER - OFFICE	9/12/13	2,995	0	0
101	COMPUTER AND MONITOR	10/29/13	520	0	0
102	FLOOR SCRUBBER	5/13/13	4,255	0	0
103	BOSE SPEAKERS	8/17/13	100	0	0
104	WAREHOUSE ADDITION	1/01/18	145,579	3,733	0
105	REFRIGERATOR FOR DORM	8/20/15	800	115	0
106	ROUTER VOIP OPTIMIZED	8/24/15	115	0	0
107	WAREHOUSE	1/01/18	36,177	927	0
109	TV & Mount	4/05/16	473	0	0
110	Furnace	5/24/16	4,900	700	0
111	Air Compressor	7/14/16	479	0	0
112	Electric Heat/AC for Chapel	8/15/16	623	0	0
113	Lawnmower	9/06/16	254	0	0
114	TV for Dorm	10/25/16	378	0	0
115	4' Hydrant for RV Park	10/25/16	294	49	0
116	4 computers	11/15/16	1,600	0	0
117	4 hydrants	11/29/16	252	46	0
118	Backup system	11/29/16	649	0	0
119	Router	11/29/16	400	0	0
120	Hard Drive	11/30/16	174	0	0
121	Deck	4/14/16	887	44	0
122	Roof	12/23/16	16,325	544	0
124	A/C UNIT - OFFICE	10/20/17	10,334	689	0
125	NEW ROOF - DUPLEX	11/09/17	7,594	194	0
126	2 SMITH SOFAS	11/24/17	574	82	0
127	2 SMITH RECLINERS	11/24/17	510	73	0
128	2014 BOX TRUCK	1/04/17	40,500	8,100	0
129	SERVER	1/18/17	1,197	239	0
130	ROLING TOOL BOX	1/25/17	160	32	0
131	2 COMPUTERS	3/14/17	1,374	275	0
132	48 X 27 PALLET TRUCK	6/23/17	319	45	0
133	48 X 21 PALLET TRUCK	6/23/17	299	43	0
134	NEW FENCE	7/10/17	1,370	91	0
135	20 PADDED FOLDING CHAIRS	7/19/17	520	74	0
136	TOYOTA FORKLIFT	8/16/17	19,945	2,849	0
137	USED PALLET RACKING	9/29/17	2,496	356	0
138	2018 BRAVO TRAILER	10/06/17	3,155	631	0
139	2 VIKING SEWING MACHINES	11/14/17	800	114	0
140	STEEL BANDER & CART	12/06/17	512	73	0
141	2 NEW HYDRANTS	11/28/17	5,378	768	0
142	3 HEATERS	1/05/17	600	86	0
143	MMDC	1/01/18	54,474	1,397	0
144	SECURITY SYSTEM	1/16/18	937	94	0
145	2 HARD DRIVES	1/02/18	300	60	0

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**Future Depreciation Report****FYE: 12/31/21**

FYE: 12/31/2020

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
146	50" LED TV	2/06/18	383	54	0
147	SECURITY SYSTEM EQUIP	2/07/18	150	15	0
148	BARCODE SCANNER	2/20/18	111	22	0
149	POWER EDGE SERVER	3/22/18	5,050	1,010	0
150	WI FI RANGE EXTENDER	5/21/18	195	39	0
151	2018 FORD F250	5/23/18	47,618	9,523	0
152	18 VOLT DRILL	5/29/18	149	21	0
153	10 LAPTOPS	5/29/18	1,000	200	0
154	TV WORKROOM	5/31/18	428	61	0
155	STANDUP DESK	8/30/18	130	19	0
156	TOOLS/DEHUMIDIFIER	8/31/18	366	53	0
157	HAMMER DRILL	9/30/18	126	18	0
158	HUSKY MOUNT SHANK & PRO SERIES W/I	1/15/19	337	48	0
159	30" ELECTRIC RANGE FOR STAFF HOUSE	2/15/19	610	87	0
160	STAFF HOUSE FURNITURE	3/06/19	698	100	0
161	5 6FT TABLES FOR DORM	3/06/19	200	29	0
162	RECLINER FOR STAFF HOUSE	3/07/19	329	47	0
163	FURNITURE FOR DORM	4/11/19	2,740	391	0
164	STANDING DESK	4/18/19	201	40	0
165	2008 ROCKWOOD TRAVEL TRAILER MODI	5/13/19	7,600	1,520	0
166	AIRLIFT 36" HEIGHT ADJUSTABLE DESK	6/10/19	160	32	0
167	REPLACEMENT ENGINE FOR BOX TRUCK	6/13/19	30,216	6,043	0
168	TOYOTA FORKLIFT MODEL 8FGCU15	6/17/19	20,870	2,982	0
169	STAR TAG 24FT TANDEM AXLE	6/24/19	10,000	2,000	0
170	HVAC FOR WEST SIDE OF DORM	8/05/19	6,200	620	0
171	WASHING MACHINE FOR DUPLEX	8/10/19	397	57	0
172	DRYER FOR DUPLEX	8/10/19	397	57	0
173	FLOORING FOR STAFF HOUSE GUEST BAT	9/01/19	502	50	0
174	DESKTOP COMPUTER	9/04/19	235	47	0
175	BIKE REPAIR STAND	9/13/19	575	82	0
176	BIKE REPAIR STAND	9/13/19	575	82	0
177	BIKE REPAIR STAND	9/13/19	575	82	0
178	PRESENTATION PROJECTOR	10/01/19	359	51	0
179	BED LINER FOR FORD PICKUP	10/21/19	500	100	0
180	USED TRAILER	10/21/19	800	160	0
181	2019 WELLS CARGO 7X16FT TRAILER	11/11/19	4,650	930	0
182	WHIRLPOOL REFRIGERATOR FOR EAST D	11/14/19	629	90	0
183	2017 FORD F250 PICKUP	11/23/19	45,000	9,000	0
184	HUSKY 3.5K POWER JACK	11/26/19	262	37	0
185	2020 BRAVO TRAILER - 8.5X16FT	11/26/19	6,950	1,390	0
186	SEMI TRAILER - STORAGE	12/03/19	4,000	800	0
187	TRAX SHEET BOARD CUTTING MACHINE	12/30/19	498	71	0
189	SEMI TRAILER - STORAGE	1/08/20	4,000	800	0
190	48" X 27" ULINE PALLET TRUCK SCALE	1/15/20	1,753	251	0
191	WHITE FOREST RIVER 7' X 16' TRAILER	1/22/20	2,700	540	0
192	2020 BRAVO TRAILER W/ POWER JACK	1/24/20	6,562	1,313	0
193	SEMI TRAILER - STORAGE	3/24/20	4,000	800	0
194	LIFT GATE FOR 2020 INTERNATIONAL BO	4/24/20	7,955	1,591	0
195	FENCING FOR STAFF HOUSE	4/27/20	1,137	114	0
196	2020 BRAVO TRAILER	5/01/20	3,700	740	0
197	METAL ROOF FOR CHAPEL	8/05/20	2,560	85	0
198	3.5 TON TEMPSTAR HEAT PUMP	5/06/20	5,780	385	0
199	INSULATION	5/12/20	2,333	60	0
200	GARAGE	7/15/20	6,310	162	0
201	2020 DELTA TANDEM DUAL GOOSENECK	8/06/20	13,500	2,700	0
202	30 X 35' STEELMASTER BUILDING	8/11/20	3,825	0	0
203	48' SEMI TRAILER	8/21/20	2,500	500	0
204	LIGHT FIXTURES FOR WAREHOUSE SHOP	9/09/20	2,551	170	0
205	MACBOOK PRO 13"	11/16/20	1,519	304	0
206	2012 INTERNATIONAL SEMI TRUCK & 2 TI	11/18/20	15,000	3,000	0
207	2012 CONTINENTAL 16' UTILITY TRAILER	11/23/20	3,500	700	0
208	MX-5070N SHARP COPIER	11/30/20	4,075	815	0
209	3RD WAREHOUSE	5/04/20	69,404	1,780	0
210	OFFICE ADDITION	12/30/20	74,109	1,900	0
<b>Total Other Depreciation</b>			<u>2,593,794</u>	<u>122,985</u>	<u>2,821</u>
<b>Total ACRS and Other Depreciation</b>			<u>2,593,794</u>	<u>122,985</u>	<u>2,821</u>

**Future Depreciation Report** **FYE: 12/31/21**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
	<b>Grand Totals</b>		<u>2,593,794</u>	<u>122,985</u>	<u>2,821</u>

Asset	Description	Date In Service	Cost	IL
<b>Other Depreciation:</b>				
1	PICNIC SHELTER	12/07/05	7,684	0
2	PICNIC SHELTER (ELECTICAL WORK)	6/08/06	1,033	28
3	RV PARK	10/01/01	14,583	547
4	WAREHOUSE IMPROVEMENTS	8/11/03	1,532	77
5	GIFT STORE	10/01/01	84,000	2,153
6	GIFT STORE IMPROV	10/01/02	3,360	86
7	GIFT STORE BATH IMPROV	3/15/03	2,338	60
8	WAREHOUSE ADD (material & labor)	6/25/05	27,311	700
9	WAREHOUSE BUILDING	1/01/04	290,614	7,451
10	WAREHOUSE BUILDING DOORS	5/01/04	2,269	0
11	WAREHOUSE INSULATION	2/25/04	5,917	152
12	WAREHOUSE ADDITIONS	7/25/05	151	4
13	WAREHOUSE ADDITION 07	11/27/07	143,640	3,683
14	WAREHOUSE ADD VARIOUS	1/01/08	25,642	658
15	PROJECT SHCOOL ROOM	1/02/02	18,720	480
16	LANDSCAPING	5/13/03	250	0
17	SIDEWALKS, CURBS, DRIVEWAY	5/14/03	4,462	0
18	DORMITORY BUILDING	7/01/01	262,000	6,718
19	DORMINTORY UTILITY BUILDING	7/01/01	18,000	462
20	DORM FURNITURE	7/01/01	2,197	0
21	DORM- GENERATOR	2/28/08	3,285	84
22	DUPLEX	12/31/04	135,559	3,476
23	APPLIANCES-DUPLEX	6/30/05	2,661	0
24	FURNITURE- DUPLEX	6/30/05	4,924	0
25	DUPLEX IMPROVEMENTS	6/30/05	27,818	713
26	DUPLEX DRIVEWAY	9/01/06	482	21
27	STAFF HOUSE	12/01/02	84,000	2,154
28	HOUSE IMPROVEMENTS	10/23/03	8,723	223
29	HOUSE LANDSCAPING	5/19/03	315	0
30	HOUSE IMPROVEMENTS	8/01/04	1,978	99
31	BED	1/13/05	499	0
32	DISTRIBUTION CENTER	3/01/00	280,081	7,181
33	PALLET RACKS	3/01/00	2,000	0
34	NEW FOYER	11/04/06	4,056	104
35	2 SEWER PUMPS	6/12/08	6,785	174
36	OFFICE ADDITION	5/10/05	1,748	45
37	OFFICE REMODELING	4/04/06	1,921	50
38	PALLET JACK 2 1/2	9/17/04	364	0
40	CARGO TRAILER	3/15/01	4,200	0
41	SIGNS FOR CARGO TRAILER	4/14/03	600	0
42	FORKLIFT	6/02/03	6,000	0
43	LAND - LEASE INTEREST	4/01/01	62,951	629
44	LAWN MOWER	7/09/01	1,400	0
45	MOWER	7/14/04	1,654	0
46	PRINTER	1/12/01	260	0
47	DELL COMPUTER	3/05/04	1,186	0
48	PRINTER	3/19/04	300	0
49	COMPUTER AND EQUIP	5/26/05	3,684	0
50	COMPUTER & EQU	11/16/05	733	0
51	PALLET JACK	4/25/01	394	0
52	PLATFORM JACK	9/28/00	2,192	0
53	SNOWBLOWER	12/01/01	858	0
54	TRACTOR 6 BUSH HOG	7/11/03	4,300	0
57	1992 3/4 TON DODGE PICK-UP	12/14/06	5,000	0
59	LAPTOP COMPUTER	11/10/07	2,000	0
60	PROJECTOR	11/10/07	800	0
62	SNOW PLOW	2/28/08	2,592	0
63	JOHN DEER MOWER	4/24/08	8,600	0
64	2 4x8 SIGNS-REFLECTIVE	8/08/08	1,020	68
65	10" TABLESAW	12/09/08	2,999	0
66	DUST COLLECTOR	12/09/08	549	0
67	Improvements to Warehouse	2/06/09	16,905	434
68	woodshop improvements	3/20/09	15,862	407
69	LAMINATE FLOOR CHURCH	12/15/09	1,044	0
70	SUMP PUMP DRAIN	11/10/10	1,476	98
71	COUCH	4/28/10	471	0
72	TRAILER	4/07/10	400	0

37-1391589

**IL Future Depreciation Report****FYE: 12/31/21**

FYE: 12/31/2020

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	IL
73	ROUTER	6/11/10	323	0
74	WEED EATER	8/05/10	321	0
75	COUCH	4/28/10	792	0
76	DRIVEWAY	5/25/10	2,413	161
77	ROOF	3/23/10	16,305	418
78	FOUR ROOM	9/21/10	18,142	465
79	ELECTRICAL WORK	1/18/10	1,825	122
80	INSULATION	1/05/11	5,250	350
81	POWER DRILL	3/11/11	160	0
82	2004 CHEVY VAN	6/24/11	7,500	0
83	DUST VACUUM	10/18/11	699	0
84	AIR COMPRESSOR	11/15/11	360	0
85	TWO COMPUTER MONITORS	5/03/11	1,140	0
86	ONE COMPUTER	6/10/11	550	0
87	DIGITAL CAMERA	8/25/11	600	0
88	HP OFFICE PRINTER	12/01/11	240	0
89	SNOW JAX	2/10/11	3,742	249
90	20" PLANER	9/01/12	1,768	0
91	WAREHOUSE ADDITION	1/01/12	72,497	1,859
92	NEW LIGHTS	7/16/12	5,446	363
93	STOVE	11/26/13	400	0
94	MICROWAVE	6/10/13	250	0
95	DEHUMIDIFIER	6/18/13	231	0
96	SUMP PUMP	7/18/13	155	0
97	DESKTOP PRINTER	5/20/13	150	0
98	DESKTOP PRINTER	7/01/13	150	0
99	CONDENSER FOR FURNACE	6/03/13	5,932	395
100	PRINTER - OFFICE	9/12/13	2,995	0
101	COMPUTER AND MONITOR	10/29/13	520	0
102	FLOOR SCRUBBER	5/13/13	4,255	0
103	BOSE SPEAKERS	8/17/13	100	0
104	WAREHOUSE ADDITION	1/01/18	14,579	374
105	REFRIGERATOR FOR DORM	8/20/15	800	115
106	ROUTER VOIP OPTIMIZED	8/24/15	115	0
107	WAREHOUSE	1/01/18	36,177	927
109	TV & Mount	4/05/16	473	0
110	Furnace	5/24/16	4,900	700
111	Air Compressor	7/14/16	479	0
112	Electric Heat/AC for Chapel	8/15/16	623	0
113	Lawnmower	9/06/16	254	0
114	TV for Dorm	10/25/16	378	0
115	4' Hydrant for RV Park	10/25/16	294	49
116	4 computers	11/15/16	1,600	0
117	4 hydrants	11/29/16	252	46
118	Backup system	11/29/16	649	0
119	Router	11/29/16	400	0
120	Hard Drive	11/30/16	174	0
121	Deck	4/14/16	887	44
122	Roof	12/23/16	16,325	544
124	A/C UNIT - OFFICE	10/20/17	10,334	689
125	NEW ROOF - DUPLEX	11/09/17	7,594	194
126	2 SMITH SOFAS	11/24/17	574	82
127	2 SMITH RECLINERS	11/24/17	510	73
128	2014 BOX TRUCK	1/04/17	40,500	8,100
129	SERVER	1/18/17	1,197	239
130	ROLING TOOL BOX	1/25/17	160	32
131	2 COMPUTERS	3/14/17	1,374	275
132	48 X 27 PALLET TRUCK	6/23/17	319	45
133	48 X 21 PALLET TRUCK	6/23/17	299	43
134	NEW FENCE	7/10/17	1,370	91
135	20 PADDED FOLDING CHAIRS	7/19/17	520	74
136	TOYOTA FORKLIFT	8/16/17	19,945	2,849
137	USED PALLET RACKING	9/29/17	2,496	356
138	2018 BRAVO TRAILER	10/06/17	3,155	631
139	2 VIKING SEWING MACHINES	11/14/17	800	114
140	STEEL BANDER & CART	12/06/17	512	73
141	2 NEW HYDRANTS	11/28/17	5,378	768
142	3 HEATERS	1/05/17	600	86
143	MMDC	1/01/18	54,474	1,397
144	SECURITY SYSTEM	1/16/18	937	94
145	2 HARD DRIVES	1/02/18	300	60



37-1391589

**IL Future Depreciation Report****FYE: 12/31/21**

FYE: 12/31/2020

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	IL
146	50" LED TV	2/06/18	383	54
147	SECURITY SYSTEM EQUIP	2/07/18	150	15
148	BARCODE SCANNER	2/20/18	111	22
149	POWER EDGE SERVER	3/22/18	5,050	1,010
150	WI FI RANGE EXTENDER	5/21/18	195	39
151	2018 FORD F250	5/23/18	47,618	9,523
152	18 VOLT DRILL	5/29/18	149	21
153	10 LAPTOPS	5/29/18	1,000	200
154	TV WORKROOM	5/31/18	428	61
155	STANDUP DESK	8/30/18	130	19
156	TOOLS/DEHUMIDIFIER	8/31/18	366	53
157	HAMMER DRILL	9/30/18	126	18
158	HUSKY MOUNT SHANK & PRO SERIES W/I	1/15/19	337	48
159	30" ELECTRIC RANGE FOR STAFF HOUSE	2/15/19	610	87
160	STAFF HOUSE FURNITURE	3/06/19	698	100
161	5 6FT TABLES FOR DORM	3/06/19	200	29
162	RECLINER FOR STAFF HOUSE	3/07/19	329	47
163	FURNITURE FOR DORM	4/11/19	2,740	391
164	STANDING DESK	4/18/19	201	40
165	2008 ROCKWOOD TRAVEL TRAILER MODI	5/13/19	7,600	1,520
166	AIRLIFT 36" HEIGHT ADJUSTABLE DESK	6/10/19	160	32
167	REPLACEMENT ENGINE FOR BOX TRUCK	6/13/19	30,216	6,043
168	TOYOTA FORKLIFT MODEL 8FGCU15	6/17/19	20,870	2,982
169	STAR TAG 24FT TANDEM AXLE	6/24/19	10,000	2,000
170	HVAC FOR WEST SIDE OF DORM	8/05/19	6,200	620
171	WASHING MACHINE FOR DUPLEX	8/10/19	397	57
172	DRYER FOR DUPLEX	8/10/19	397	57
173	FLOORING FOR STAFF HOUSE GUEST BAT	9/01/19	502	50
174	DESKTOP COMPUTER	9/04/19	235	47
175	BIKE REPAIR STAND	9/13/19	575	82
176	BIKE REPAIR STAND	9/13/19	575	82
177	BIKE REPAIR STAND	9/13/19	575	82
178	PRESENTATION PROJECTOR	10/01/19	359	51
179	BED LINER FOR FORD PICKUP	10/21/19	500	100
180	USED TRAILER	10/21/19	800	160
181	2019 WELLS CARGO 7X16FT TRAILER	11/11/19	4,650	930
182	WHIRLPOOL REFRIGERATOR FOR EAST D	11/14/19	629	90
183	2017 FORD F250 PICKUP	11/23/19	45,000	9,000
184	HUSKY 3.5K POWER JACK	11/26/19	262	37
185	2020 BRAVO TRAILER - 8.5X16FT	11/26/19	6,950	1,390
186	SEMI TRAILER - STORAGE	12/03/19	4,000	800
187	TRAX SHEET BOARD CUTTING MACHINE	12/30/19	498	71
189	SEMI TRAILER - STORAGE	1/08/20	4,000	800
190	48" X 27" ULINE PALLET TRUCK SCALE	1/15/20	1,753	251
191	WHITE FOREST RIVER 7' X 16' TRAILER	1/22/20	2,700	540
192	2020 BRAVO TRAILER W/ POWER JACK	1/24/20	6,562	1,313
193	SEMI TRAILER - STORAGE	3/24/20	4,000	800
194	LIFT GATE FOR 2020 INTERNATIONAL BO	4/24/20	7,955	1,591
195	FENCING FOR STAFF HOUSE	4/27/20	1,137	114
196	2020 BRAVO TRAILER	5/01/20	3,700	740
197	METAL ROOF FOR CHAPEL	8/05/20	2,560	85
198	3.5 TON TEMPSTAR HEAT PUMP	5/06/20	5,780	385
199	INSULATION	5/12/20	2,333	60
200	GARAGE	7/15/20	6,310	162
201	2020 DELTA TANDEM DUAL GOOSENECK	8/06/20	13,500	2,700
202	30 X 35' STEELMASTER BUILDING	8/11/20	3,825	0
203	48' SEMI TRAILER	8/21/20	2,500	500
204	LIGHT FIXTURES FOR WAREHOUSE SHOP	9/09/20	2,551	170
205	MACBOOK PRO 13"	11/16/20	1,519	304
206	2012 INTERNATIONAL SEMI TRUCK & 2 TI	11/18/20	15,000	3,000
207	2012 CONTINENTAL 16' UTILITY TRAILER	11/23/20	3,500	700
208	MX-5070N SHARP COPIER	11/30/20	4,075	815
209	3RD WAREHOUSE	5/04/20	69,404	1,780
210	OFFICE ADDITION	12/30/20	74,109	1,900
	<b>Total Other Depreciation</b>		<u>2,462,794</u>	<u>119,535</u>
	<b>Total ACRS and Other Depreciation</b>		<u><u>2,462,794</u></u>	<u><u>119,535</u></u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>IL</u>
	<b>Grand Totals</b>		<u>2,462,794</u>	<u>119,535</u>

Form <b>990</b>	<b>Two Year Comparison Report</b>	<b>2019 &amp; 2020</b>
For calendar year 2020, or tax year beginning _____, ending _____		

Name

Taxpayer Identification Number

**MIDWEST MISSION DISTRIBUTION CENTER****37-1391589**

		2019	2020	Differences
<b>R e v e n u e</b>	1. Contributions, gifts, grants .....	4,922,109	13,060,471	8,138,362
	2. Membership dues and assessments .....			
	3. Government contributions and grants .....			
	4. Program service revenue .....			
	5. Investment income .....	35,271	40,819	5,548
	6. Proceeds from tax exempt bonds .....			
	7. Net gain or (loss) from sale of assets other than inventory .....			
	8. Net income or (loss) from fundraising events .....			
	9. Net income or (loss) from gaming .....			
	10. Net gain or (loss) on sales of inventory .....			
	11. Other revenue .....			
	<b>12. Total revenue.</b> Add lines 1 through 11	<b>4,957,380</b>	<b>13,101,290</b>	<b>8,143,910</b>
<b>E x p e n s e s</b>	13. Grants and similar amounts paid .....			
	14. Benefits paid to or for members .....			
	15. Compensation of officers, directors, trustees, etc. ....	54,129	56,200	2,071
	16. Salaries, other compensation, and employee benefits .....	233,691	257,603	23,912
	17. Professional fundraising fees .....			
	18. Other professional fees .....	5,150	5,450	300
	19. Occupancy, rent, utilities, and maintenance .....	62,227	55,746	-6,481
	20. Depreciation and Depletion .....	89,585	113,463	23,878
	21. Other expenses .....	3,357,184	10,357,048	6,999,864
	<b>22. Total expenses.</b> Add lines 13 through 21	<b>3,801,966</b>	<b>10,845,510</b>	<b>7,043,544</b>
	<b>23. Excess or (Deficit).</b> Subtract line 22 from line 12	<b>1,155,414</b>	<b>2,255,780</b>	<b>1,100,366</b>
<b>O t h e r I n f o r m a t i o n</b>	<b>24. Total exempt revenue</b> .....	<b>4,957,380</b>	<b>13,101,290</b>	<b>8,143,910</b>
	25. Total unrelated revenue .....			
	26. Total excludable revenue .....	35,271	40,819	5,548
	27. Total assets .....	4,632,094	6,965,651	2,333,557
	28. Total liabilities .....	25,847	66,745	40,898
	29. Retained earnings .....	4,606,247	6,898,906	2,292,659
	30. Number of voting members of governing body .....	17	14	
	31. Number of independent voting members of governing body .....	17	14	
	32. Number of employees .....	12	11	
	33. Number of volunteers .....	1712	567	

Form <b>990</b>	<b>Tax Return History</b>	<b>2020</b>
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Name <b>MIDWEST MISSION DISTRIBUTION CENTER</b>	Employer Identification Number <b>37-1391589</b>
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	2016	2017	2018	2019	2020	2021
Contributions, gifts, grants .....	729,981	1,063,433	933,445	4,922,109	13,060,471	
Membership dues .....						
Program service revenue .....						
Capital gain or loss .....			2,100			
Investment income .....	192	34,975	3,975	35,271	40,819	
Fundraising revenue (income/loss) .....						
Gaming revenue (income/loss) .....						
Other revenue .....						
<b>Total revenue</b> .....	<b>730,173</b>	<b>1,098,408</b>	<b>939,520</b>	<b>4,957,380</b>	<b>13,101,290</b>	
Grants and similar amounts paid .....						
Benefits paid to or for members .....						
Compensation of officers, etc. ....	49,790			54,129	56,200	
Other compensation .....	147,665	214,707	255,303	233,691	257,603	
Professional fees .....	4,895	7,054	5,150	5,150	5,450	
Occupancy costs .....	49,297	52,118	58,347	62,227	55,746	
Depreciation and depletion .....	54,904	53,488	78,044	89,585	113,463	
Other expenses .....	396,176	323,590	220,851	3,357,184	10,357,048	
<b>Total expenses</b> .....	<b>702,727</b>	<b>650,957</b>	<b>617,695</b>	<b>3,801,966</b>	<b>10,845,510</b>	
<b>Excess or (Deficit)</b> .....	<b>27,446</b>	<b>447,451</b>	<b>321,825</b>	<b>1,155,414</b>	<b>2,255,780</b>	
<b>Total exempt revenue</b> .....	<b>730,173</b>	<b>1,098,408</b>	<b>939,520</b>	<b>4,957,380</b>	<b>13,101,290</b>	
Total unrelated revenue .....						
Total excludable revenue .....	192	34,975	6,075	35,271	40,819	
Total Assets .....	2,557,466	3,077,718	3,365,302	4,632,094	6,965,651	
Total Liabilities .....	7,016	24,485	25,163	25,847	66,745	
Net Fund Balances .....	2,550,450	3,053,233	3,340,139	4,606,247	6,898,906	

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**Federal Statements**

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**Form 990, Part IX, Line 24e - All Other Expenses**

Description	Total Expenses	Program Service	Management & General	Fund Raising
TOOLS/MACHINERY	\$ 13,066	\$ 13,066	\$	\$
SUPPLIES	8,052	6,998	1,054	
EQUIPMENT RENTAL	5,662	5,662		
SPECIAL MEALS/FOOD	4,304	4,304		
EQUIPMENT REPAIR	4,095	3,276	819	
PROFESSIONAL FEES	4,000		4,000	
COMPUTER EXPENSE	3,535	2,828	707	
TRAINING	3,032	3,032		
SPECIAL EVENTS	2,853	2,853		
DISASTER SUPPLIES	2,540	2,540		
CREDIT CARD FEES	2,162		2,162	
BANK FEES	2,012		2,012	
ONE STOP CHRISTMAS SHOP	1,741			1,741
TELEPHONE	1,726	1,036	345	345
LICENSES & PERMITS	1,688	1,688		
INTERNET	1,644	1,644		
TV NETWORK	1,303	1,043	130	130
SEWING GROUP	748	748		
COMMUNITY PROJECTS	536	536		
OTHER REPAIRS	350	350		
WEBSITE COSTS	59	47	6	
MISCELLANEOUS	-277		-277	6
<b>TOTAL</b>	<b>\$ 64,831</b>	<b>\$ 51,651</b>	<b>\$ 10,958</b>	<b>\$ 2,222</b>

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**Federal Statements**

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**Schedule A, Part III, Line 1(e)**

<u>Description</u>	<u>Amount</u>
	\$ 12,754,621
FIRST UMC- KINMUNDY IL CASH CONTRIBUTION	5,000
UNITED METHODIST FOUNDATION CASH CONTRIBUTION	6,000
CAROL KESSLER CASH CONTRIBUTION	5,000
EAST OHIO ANNUAL CONFERENCE CASH CONTRIBUTION	8,453
IGRC-SPRINGFIELD IL CASH CONTRIBUTION	15,000
IOWA INGATHERING CASH CONTRIBUTION	56,072
GRAND PRAIRIE CEMETARY ASSOCIATION CASH CONTRIBUTION	5,000
KAREN HOELZER CASH CONTRIBUTION	8,085
MARK VANDERMYDE CASH CONTRIBUTION	5,000
UMC - NEW LENOX CASH CONTRIBUTION	10,148
EDDIE CARPENTER CASH CONTRIBUTION	10,000
COMMUNITY CHILD CARE CONNECTION CASH CONTRIBUTION	26,021
HEALTH CARE SERVICE CORP CASH CONTRIBUTION	5,000
UMC - TROY, IL CASH CONTRIBUTION	10,000
PHYLLIS MENZER ESTATE CASH CONTRIBUTION	14,850
ELLEN SMITH ESTATE CASH CONTRIBUTION	12,094
CLARK FAMILY FOUNDATION CASH CONTRIBUTION	96,127
DARRELL RADER CASH CONTRIBUTION	8,000

**Federal Statements****Schedule A, Part III, Line 1(e) (continued)**

Description	Amount
TOTAL	\$ <u>13,060,471</u>

**Schedule A, Part III, Line 2(e)**

Description	Amount
FUNDRAISING	\$ _____
TOTAL	\$ <u>0</u>

**Schedule A, Part III, Line 10a(e)**

Description	Amount
	\$ <u>40,819</u>
TOTAL	\$ <u>40,819</u>