Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public

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.

Inter	nal Revenu	e Service	► Information about Form 990 and its instructions is	at www.irs.go	ov/form990).	Inspection
Α	For the	2016 caler	ndar year, or tax year beginning January 1 , 2016,	and ending	Decem	ber 31	, 20 16
В	Check if a	pplicable	C Name of organization Warrior Ministries			D Employe	er identification number
	Address o		Doing business as Warriors Center			30-0057701	
$\bar{\sqcap}$	Name cha	·	Number and street (or P O box if mail is not delivered to street address)	Room/suite		E Telephon	
$\overline{\Box}$	Initial retu	~	642 Semmes St.			901-405-1298	
\exists		vterminated	City or town, state or province, country, and ZIP or foreign postal code			301-403-1230	
\exists			1	G Gross re	cointe \$ 1.054.630		
님	Amended		Memphis, TN 38111				
Ш	Applicatio		F Name and address of principal officer David Vincent				subordinates? Yes No
			642 Semmes St. Memphis, TN 38111		4 ''		included? Yes No
<u> </u>	Tax-exem		✓ 501(c)(3)	<u> </u>	-{		list (see instructions)
J	Website:		v.warriorscenter.org		H(c) Group		
				ear of formation	2002	M State	of legal domicile TN
P	art I	Summa	ary				
	1	Briefly de	scribe the organization's mission or most significant activities	s Warrior N	/linistries is	dedicate	d to assisting men and
ce	l <u>s</u>	women in	overcoming issues related to homelessness and/or substance a	buse. Motiv	ated by the	love of G	od, we meet needs
ПаГ] ,	such as sl	helter, clothing, rehabilitation, education and job training.				
ērī	2	Check thi	s box ▶ ☐ if the organization discontinued its operations or	diseased of	mbrethan	25% of	ts net assets
9	3	Number o	of voting members of the governing body (Part VI, line 1a). 🛭	- II-UL		ا قال ج	10
9	4 1	Number o	of independent voting members of the governing body (# 🖚	/I, line 1b).		\$ 4	9
ies	5	Total num	nber of individuals employed in calendar year 2016 (Partival)	ne NOV 2	³ 2017	P 5	14
₹	1		nber of volunteers (estimate if necessary)			6 30	25
Activities & Governance	1		elated business revenue from Part VIII, column (C), line 12	A CONT	1 1 1	Jarta	
•			ated business taxable income from Form 990-T, line 34	UUL	N. U	7b	
		vot am on	ated basiness taxable inseries item 1 of 1 of 1, into 64		Prior Ye	~ ***	Current Year
	8	Contribut	ions and grants (Part VIII, line 1h)	-			
ne ne	1		ions and grants (Part VIII, line 1h)	· · · ⊢		239,393	209,637
Revenue	1	-	service revenue (Part VIII, line 2g)	· ·		732,871	844,992
Re.	1		nt income (Part VIII, column (A), lines 3, 4, and 7d)	. ⊢			
			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	. ·. <u>.</u> . ⊢	 		
			nue-add lines 8 through 11 (must equal Part VIII, column (A),	line 12)		972,264	1,054,629
			nd similar amounts paid (Part IX, column (A), lines 1-3)				
	14	Benefits p	oald to or for members (Part IX, column (A), line 4)				
S	15	Salaries, c	other compensation, employee benefits (Part IX, column (A), line	s 5–10)		421,576	339,521
Expenses	16a	Professio	nal fundraising fees (Part IX, column (A), line 11e)				
g	Ъ.	Total fund	draising expenses (Part IX, column (D), line 25) ▶	-		,	314 77 77 77 78 78 78 78 78 78 78 78 78 78
û	17	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24e)			550,097	686,385
	18	Total exp	enses. Add lines 13-17 (must equal Part IX, column (A), line 2	25)		971,673	1,025,906
	19	Revenue	less expenses. Subtract line 18 from line 12			591	28,723
o o	+			Be	ginning of Cu		End of Year
ets (20	Total ass	ets (Part X, line 16)			710,846	722,681
Net Assets	21		ilities (Part X, line 26)	· · ·	 .	272,127	265,708
Set	22		s or fund balances. Subtract line 21 from line 20	· · ⊢		438,719	
	art II		ure Block	· · · · · · · · · · · · · · · · · · · 		430,713	456,973
_							
			ry. Geclare that I have examined this return, including accompanying schedu te Declaration of preparex (other than officer) is based on all information of w				ny knowledge and belief, it is
			tout I love and			1/ /	11/ 1-
e:.		4	ature of officer			11-1	7-1/
Sig	-	y Signa	DAVID VINCENT. Executive	Die	the Dar	ie D	
пе	ere			PIRC	C101	<u> </u>	
			or print name and title	1		<u></u>	Torris .
Pa	aid	Print/Ty	pe preparer's name Preparer's signature	Date	•	Check [if PTIN
	epare	r				self-emp	oloyed
	se Only	1	ame ▶		Firm	n's EIN ▶	
		Firm's a	ddress ▶		Pho	ne no	
Ma	y the IR	S discuss	s this return with the preparer shown above? (see instructions	s)			Yes No
Fo	r Paperw	ork Redu	ction Act Notice, see the separate instructions.	Cat No	11282Y		Form 990 (2016)

Form	aan	(2016)	

Part I	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Warrior Ministries is dedicated to assisting men and women in overcoming issues related to homelessness and/or substance abuse.
	Motivated by the love of God, we meet needs such as shelter, clothing, rehabilitation, education and job training.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	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?
	If "Yes," describe these changes on Schedule O. 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 \$ including grants of \$) (Revenue \$)
	Recovery & Rehabilitation Program - Our objective is to help men and women that are homeless and addicted by providing safe
	housing and spiritual support and help them become productive society members. In 2016 we housed 220 men and women
	that were homeless. The average stay is 90 days. The average counseling and group hours per individual was 160 hours of
	rehabilitation treatment. We served 95,256 meals during the year. We provided healthcare for the homeless through partnerships
	75 men and 35 women. We provided dental care through community dental for both men and women. We provided clothing for 150
	men and 25 women. We trained 160 men and 50 women with work therapy helping them learn to live a balanced life, learn to work
	well with others in the workforce, and build trade skills for the future. 10 men were helped to find employment after they graduated.
	10 men started trade school during the year. 10 men and 3 women graduated the program. Our program provides a stage for
	community outreach work to help the homeless. We did 82 homeless outreaches and 80 community service outreach events to
	nursing homes, inner city food pantry, home improvement projects for needy individuals and families, and downtown Memphis
	homeless camps and bridges.
4b	(Code) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
70	/ (nevenue \$)

4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶

	0 (2016)		ı	Page 3
Rart	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		✓	├
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	-	1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		√
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	I
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	,	1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X	11e	1	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	<u> </u>	1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓_
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		√
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		✓
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			✓
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	18		<u> </u>

20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedulo H. b If "Yes" to line 28a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5.00.00 of grants or other assistance to any domestic organization or common or common the common of common or commo	Part I	V Checklist of Required Schedules (continued)	_		
b II "Vest" to line 28a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5.00 of grants or other assistance to any domestic organization or other assistance to any domestic organization or other assistance to any domestic organization or other assistance to or for domestic individuals on Part IX, column (A), line 21 If "Yes," complete Schedule I, Part II and III Did the organization may senser "Yes" to Part IVI, Section A, line 3.4, or 5 shout compensation of the organization or senser "Yes" to Part IVI, Section A, line 3.4, or 5 shout compensation of the organization or senser "Yes" to Part IVI, Section A, line 3.4, or 5 shout compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b strough 24d and complete Schedule II. Part IV." Spin faine 24b and complete Schedule Schedul				Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 21 II "Yes," complete Schedule I, Parts I and II . 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 21 II "Yes," complete Schedule II Parts I and III . 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 245 through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule K. If "No," yo to line 25a through 24d and complete Schedule K. If "No," yo to line 25a through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule K. If "No," complete Schedule L. Part II be 1s the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule L. Part II be 1s the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule L. Part II be 1s the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year and that the transaction has not been reported on any of the organization spons on any outstanding and access benefit transaction with a disqualited person in a protein a business of solid the organization provide a grant or other assistance to an officer, director, trustee, or leve t	20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		√
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		✓
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 ff "Yes," complete Schedule I, Parts I and III . 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule K. If "No," go to line 25a through 24d and complete Schedule K. If "No," go to line 25a to defease any tax-exempt bonds? 4 Did the organization mantain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 4 Did the organization and a star secretary to the organization and that the transaction with a disqualitied person and might be year? 5 Section 901(3), 801(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualitied person and many the year section with a disqualitied person in a prior year, and that the transaction has not been reported on any of the organization's port Forms 990 or 995-E22? If "Yes," complete Schedule L, Part II "es," com	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III or organization answer "Yes" to Part IVI, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J via Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II "No", go to him 25a		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
23 I dit the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24 I Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a 25a Did the organization murest any proceeds of tax-exempt bonds beyond a temporary period exception? 25b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 26c J Did the organization and stopping the year? If "Yes," complete Schedule L, Part I I I I I I I I I I I I I I I I I I I	22				
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. Job Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K, If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penid exception? c Did the organization analism 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 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? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II of the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II of the organization provide a grant or other assistance to an officer, director, trustee, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part IV 28 Was the organization provide a grant or other assistance to an officer, director, trustee, key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule II. Part IV 29 Did the organization receive contributions of art, historical treasures, or other simi		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
employees? If "Yes," complete Schedule J. 23 V 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
24a					
\$100,000 as of the last day of the year, that was issued after Docember 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No." go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? d Did the organization act as an "on behalf o" issuer for bonds outstanding at any time during the year? 24d		employees? If "Yes," complete Schedule J	23		✓
through 24d and complete Schedule K. If "No." go to line 25a b) bid the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c) bid the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d) bid the organization at as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person or uning the year? If "Yes," complete Schedule L, Part I l. 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-E27 iff "Yes," complete Schedule L, Part I l. c) Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, or disqualified persons? If "Yes," complete Schedule L, Part II l. c) Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified persons? If "Yes," complete Schedule L, Part IV c) A family member of any of these persons? If "Yes," complete Schedule L, Part IV c) A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c) An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c) An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c) An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c) An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c) Did the organization receiv	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
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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 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a proving year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I 25 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II, III, or III of the organization have a controlled entity within the meaning of section 51(b)(13)? 32 Did the organization have a controlled entity within the meaning of section 51(b)(13)? 33 Did the organization have a controlled entity within the m		through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
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? Section 501(e)(3), 501(e)(4), and 501(e)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified persons? If "Yes," complete Schedule L, Part II Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV in trustructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule M. Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Part II Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M. Part II Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M. Part II Did the organization on toloos of an entity disregarded as separate from the organization under Regulations sections \$01.7701-3? If "Yes," complete Schedule R, Part I, III. And Part V, Iim 1 The organi	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
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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-E2? 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officeres, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part III 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV or An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Part I 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 20 Did the organization liquidate, terminate, or dissolved and cease operations? If "Yes," complete Schedule N, Part I 21 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule R, Part V, Ime 2 22 Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Ime 2 23 Did the organization shave a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Ime 2 24 Did the organization conduct	25a				
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		19? Note. All Form 990 filers are required to complete Schedule O.	38	🗸	

Part Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	<u> </u>	
		المسمم	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 2	,	200	, ""
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	'	, ,]
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	- ' '	7,	
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		- W	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 14		- 12	1, 1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	\	1
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	40		1
_		4a	· 100 1	230364
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).	2		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	- A	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	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?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	* .	2 13 m	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	✓	ļ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	√ _	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			,
	·	7c	ي في ماي م	î cu
d e	If "Yes," indicate the number of Forms 8282 filed during the year	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	. ,	:: *	, 1
	sponsoring organization have excess business holdings at any time during the year?	8	1 1 10 7 1	استحد
9	Sponsoring organizations maintaining donor advised funds.	75.3	45.2	-3-
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	, d.	34.2°	[[
а	Initiation fees and capital contributions included on Part VIII, line 12 10a	() 🕸		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			3 g
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders		1	
b	Gross income from other sources (Do not net amounts due or paid to other sources	1,96		\$ "
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		- 4
_ b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	- 4	*, 52	[
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a	 - -	
а	Note. See the instructions for additional information the organization must report on Schedule O.	134	30 M	
ь	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		E	1 No.
С	Enter the amount of reserves on hand		医	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	1 72	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			m 99 0	(2016)

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See in:	struct	
Secti	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>	<u> </u>	<u>. v</u>
			Yes	No
1a	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 in Schedule O.	<u>o</u>		and the second
b 2	Enter the number of voting members included in line 1a, above, who are independent . 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?	9 2	1	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		/
5 6 7a	Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?		1	/
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		-	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reve	nue C		
40-	Did the construction have level shouten broaden an officetes?	T40	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates? 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?	10a 10b		✓
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	43.3		[4 *s
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	ļ
c b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	1	✓	 .
13	Did the organization have a written whistleblower policy?	12c	1	
14	Did the organization have a written document retention and destruction policy?	14	1	1
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
а	The organization's CEO, Executive Director, or top management official	15a	1	
b	Other officers or key employees of the organization	15b	/	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	100		red w
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?	16b		<u> </u>
	ion C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed TN Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available Check all that apply.	on 501	(c)(3)s	only
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.	nterest	polic	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and regrete 634 Semmes St. Memphis, TN 38111 901-405-1298	ecords	s, >	

-orm	990	(2016)	

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Check this box if neither the organization no	r any relate	d org	anız	atic	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee.
				(0	C)					
(A)	(B)	 			ition			(D)	(E)	(F)
Name and Title	Average hours per	(do not check more than one box, unless person is both an officer and a director/trustee)				is both	n an	Reportable compensation	Reportable compensation from	Estimated amount of other
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) David Vincent	60									
Executive Director & President		ļ		✓	<u> </u>		_	36,000		21,600
(2) Bob Thomas	ļ <u>1</u>	,						1		
Board of Directors Treasurer	ļ	1		<u> </u>	L_		_	ļ		
(3) D. Jack Smith	11	,								
Board of Directors Member	ļ	✓			<u> </u>					
(4) Alan Simpson	11	,		ļ						
Board of Directors Member	 	✓		_	 	<u> </u>	_	-		<u> </u>
(5) John Edmunds	11						Ì	1		
Board of Directors Member	ļ	/	<u> </u>		<u> </u>					
(6) George B. Suggs	3		1		ļ		ì	1		
Board of Directors Member	 	✓			<u> </u>		⊢			
(7) Ted Linn	1	,				}				
Board of Directors Member		1		_		 	 	-	ļ <u> </u>	
(8) Jessica Vincent	<u> </u>			1			}			
Board of Directors Member	 	/	-			<u> </u>	<u> </u>			
(9) Rob Thomas	<u> </u>									
Board of Directors Member	<u> </u>	✓	├	-	├		├			
(10) Don White	ļ <u>1</u>	,								
Board of Directors Member	 	-	_		<u> </u>	<u> </u>	⊢			
(11)									!	
(12)										
(13)										
(14)					T		-			

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yees	s, aı	nd ŀ	lighe	st C	ompensated E	mployees (con	tinued)
(C)											
	(A)	(B) Position (do not check more than o							(D)	(E)	(F)
	Name and title	Average	box,	unles	s pe	rson	s both	n an	Reportable	Reportable	Estimated
		hours per week (list any		er and	_	lirect	or/trus	·	compensation	compensation from related	m amount of other
		hours for	Individual trustee or director	Inst	Officer	₩.	Highest compensated employee	Former	the	organizations	compensation
		related organizations	l red	Institutional trustee	g	Key employee	nest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC	· 1
		below dotted	₫ ਜ਼	ona		뭥	မြိမ္မ		(44-271099-141130)		organization and related
		line)	l st	t		/ee	nper				organizations
			6	stee			sat				
							8.				
(15)											
			ļ				ļ				
(16)							Ì				
	VB 1941				<u> </u>						
(17)											
						<u> </u>					
(18)											
					L						
(19)											
(20)											
(21)											
										<u></u>	_[
(22)											
(23)											
(24)										-	
(25)											
1b	Sub-total						•	>	36,000		21,600
С	Total from continuation sheets to Part	VII, Sectio	n A					▶			
d	Total (add lines 1b and 1c)	<u> </u>						>	36,000		21,600
2	Total number of individuals (including but						above	e) w		ore than \$100.0	
	reportable compensation from the organi							•	0	,·	
											Yes No
3	Did the organization list any former of										ited
	employee on line 1a? If "Yes," complete S	Schedule J	for su	ıch .	ındı	vidu	ıal				. 3 🗸
4	For any individual listed on line 1a, is the	sum of rep	oortal	ole d	com	per	nsatio	n a	nd other comp	ensation from	the Table 1
	organization and related organizations	greater that	an \$1	50,	000	? H	f "Yes	s,"	complete Sch	edule J for si	uch
	ındıvıdual										. 4 /
5	Did any person listed on line 1a receive o	r accrue co	mper	nsat	lion	fror	m any	uni	related organiz	ation or individ	dual Total
	for services rendered to the organization?	? If "Yes," c	ompl	ete .	Sch	edu	ıle J f	or s	uch person		. 5 1
Section	on B. Independent Contractors										
1	Complete this table for your five highest of	compensate	ed inc	lepe	ende	ent	contr	acto	ors that receive	ed more than \$	100,000 of
	compensation from the organization Rep	ort compe	nsatio	n fo	or th	ne c	alend	ar y	ear ending wit	h or within the	organization's tax
	year.	•						•	J		3
	(A)								(B)		(C)
	Name and business add	ress							Description of s	ervices	Compensation
										-	
							-				
		-									
		÷									
2	Total number of independent contracto	rs (includir	na bu	t ne	ot I	ımıt	ed to	th	ose listed abo	ove) who	ا من العالم المنافع ا
_	received more than \$100,000 of compens							1 1	JJC HOLCO BDC	, , v	The state of the s

Par	VIII	Check if Schedule C		nonse or note t	o any line in this	s Part VIII		
				porise of note t	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Grants	1a	Federated campaigns						
Gra oc	b	Membership dues	<u>1b</u>		1. 加州港湾港	下,"我们是"在		
LS, C	С	Fundraising events .						
tributions, Gifts, Grants Other Similar Amounts	d	Related organizations			1 1	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
S, E	е	Government grants (con		113,101		* *	, · · · ·	The state of the s
tior er S	f	All other contributions, g						
		and similar amounts not inc	cluded above 1f	96,536	7.8	, -	The state of the s	7 18 6 E
Contributions, and Other Sim	g	Noncash contributions include	ded in lines 1a-1f \$					
	h	Total. Add lines 1a-1	f		209,637	3.3968355.	ATTACKE TO	
Program Service Revenue				Business Code			では、これに アイン 大学	"事效"的形式。
Ven	2a	Recovery Program		623990	232,216	232,216		
æ	b	Job Skills Rehabilitation	on Program	230000	612,776	612,776		
<u>ice</u>	С							
ě	d							
E	е							
gra	f	All other program ser	vice revenue .					·
Po	g	Total. Add lines 2a-2		>	844,992	The second second	January Sugar	1 COMPANY COL
	3 4	Investment income and other similar amo	(including dividuals)	lends, interest,				
	5	Royalties		🕨				
			(ı) Real	(II) Personal			\$3.5 July 1995	VE SALESAN SALE
	6a	Gross rents						
	b	Less: rental expenses			Actor 1			
	C	Rental income or (loss)				, 10 m m m		
	d	Net rental income or ((loss)	•			-1+5-+ 1-6- k + 1 1- 20	20047-7-4-1- PRO 4-15-0-1-2-1-1-1-1
	7a	Gross amount from sales of	(i) Secunties	(II) Other				他型式器を設置する。 1980年 1日
		assets other than inventory			,			
	b	Less cost or other basis			;		**	The second of the second
	-	and sales expenses			, , ,			
	C	Gain or (loss) .			, ,	and he and		A STATE OF THE STA
	l -		L	<u> </u>	324 22	<u> </u>	K. 1 68	Service and the service and th
e	d 8a	Net gain or (loss) . Gross income from fu	ındraising					
ē		events (not including \$.					
Other Reve		of contributions reporte	ed on line 1c).			a tank to a second		
7		See Part IV, line 18 .	a		1990	100		
ş	b	Less direct expenses	_	·		Man. "	*	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
0	c	Net income or (loss) f		L,	- 11111 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	A A A A A A A A A A A A A A A A A A A	23.5	
	l .	Gross income from ga		events .	14 14 6 24 7 25	大·2017年,第二年於八十年。	2 2 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	CTA CHAILM SELVY
	04		· · · a		(12)			
	.	Less: direct expenses				A CONTRACT OF THE PARTY OF THE		
	b	Net income or (loss) f				***************************************	13 25	
	100	Gross sales of in		VILIES .				- 4 1 7 7
	10a	returns and allowance			_			* * *
	١.		_		4.			
	b	Less: cost of goods s						***
	<u> </u>	Net income or (loss) f		Business Code				N
		ivilscellaneous F	nevenue	Business Code	,		<u> </u>	
	11a							
	b							
	С				<u></u>			
	d	All other revenue						
	e	Total. Add lines 11a-		▶			12, 12, 13	a my my or a s
	12	Total revenue. See II	nstructions		1 054 000	4 05 4 000	I	1

Form 990 (2016) Page 10 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 (B) Program service expenses Do not include amounts reported on lines 6b, 7b, (C) Management and general expenses (D) Fundraising expenses (A) Total expenses 8b, 9b, and 10b of Part VIII. 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 . 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 Compensation of current officers, directors, trustees, and key employees . . . 57,600 48,960 8,640 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 261,887 222,604 39,283 7 Other salaries and wages Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) 9 Other employee benefits . . 10 Payroll taxes . . 20,034 17,029 3,005 11 Fees for services (non-employees). Management Legal Accounting Lobbying . . . Professional fundraising services See Part IV, line 17 Investment management fees . . Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 1 2 2 2 23 24

12	Advertising and promotion	520	520		
13	Office expenses	43,959	43,959		
14	Information technology	5,431	5,431		
15	Royalties				
16	Occupancy	79,418	79,418		
17	Travel	35,733	35,733		
18	Payments of travel or entertainment expenses		i		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	2,125	2,125		
20	Interest	13,440	13,440		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance	34,706	34,706		
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Job Skills Program	228,642	228,642		
b	Food & Personal items for Homeless Ministry	242,411			
С	***************************************				
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,025,906	974,978	50,928	
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 if following SOP 98-2 (ASC 958-720)				
					Form 990 (2016)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 18.043 1 24.424 2 2 Savings and temporary cash investments 215 5,669 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 6 Notes and loans receivable, net 7 7 Inventories for sale or use 8 8 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 10b Less: accumulated depreciation 692,588 692.588 11 Investments—publicly traded securities 11 12 Investments-other securities. See Part IV, line 11 . 12 13 Investments—program-related. See Part IV, line 11 13 14 14 15 15 Other assets. See Part IV, line 11 16 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 710.846 722.681 17 Accounts payable and accrued expenses . 17 18 Grants pavable . . 18 19 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 264,125 250,926 24 Unsecured notes and loans payable to unrelated third parties . . . 3,000 24 3,000 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D . . 25 5.002 11,782 Total liabilities. Add lines 17 through 25 . . . 26 272,127 265,708 Organizations that follow SFAS 117 (ASC 958), check here ▶ or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 438,719 456,973 28 Temporarily restricted net assets . . . 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. Net Assets 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 33 Total net assets or fund balances 33 438,719 456,973

Total liabilities and net assets/fund balances . . .

722,681

34

710,846

Page 12

				ı a	ge iz
Part					
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>	<u></u>	<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,05	4,629
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,02	<u>5,906</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		2	8,723
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		43	8,719
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7		_	
8	Prior period adjustments	8		(10),469 <u>)</u>
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
_	33, column (B))	10		45	<u>6,973</u>
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	· · ·	٠,	_Ц
			70.75	Yes	No
1	Accounting method used to prepare the Form 990. Cash Accrual Other			X	
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	piain in	1,45		47.74
٥-			200	23.	
2a	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 com-		2a	#35	√
	reviewed on a separate basis, consolidated basis, or both:	oned of		1	* -
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				2.2
b	Were the organization's financial statements audited by an independent accountant?		2b		لمشتث
D	If "Yes," check a box below to indicate whether the financial statements for the year were audited by an independent accountant?	 Mona	2D	435 g	▼ ₹ ₹3
	separate basis, consolidated basis, or both:	a on a	1.3	18	. 1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			1,7	1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	ersight			
_	of the audit, review, or compilation of its financial statements and selection of an independent account	•	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex		. 1 50	The s	
	Schedule O.	F	44.0		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	G 4550£2.	essantiate	40 ST
	the Single Audit Act and OMB Circular A-133?		За		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo the			<u> </u>
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3ь		
			Form	990	(2016)
			. 5		,,

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047 2016

Open to Public Inspection

Name of the organization **Employer identification number** 30-0057701 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) 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 331/8% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/8% 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) 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 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. C its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (III) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E) (A) (数字字) (表) (A) (数数 高) (A)

Part		ations Descr	ribed in Sect	ions 170(b)(1)(A)(iv) and	170(b)(1)(A)(v	i)
	(Complete only if you checked t Part III. If the organization fails to	he box on line o qualify unde	e 5, 7, or 8 of er the tests lis	Part I or if the sted below, p	e organizatio lease comple	n failed to que ete Part III.)	alify under
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	The state of		the transfer of the safe of	1 2 2 2 2 2 2 2 2 2 2 2	A 18 18 18 18 18 18 18 18 18 18 18 18 18	
	on B. Total Support	1		1	· · ·		
	dar year (or fiscal year beginning in) Amounts from line 4	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 8	Amounts from line 4						. <u>.</u>
9	Net income from unrelated business activities, whether or not the business is regularly carried on	7,01		,			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the first five years.			d, third, fourth	. or fifth tax v	12 ear as a section	n 501(c)(3)
	organization, check this box and stop he				_		
Secti	on C. Computation of Public Suppo	rt Percentag			· · · · ·		
14	Public support percentage for 2016 (line				•	14	%
15 16a	Public support percentage from 2015 Sc 331/2% support test—2016. If the organ box and stop here. The organization qua	ization did not	check the box	x on line 13, ar	nd line 14 is 30	15 31/3% or more,	
b	331/3% support test—2015. If the organ this box and stop here. The organization	ization did not i qualifies as a	check a box o	on line 13 or 16 orted organizati	a, and line 15	ıs 33 ¹ /3% or m	ore, check
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization means the organization meets the organization.	eets the "facts	-and-circumst	ances" test, ch	neck this box a	and stop here.	Explain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization is supported organization.	ation meets th	e "facts-and-o	circumstances	" test, check	this box and s	stop here.
18	Private foundation. If the organization d instructions		box on line 13		a, or 17b, chec	k this box and	

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.)

	in the organization rails to quality	under the tes	sis listed beig	w, please co	mpiete Part i	1.)	
	on A. Public Support	, <u>, , , , , , , , , , , , , , , , , , </u>	· · · · · · · · · · · · · · · · ·				
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants")	314,531	332,632	302,789	239,393	209,637	1,398,982
2	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	596,453	820,691	604,742	732,871	844,992	3,599,749
3	Gross receipts from activities that are not an unrelated trade or business under section 513		320,001		702/071		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	910,984	1,153,323	907,531	972,264	1,054,629	4,998,731
	Amounts included on lines 1, 2, and 3 received from disqualified persons		1,,00,020				.,,000,,01
b	Amounts included on lines 2 and 3		·				
	received from other than disqualified					1	
	persons that exceed the greater of \$5,000					!	
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from			, " , "	٠, ،		
	line 6.)	x 1 4 4			,		
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	910,984	1,153,323	907,531	972,264	1,054,629	4,998,731
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						 -
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	040.004	4.452.000	007.504	070.004	1.051.000	
14	First five years. If the Form 990 is for the	910,984	1,153,323		972,264	1,054,629	4,998,731
	organization, check this box and stop he	re	<u></u>		· · · · ·		► □
	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line 8					15	100 %
16	Public support percentage from 2015 Sch			<u> </u>	<u></u>	16	100 %
<u>Secti</u>	on D. Computation of Investment In						
17	Investment income percentage for 2016 (nn (f))	17	%
18	•	Investment income percentage from 2015 Schedule A, Part III, line 17					
19a	331/3% support tests—2016. If the organ						
	17 is not more than 331/3%, check this box					-	_
b	331/3% support tests - 2015. If the organiz						
	line 18 is not more than 331/3%, check this				-		
20	Private foundation. If the organization di	d not check a	box on line 14,	, 19a, or 19b, c	heck this box	and see instruc	tions 🕨 🗌

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

► 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.

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

10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

OMB No 1545-0047 2016

Open to Public Inspection

Name of the organization Employer identification number **Warrior Ministries** Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year. 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) . 3 Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 . . . (ii) Assets included in Form 990, Part X . . \$__ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Pa	a	e	2

Part	III Organizations Maintaining	Colle	ections of	Art, His	torical 1	reasures	, or Ot	her Similar A	ssets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	acces							
а	☐ Public exhibition			d		or exchang			
b	☐ Scholarly research			e	Other	r <u></u>			
¢	☐ Preservation for future generations								
4	Provide a description of the organizat XIII.	tion's	collections	and expla	un how t	hey further	the org	janization's exe	empt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather								
Part	IV Escrow and Custodial Arra	nger	nents.						
	Complete if the organization 990, Part X, line 21.							•	
1a	Is the organization an agent, trustee, included on Form 990, Part X?								not Yes No
b	If "Yes," explain the arrangement in Pa	art XIII	and compl	ete the fo	llowing ta	able:		·	
							<u> </u>		Amount
С	Beginning balance						1c	:	
d	Additions during the year						1d		
е	Distributions during the year						1e		
f	Ending balance						1f		
2a	Did the organization include an amoun								•
	If "Yes," explain the arrangement in Pa	art XIII	. Check her	e if the ex	cplanatio	n has been	provide	ed on Part XIII	<u> L</u>
Par			1 10 1						
	Complete if the organization								71775
		(a) (Current year	(b) Pri	or year	(c) Two year	rs back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance .								
b	Contributions		 -	<u> </u>					
С	Net investment earnings, gains, and losses								
ď	Grants or scholarships			<u> </u>					
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of t	he cui	rrent year er	nd balanc	e (line 1g	, column (a	i)) held :	as:	
а	Board designated or quasi-endowmer	nt ▶_		%					
b	Permanent endowment ▶	%							
С	Temporarily restricted endowment ▶		%						
	The percentages on lines 2a, 2b, and	2c sho	ould equal 1	00%.					
3a	Are there endowment funds not in the	e poss	session of t	ne organi:	zation the	at are held	and ad	ministered for	the
	organization by:								Yes No
	(i) unrelated organizations				•				. 3a(i)
	• • • • • • • • • • • • • • • • • • • •								. 3a(ii)
b	If "Yes" on line 3a(ii), are the related o								3b
4	Describe in Part XIII the intended uses			on's endo	wment f	unds.			
Par									
	Complete if the organization	ansy	vered "Yes	on For	m 990, I	Part IV, line	<u>e 11a.</u>	See Form 990), Part X, line 10.
	Description of property		(a) Cost or o			or other basis other)		Accumulated epreciation	(d) Book value
1a	Land	. [, ,	,	
b	Buildings	. [597,945					597,945
С	Leasehold improvements	. [
d	Equipment	. [
e	Other	<u>. </u>		94,643					94,643
Total.	Add lines 1a through 1e. (Column (d) n	nust e	qual Form 9	90, Part 2	X, columi	n (B), line 10	Oc.) .	. <u>.</u> >	692,588

Part VII	Complete if the organization ans		n QQ	0 Part IV lin	a 11h Saa Form	000 Part Y line 12
	(a) Description of security or category) Book value		nod of valuation
	(including name of security)		,-	, 20011 12.00		of-year market value
(1) Financia	derivatives					
(2) Closely-I	held equity interests					
(3) Other						
(A)						
(B)						
(C)						
(D) (E)						
(F)						
(G)						
(G)						
	(b) must equal Form 990, Part X, col. (B) line 12.) ▶				4 2 2	* - 1.457,3
Part VIII	Investments - Program Related	<u></u>			<u> </u>	
	Complete if the organization ansi		n 99	0, Part IV, lin	e 11c. See Form	990, Part X, line 13.
	(a) Description of investment) Book value		hod of valuation
					Cost or end-	of-year market value
(2)						
(3)						
_(4)						
_(5)						
_(6)						
_(7)						
_(8)						
(9)	(h) must squal Form 000 Part V and (D) line 12)				48 C . () A . 1870 . (6) 485545	Antibook Partners Larks with
Part IX	(b) must equal Form 990, Part X, col. (B) line 13.) ► Other Assets.	1			なからないできる	
FaitiX	Complete if the organization ans	wered "Yes" on Forr	n aa	0 Part IV lin	e 11d. See Form	990 Part X line 15
		a) Description	11 00	0,1 arc 14, iii	C 114. OCC 1 O	(b) Book value
(1)		,				
(2)						
(3)		· · · · · · · · · · · · · · · · · · ·				
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	ımn (b) must equal Form 990, Part X, c	ol. (B) line 15.)		<u> </u>	▶	
Part X	Other Liabilities.					
	Complete if the organization ans	wered "Yes" on Forr	n 99	0, Part IV, lin	e 11e or 11f. See	Form 990, Part X,
	line 25.	(b) Destruction		. *	propert & v	er Eine Jahren Greine der Geranderen der
(1) Federal II	(a) Description of liability	(b) Book value				
			994		题 的复数工事	
(3) Mississ	ippi State Sales Tax	10	0,788			
(4)		<u> </u>				
(5)						
(6)						
(7)						实现建设于但设计
(8)						
(9)						The second second
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25) ▶	11	1,782	**************************************		
	or uncertain tax positions. In Part XIII, prov			the organizatio	n's financial stateme	nts that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 2016

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Warrior Ministries	30-0057701
1. Form 990, Part VI, Section A, Line 2 - The Executive Director, David Vincent, and Board Member,	Jessica Vincent, are husband/wife.
2. Form 990, Part VI, Section A, Line 6 - The Board of Directors is the governing body of the organi	zation. The Board meets twice per year.
The Executive Committee meets once per quarter.	
3. Form 990, Part VI, Section A, Line 7a - The Board of Directors may nominate prospective board r	nembers to the Executive Director.
Potential new members are then brought before the entire board for vote on the acceptance to the	Board of Directors.
4. Form 990, Part VI, Section B, Line 11a - The complete Form 990 is reviewed by the Executive Con	mmitee of the Board of Directors.
The complete 990 is provided to all members of the Board of Directors for review prior to filing.	
5. Form 990, Part VI, Section B, Line 12c - The Conflict of Interest Policy is in the employee handbo	ook and our Board of Directors handbook.
The Conflict of Interest policy is included in new employee training.	
6. Form 990, Part VI, Section B, Line 15 - Compensation for key employees is determined by the Bo	pard of Directors based on the financial
status of the organization and comparability data for our local area.	
7. Form 990, Part VI, Section C, Line 19 - All governing documents, conflict of interest policy, and f	inancial statements are available to the
public upon request.	