efile GRAPHIC print Submission Date - 2023-04-04 DLN: 93493094007073 OMB No. 1545-0047 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. Open to Public ► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information. Inspection Department of the Treasury Servier the 2021 calendar year, or tax year beginning 01-01-2022 , and ending 12-31-2022 C Name of organization Psalm68Five Ministries D Employer identification number B Check if applicable: O Address change 47-3375486 O Name change Doing business as O Initial return O Final return/terminated Number and street (or P.O. box if mail is not delivered to street address) 504 N Church St $\,$ E Telephone number O Amended return Application pending (713) 202-3012 City or town, state or province, country, and ZIP or foreign postal code McKinney, TX 75069 G Gross receipts \$ 286,549 Name and address of principal officer: H(a) Is this a group return for ☐Yes ✓ No subordinates? 504 N Church St H(b) Are all subordinates McKinney, TX 75069 ☐ Yes ☐No Tax-exempt status: 4947(a)(1) or 527 If "No," attach a list. See instructions. Website: ► www.psalm68five.org **H(c)** Group exemption number M State of legal domicile: TX K Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► Summary 1 Briefly describe the organization's mission or most significant activities: In partnership with selected best-practice, faith-based camps, Psalm68five serves fatherless children as it recruits summer campers and volunteers, develops and provides exemplary, trauma-informed resources, and covers the cost of attendance and program materials for fatherless children. Partner camps truly join Psalm68five in its mission to serve fatherless children. Each one commits to raising its own scholarship funding for fatherless children in an increasing amount each year - annually diminishing Psalm68five's sponsoring of fatherless camps - until it is fully funding its own significant camp ministry to the fatherless and utilizing Psalm68five program resources, volunteers, Activities & Governance training, and materials. 0 Number of independent voting members of the governing body (Part VI. line 1b) Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 0 Net unrelated business taxable income from Form 990-T, Part I, line 11 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 237.417 286.549 Program service revenue (Part VIII, line 2g) 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 237.417 286.549 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 45,000 209.250 Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 56,962 **16a** Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) \$\infty\$56,962 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 36.399 62.120 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 107,120 302.611 Revenue less expenses. Subtract line 18 from line 12 . 130.297 -16,062 Assets or d Balances Beginning of Current Year End of Year Total assets (Part X, line 16) . 258,710 242,648 Total liabilities (Part X, line 26) . Net assets or fund balances. Subtract line 21 from line 20 . 258,710 242,648 22 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 2023-04-04 Signature of officer Sign Bryan C Johnson Preside Type or print name and title Print/Type preparer's name Preparer's signature Date Check 🗹 if P01442417 **Paid** self-employed Ladwig Accounting Services LLC Firm's name Firm's EIN > 46-4516697 **Preparer** Firm's address ► 1077 Maverick Drive Use Only Phone no. (469) 261-4346 Allen, TX 75013 🗸 Yes 🗌 No May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2021) Cat. No. 11282Y

Form	990 (2021)				Page 2
Pa	rt Statement of Program	n Service Accompli	shments		
	Check if Schedule O contain	ns a response or note to	any line in this Part III		🗆
1	Briefly describe the organization's	mission:			
deve Partr child	rtnership with selected best-practice lops and provides exemplary, traum ler camps truly join Psalm68five in it ren in an increasing amount each ye ficant camp ministry to the fatherles	a-informed resources, ar is mission to serve fathe ear - annually diminishing	nd covers the cost of a rless children. Each on g Psalm68five's sponso	ttendance and program materials for e commits to raising its own schola ring of fatherless camps - until it is	or fatherless children. rship funding for fatherless fully funding its own
_					
2	Did the organization undertake an	y significant program se	rvices during the year	which were not listed on	
	the prior Form 990 or 990-EZ? . If "Yes," describe these new service	es on Schedule O.			☐ Yes 🔽 No
3	Did the organization cease conduc	ting, or make significant	changes in how it con	ducts, any program	
	services?				🗆 Yes 🛂 No
	If "Yes," describe these changes or	ı Schedule O.			
4		ganizations are required		e largest program services, as mea of grants and allocations to others,	
4a	(Code:) (Expens	es \$ 242,782	including grants of \$) (Revenue \$)
	In calendar year 2021, Psalm68five colla Grapeland, TX Camp Honeyrock: Three			artners and to recruit and serve fatherles	ss campers: Frontier Camp:
4b	(Code:) (Expens	es \$	including grants of \$) (Revenue \$)
	Intervention TBRI, and innovative, traun	na-informed modality create	d by the late Dr. Karyn Pur	s children in camp settings. Psalm68five vis at Texas Christian University. Working s camp ministry which began being utiliz	with a TBRI Certified Educator,
4c	(Code:) (Expens	es \$	including grants of \$) (Revenue \$)
	Psalm68five serves as a national voice a populations, to share God's beautiful creencourage the promise and value of each	eation with fatherless childre	n who may never experier	unity. The goal is to expand camp minist ice nature or the joy and adventure of su	ry into marginalized mmer camp, and to specifically
4d	Other program services (Describe	in Schedule O.)			
	(Expenses \$	including grants of	f \$) (Revenue \$)
4e	Total program service expense	242,	782		

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Yes 1 2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. Yes Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 No 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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III . . . 5 No 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 No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, No the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 No 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? No 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Nο permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V 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 Nο 11a **b** Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total No 11b c Did the organization report an amount for investments—program related in Part X. line 13 that is 5% or more of its total No assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c 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 No **11d** e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e No 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 Nο 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a No **b** Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Nο 14a Did the organization maintain an office, employees, or agents outside of the United States? . 14a No **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 14b No Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Nο foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to No or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, Yes 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions. Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 No Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a No **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

21

Nο

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Par	t 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? If "Yes," complete Schedule I, Parts I and III	22		No						
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No						
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No						
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b								
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?	24c								
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d								
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? <i>If</i> "Yes," complete Schedule L, Part I	25a		No						
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No						
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? If "Yes," complete Schedule L, Part II	26		No						
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? If "Yes," complete Schedule L,Part III	27		No						
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):									
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No						
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No						
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No						
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No						
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes</i> ," <i>complete Schedule M</i>	30		No						
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No						
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No						
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No						
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No						
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No						
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)? If "Yes," complete Schedule R, Part V, line 2	35b								
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line</i> 2	36		No						
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No						
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes							
Pa	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									
٦.	Enter the number reported in hex 2 of Form 1006. Enter 10 if not applicable		Yes	No						
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . 1b 0									
b	· · · · · · · · · · · · · · · · · · ·									
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		No						

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		
2a	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	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
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	
	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)?	4a	No
	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).		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
	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	No
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).		
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	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as		
h	required?	7g	No
	1098-C?	7h	No
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter:		
	Gross income from members or shareholders		
	Gross income from other sources. (Do not net amounts due or paid to other sources		
	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	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
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	
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		
c	Enter the amount of reserves on hand		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
15	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?	15	No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	No
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17	

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Part	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "I 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	•	onse to	lines <mark> ✓</mark>
Sec	tion A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year 1a 1)		
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervisio of officers, directors or trustees, or key employees to a management company or other person?			No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	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?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
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		No
	tion B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	2.)	
	, , , , , , , , , , , , , , , , , , , ,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i>	12c		No
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
a	The organization's CEO, Executive Director, or top management official	15a		No
	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		No
	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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed▶			
	Section 6104 requires an organization to make its Form 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 in Schedule O)			
19	Describe in 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.			
	State the name, address, and telephone number of the person who possesses the organization's books and records: Bryan C Johnson 504 N Church Street McKinney, TX 75069 (713) 202-3012			
			Form 99	90 (2021)

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or 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 the instructions for the order in which to list the persons above.

See the instructions for the order in which to list t	•									
Check this box if neither the organization nor		ganizat	ion co			ated ar	ny c		tor, or trustee.	
(A) Name and title	(B) Average hours per week (list any hours for related							(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	related organizations
(1) Bryan C Johnson	20.00	X		х				0	0	0
President	0.00							C	Ğ	
(2) Rebecca E Johnson Secretary	8.00 0.00	X		х				0	0	0
(3) Steve Foster	10.00								0	0
Director	0.00	Х						0	0	U
(4) Bill Hopkins Director	5.00	X						0	0	0
(5) Janet Hopkins Director	5.00	х						0	0	0
(6) Bruce Johnson Director	5.00	х						0	0	0
(7) Colleen Nunn	0.00 8.00							0	0	0
Director	0.00							o d		
(8) Kent Nunn Director	5.00 0.00	X						0	0	0
(9) Matt Raines	5.00							0	0	0
Director	0.00							0	0	
(10) Maggie Raines	5.00	×						0	0	0
Director	0.00									
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	(A) Name and title	(B) Average hours per week (list any hours for	Position (do not check more than one box, unless person is both an officer and a director/trustee) Report competing the competing the competing that the competing the competing that th						Repo compo fror organiz	D) (E) ortable Report: ensation compens in the from rel ation (W- organization		on d	Estim amount comper from	ated of other sation the
		related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	Z/1 MISC/1	099- 099-NEC)	2/1099- MISC/1099-N	EC)	organiza rela organiz	ted
c ·	Sub-Total						*							
2	Total number of individuals (including reportable compensation from the org		to those	liste	d abo	ove)	who i	recei	ved more	than \$100),000 of			
													Yes	No
3	Did the organization list any former of line 1a? If "Yes," complete Schedule I										mployee on	_		
4	For any individual listed on line 1a, is										the	3		No
	organization and related organizations individual	s greater than \$	150,000	? If "	Yes,"	con	nplete	Sch	edule J fo	r such		4		No
5	Did any person listed on line 1a receive	· · · · · · · · · · · · · · · · · · ·	 npensati	• ion fr	• om a	• ny i	 unrela	• ted o	 organizati	on or indiv	• idual for	H		NO
	services rendered to the organization											5		No
	ection B. Independent Contract		d:alaa			-4			:		#100 000 of on		: f	
1	Complete this table for your five higher the organization. Report compensation	n for the calend									year.	mpens		
	Name a	(A) and business addre	ess							Desc	(B) ription of services			C) nsation

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 ▶ 0

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

orn	n 990 (2021)				Page 10
Pā	Statement of Functional Expenses				(1)
	Section 501(c)(3) and 501(c)(4) organizations must co				
	Check if Schedule O contains a response or note to an	y line in this Part IX			
	not include amounts reported on lines 6b, 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	209,250	209,250		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
4	Benefits paid to or for members	0	ĺ		
5	Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees):				
a	Management	0			
k	Legal	0			
c	Accounting	1,146		1,146	
c	ILobbying	0			
e	Professional fundraising services. See Part IV, line 17	56,962			56,962
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	0			
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	0			
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a Camp Training	11,768	11,768		
	b Printing and Publications	7,609	7,609		
	c Youth Ministry Expenses	6,317	6,317		
	d Camp Encouragement Events	5,838	5,838		
	e All other expenses	3,721	2,000	1,721	
25	Total functional expenses. Add lines 1 through 24e	302,611	242,782	2,867	56,962
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).				

Check if Schedule O contains a response or note to any line in this Part IX . (A) (B) Beginning of year End of year 258,710 1 240.047 Cash-non-interest-bearing 2 Savings and temporary cash investments . . . 2 0 3 0 Pledges and grants receivable, net . . . 3 4 Accounts receivable, net . . . 2,600 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 0 controlled entity or family member of any of these persons 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 0 7 0 Notes and loans receivable, net . Inventories for sale or use . . 8 0 9 0 Prepaid expenses and deferred charges . . . **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 10c 0 11 0 11 Investments—publicly traded securities . 12 Investments—other securities. See Part IV, line 11 . 12 0 13 Investments—program-related. See Part IV, line 11 13 0 14 0 14 15 1 15 Other assets. See Part IV, line 11 . 16 **Total assets.** Add lines 1 through 15 (must equal line 33) . . . 258,710 16 242,648 17 17 Accounts payable and accrued expenses . 18 Grants payable . . . 18 19 19 Deferred revenue 20 Tax-exempt bond liabilities . . . 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D jabilities 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 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third parties, 25 25 and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D 26 **Total liabilities.** Add lines 17 through 25 . . 0 26 0

5 Assets Net

30

Balances Organizations that follow FASB ASC 958, check here complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 258.710 27 242.648 Net assets with donor restrictions 28 Fund Organizations that do not follow FASB ASC 958, check here 🕨 📙 and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29

31 Retained earnings, endowment, accumulated income, or other funds 31 32 Total net assets or fund balances 258.710 242.648 33 Total liabilities and net assets/fund balances . . 33 258.710 242.648 Form 990 (2021)

30

Paid-in or capital surplus, or land, building or equipment fund .

efil	le GR	APHIC prii	nt	Subm	ission Date	e - 2023-04-04			DLN:	93493094007073
(Fo	rm 9	-				narity Statu organization is a sec 4947(a)(1) nonexe	tion 501(c)(3)	organization or		OMB No. 1545-0047
Trea		t of the venue		►c	Go to <u>www.ir</u>	Attach to Form s.gov/Form990 for in			ormation.	Open to Public Inspection
		ne organizat i Ministries	on						Employer identification 47-3375486	ation number
_	a rt I organiz					tus (All organization e it is: (For lines 1 thro	•	•	see instructions.	
1			•			ssociation of churches		,	A)(i).	
2		A school de	escribe	d in se d	tion 170(b)(1)(A)(ii). (Attach Sche	edule E (Form 99	90).)		
3		A hospital	or a co	operativ	ve hospital ser	vice organization desc	ribed in sectior	170(b)(1)(A)(i	ii).	
4		A medical in name, city,			nization opera	ted in conjunction with	a hospital desc	ribed in section	170(b)(1)(A)(iii). Er	ter the hospital's
5					I for the benef plete Part II.)	it of a college or unive	rsity owned or o	perated by a gov	ernmental unit descr	ibed in section
6					-	r governmental unit de				
7	\checkmark				nally receives i). (Complete	a substantial part of it Part II.)	s support from a	a governmental u	nit or from the gener	al public described in
8		A commun	ity trus	st descri	ibed in sectio	n 170(b)(1)(A)(vi). (0	Complete Part II.)		
9		non-land g	rant co	llege of	agriculture. S	escribed in 170(b)(1) see instructions. Enter t	the name, city, a	and state of the c	ollege or university:	
10		activities re income and	elated d unrel	to its ex ated bu	empt function	income (less section !	xceptions, and ((2) no more than	33 1/3% of its support	from gross investment
11		An organiza	ation o	rganize	d and operate	d exclusively to test fo	r public safety. S	See section 509	(a)(4).	
12		more publi	cly sup	ported	organizations	d exclusively for the be described in section 5 ne type of supporting o	609(a)(1) or se	ction 509(a)(2).	See section 509(a)	
а		organizatio	n(s) th	ne powe		rated, supervised, or co appoint or elect a majo •				
b		manageme	nt of t	he supp						ing control or anization(s). You must
c		Type III fu	nctio	nally in	tegrated. A s				d functionally integra	ted with, its supported
d		Type III not functionally	n-fun integ	rated. T	lly integrated The organization	d. A supporting organized in a supporting organized in generally must satisited in the sations of the sations o	zation operated fy a distribution	in connection wit requirement and		
e		Check this	box if	the orga	anization recei	ved a written determin	nation from the I		e I, Type II, Type III fu	nctionally integrated,
f	Enter				, ,	supporting organization			<u> </u>	
g						t the supported organiz		:	() A	(vi) Amount of
(1) 1	vame o	of supported	organi	zation	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		ganization listed ning document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
							Yes	No		
				<u> </u>						
Tota	ıl									
		work Reduc or 990-EZ.	tion A	ct Noti	ice, see the I	nstructions for	Cat. No. 1128	5F	Schedu	le A (Form 990) 2022

membership fees received. (Do not

include any "unusual grant."). . Tax revenues levied for the

47,180

237.417

209,250

Support Schedule 10.	o. gaa			//\=/\/\//\··/ wiii	, -, -, \-, \-,	/					
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Par											
the organization failed to qualify under the tests listed below, please complete Part III.)											
Section A. Public Support											
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total					
Gifts, grants, contributions, and											

190,275

	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	132,405	190,275	47,180	237,417	209,250	8
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						

132,405

	the organization without charge						
4	Total. Add lines 1 through 3	132,405	190,275	47,180	237,417	209,250	816,527
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) .						0
6	Public support. Subtract line 5 from line 4.						816,527
	Section B. Total Support						
Calendar year (or fiscal year beginning in)		(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	132,405	190,275	47,180	237,417	209,250	816,527
_	Constant to the second to the second						

	line 1 that exceeds 2% of the amount shown on line 11, column (f) .							
-	Public support. Subtract line 5 from line 4.							816,527
S	ection B. Total Support							
	lendar year fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
7	Amounts from line 4	132,405	190,275	47,180	237,417	209,250		816,527
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							C
9	Net income from unrelated business activities, whether or not the							C

	Showin on time 11, column (i, i .						
6	Public support. Subtract line 5 from line 4.						816,527
	Section B. Total Support						
	alendar year or fiscal year beginning in) 🕨	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	132,405	190,275	47,180	237,417	209,250	816,527
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0
11	Total support. Add lines 7 through			_			016 527

S	Section C. Computation of Public Support Percentage									
	this box and stop here						ightharpoons			
13	First 5 years. If the Form 990 is for the	e organization's fir	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organiza	ation, check		
12	Gross receipts from related activities, e	tc. (see instructior	าร)			12				
11	Total support. Add lines 7 through 10							816,527		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).							0		
	business is regularly carried on									

	10							
12	Gross receipts from related activities, e	tc. (see instruction	ns)			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, che								ation, check
	this box and stop here						ightharpoons	
S	ection C. Computation of Public	Support Perc	entage					
14	Public support percentage for 2022 (line	e 6, column (f) div	rided by line 11, co	olumn (f))		14		100.000 %

14	Public support percentage for 2022 (line 6, column (f) divided by line 11, column (f))	14		100.000					
15	Public support percentage for 2020 Schedule A, Part II, line 14	15		100.000					
16 a	16a 33 1/3% support test—2022. 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			~					

33 1/3% support test—2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

17a 10%-facts-and-circumstances test—2022. 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

10%-facts-and-circumstances test—2021. 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

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Page 2

III. If

816.527

20

	Support Schedule fo (Complete only if you conganization fails to qu	hecked the box	on line 10 of		organization fai	led to qualify un	der Part II. If the
Se	ection A. Public Support	ally under the	tests listed be	low, please col	ilpiete Fait II.)		
	endar year						
	fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
2	include any "unusual grants.") . Gross receipts from admissions,				_		
2	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business						
	under section 513						
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						
7a	Amounts included on lines 1, 2, and 3						
b	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
_	13 for the year. Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
_	from line 6.)						
Se	ection B. Total Support						
	endar year	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	fiscal year beginning in)				.,,		
9	Amounts from line 6 Gross income from interest,						
10a	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
b	Unrelated business taxable income						
b	Unrelated business taxable income (less section 511 taxes) from						
b	Unrelated business taxable income						
b c	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30,						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b,						
c	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is						
c 11	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
c	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
c 11	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .						
c 11	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . Total support. (Add lines 9, 10c,						
c 11 12	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .	ne organization's	first, second, th	ird, fourth, or fifth	ı tax year as a se	ction 501(c)(3) org	anization, check this
c 11	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . Total support. (Add lines 9, 10c, 11, and 12.). First 5 years. If the Form 990 is for the	3			•	, 3	- 0
11 12 13 14	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . Total support. (Add lines 9, 10c, 11, and 12.). First 5 years. If the Form 990 is for the box and stop here.		· · · · · · · · ·		•	ction 501(c)(3) org	- 0
11 12 13 14	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . Total support. (Add lines 9, 10c, 11, and 12.). First 5 years. If the Form 990 is for the	Support Perc	entage	<u> </u>			- 0
12 13 14 See	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . Total support. (Add lines 9, 10c, 11, and 12.). First 5 years. If the Form 990 is for the box and stop here. Ection C. Computation of Public Public support percentage for 2022 (line).	Support Percone 8, column (f) d	entage ivided by line 1	3, column (f))		15	- 0
12 13 14 Se 15 16	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First 5 years. If the Form 990 is for the box and stop here. Ection C. Computation of Public Public support percentage from 2021 Section 2022 (ling Public support percentage from 2021 Section 2022 (ling Public support percentage from 2021 Section 2021 Section 2022 (ling Public support percentage from 2021 Section 2021	Support Perc ne 8, column (f) d Schedule A, Part II	entage ivided by line 1 I, line 15	3, column (f))			- 0
11 12 13 14 Se 15 16 Se	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First 5 years. If the Form 990 is for the box and stop here. ection C. Computation of Public Public support percentage for 2022 (line Public support percentage from 2021 Section D. Computation of Investigation 1975.	Support Perc ne 8, column (f) d Schedule A, Part II ment Income	entage ivided by line 1 I, line 15	3, column (f))		15 16	- 0
c 11 12 13 14 Se 15 16 Se 17	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First 5 years. If the Form 990 is for the box and stop here. Ection C. Computation of Public Public support percentage for 2022 (line Public support percentage from 2021 Section D. Computation of Investage Investment income percentage for 2020.	Support Perc ne 8, column (f) d Schedule A, Part II ment Income 22 (line 10c, colu	entage ivided by line 1 I, line 15 Percentage mn (f) divided by	3, column (f))	(f))	15 16	- 0
c 11 12 13 14 See 15 16 See 17 18	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First 5 years. If the Form 990 is for the box and stop here. ection C. Computation of Public Public support percentage for 2022 (line Public support percentage from 2021 Section D. Computation of Invest Investment income percentage from 2021 (Investment income percentage from 2021)	Support Perc be 8, column (f) d Schedule A, Part II ment Income 22 (line 10c, colu 021 Schedule A,	entage ivided by line 1 II, line 15 Percentage mn (f) divided by Part III, line 17	3, column (f))	(f))	15 16 17 18	▶□
c 11 12 13 14 See 15 16 See 17 18	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First 5 years. If the Form 990 is for the box and stop here. Public support percentage for 2022 (line) Public support percentage from 2021 Section D. Computation of Invest Investment income percentage from 2011 (1978) Investment income percentage from 2013 (1978) 33 1/3% support tests-2022. If the o	Support Perc be 8, column (f) d Schedule A, Part III ment Income 22 (line 10c, colu 021 Schedule A, rganization did no	entage ivided by line 1 II, line 15 Percentage mn (f) divided b Part III, line 17 ot check the box	3, column (f))	(f))	15 16 17 18 an 33 1/3%, and lin	e 17 is not more
c 11 12 13 14 Se 15 16 Se 17 18 19a	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11, and 12.). First 5 years. If the Form 990 is for the box and stop here. Ection C. Computation of Public Public support percentage for 2022 (line Public support percentage from 2021 Section D. Computation of Invest Investment income percentage from 2031 1/3% support tests-2022. If the othan 33 1/3%, check this box and stop	Support Perc be 8, column (f) d Schedule A, Part III ment Income 22 (line 10c, colu 021 Schedule A, rganization did no here. The organi	entage ivided by line 1 II, line 15 Percentage mn (f) divided b Part III, line 17 ot check the box zation qualifies	3, column (f))	(f))	15 16 17 18 an 33 1/3%, and lin	e 17 is not more

2

За

3b

3с

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b Schedule A (Form 990) 2022

Part IV Supporting Organizations

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

12d, of Fart 1, complete Sections A and b, and complete Fart V.)		
Section A. All Supporting Organizations		
	Yes	No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section		

509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described

in section 509(a)(1) or (2).

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.

b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the

amendment to the organizing document).

complete Part I of Schedule L (Form 990).

the organization had excess business holdings).

provide detail in Part VI.

answer line 10b below.

organization's organizing document?

7

determination.

the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

checked box 12a or 12b in Part I, answer lines 4b and 4c below.

supervised by or in connection with its supported organizations.

organization's supported organizations? If "Yes," provide detail in Part VI.

contributor? If "Yes," complete Part I of Schedule L (Form 990).

organization had an interest? If "Yes," provide detail in Part VI.

b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or

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)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to

Did the organization add, substitute, or remove any supported organizations during the tax year? 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

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes,"

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial

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))? If "Yes,"

Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

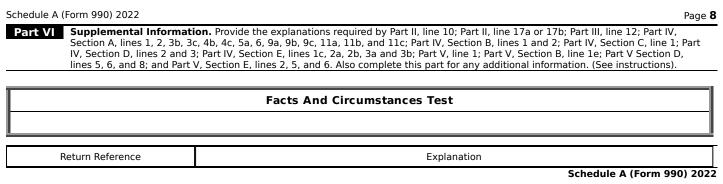
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

P	art IV	Supporting Organizations (continued)			
				Yes	No
11	Has	s the organization accepted a gift or contribution from any of the following persons?			
ā		erson who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the			
	gov	verning body of a supported organization?	11a		
k	A fa	amily member of a person described on 11a above?	11b		
c		5% controlled entity of a person described on line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part	11c		
9	<u>VI.</u> Sectio	on B. Type I Supporting Organizations		<u> </u>	
				Yes	No
1	app des act dire	the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly point or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," scribe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's ivities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove ectors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to the powers during the tax year.	1		
2	ope car	the organization operate for the benefit of any supported organization other than the supported organization(s) that erated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit ried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting ranization.	2		
5	ectio	on C. Type II Supporting Organizations			
				Yes	No
1	ead	re a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	1		
		porting organization was vested in the same persons that controlled or managed the supported organization(s).			
5	ectio	on D. All Type III Supporting Organizations			
1	tax For	the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the m 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing ruments in effect on the date of notification, to the extent not previously provided?	1	Yes	No
2	We or (re any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization intained a close and continuous working relationship with the supported organization(s).	2		
3	voi	reason of the relationship described in line 2 above, did the organization's supported organizations have a significant ce in the organization's investment policies and in directing the use of the organization's income or assets at all times ring the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
9	ectio	on E. Type III Functionally-Integrated Supporting Organizations			
1	Che	eck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ns):		
	a [The organization satisfied the Activities Test. Complete line 2 below.			
	p [The organization is the parent of each of its supported organizations. Complete line 3 below.			
	c [The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	nstruc	tions)	
2	Act	ivities Test. Answer lines 2a and 2b below.		Yes	No
	org org res	substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported anization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported ganizations and explain how these activities directly furthered their exempt purposes, how the organization was ponsive to those supported organizations, and how the organization determined that these activities constituted istantially all of its activities.			
	b Did	I the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the vanization's position that its supported organization(s) would have engaged in these activities but for the organization's	2a		
		olvement.	2b		
3	Par	ent of Supported Organizations. Answer lines 3a and 3b below.	_		
		the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of	3a		

Par	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganiza	ations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying true instructions. All other Type III non-functionally integrated supporting organizations.			
	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	Adjusted Net Income (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):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
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	Minimum Asset Amount (add line 7 to line 6)	8		

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	Minimum Asset Amount (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 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	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

Section D - Distributions		Current Year
		Current rear
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6 Other distributions (describe in Part VI). See instructions	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	8	
9 Distributable amount for 2022 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	
Section E - Distribution Allocations (see instructions) (i) (ii) Underdistributions Pre-2022	ions	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6		
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required explain in Part VI). See instructions.		
3 Excess distributions carryover, if any, to 2022:		
a From 2017		
b From 2018		
c From 2019		
d From 2020		
e From 2021		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2022 distributable amount		
i Carryover from 2017 not applied (see instructions)		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4 Distributions for 2022 from Section D, line 7:		
a Applied to underdistributions of prior years		
b Applied to 2022 distributable amount		
c Remainder. Subtract lines 4a and 4b from line 4.		
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.		
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.		
7 Excess distributions carryover to 2023. Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2018		
b Excess from 2019		
c Excess from 2020		
d Excess from 2021		
e Excess from 2022		hedule A (Form 990) (2022



efile GRAPHIC print Submission Date - 2023-04-04 DLN: 93493094007073 **Supplemental Information Regarding** OMB No. 1545-0047 SCHEDULE G (Form 990) **Fundraising or Gaming Activities** 2022 Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Open to Public Department of the Attach to Form 990 or Form 990-EZ. Inspection Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization **Employer identification number** Psalm68Five Ministries 47-3375486 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations **e** Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes 🗸 No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No 1 10 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990) 2022

Cat. No. 50083H

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

	edule G (Form 990) 2022				Page 2
Pa	Fundraising Events. Complethan \$15,000 of fundraising egross receipts greater than \$15,000 of fundraising egross receipts greater than \$15,000 of fundraising egross receipts greater than \$15,000 of fundraising experiences.	event contributions and			
	у. сострас у. сострас у.	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. (c))
Revenue					
Seve					
_					
	1 Gross receipts				
	2 Less: Contributions				
	line 2)		<u> </u>		<u> </u>
	4 Cash prizes				
ses	5 Noncash prizes				
Direct Expenses	6 Rent/facility costs				
Q	8 Entertainment				
irec	9 Other direct expenses				
ш	10 Direct expense summary. Add lines 4 t	hrough 9 in column (d)			
	11 Net income summary. Subtract line 10	from line 3, column (d)			
Pa	Gaming. Complete if the org on Form 990-EZ, line 6a.	anization answered "Y	es" on Form 990, Part I\	/, line 19, or reported	more than \$15,000
1e	on roini 330 Ez, inic ou.	(a) Pingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add col.
Revenue		(a) Bingo	bingo/progressive bingo	(c) Other gaining	(a) through col.(c))
Re	1 Gross revenue				
ses	2 Cash prizes				
Direct Expense	3 Noncash prizes				
Ψ.					
Sire	4 Rent/facility costs				
	5 Other direct expenses	□ Vos %	☐ Yes %	Yes %	
	6 Volunteer labor	☐ Yes <u>%</u>	No	☐ Yes <u>%</u>	
		_			
	7 Direct expense summary. Add lines 2 t	hrough 5 in column (d)		•	
	8 Net gaming income summary. Subtrac	t line 7 from line 1, colum	nn (d)	<u> </u>	
9	Enter the state(s) in which the organization				
a b	Is the organization licensed to conduct g If "No," explain:	aming activities in each o			☐ Yes ☐ No
					1
10a	Were any of the organization's gaming lie				
b	If "Yes," explain:				
				Schodulo G (Form 990) 2022

Sche	dule G (Form 990) 2022						Page 3
11	Does the organization conduct gar	ming activities with nonmember	s?		☐ Yes	□ No	
12	Is the organization a grantor, beneformed to administer charitable ga		member of a partnership or other entit		☐ Yes	□No	
13	Indicate the percentage of gaming	activity conducted in:			_ 103	_ 110	
а	The organization's facility .			. 13a			%
b	An outside facility			. 13b			%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:							
	Name •						
15a	Address		m the organization receives gaming				
13a	revenue?				☐ Yes		
b	If "Yes," enter the amount of gami amount of gaming revenue retains		anization ► \$a	and the	∪ res	∪ NO	
c	If "Yes," enter name and address of	of the third party:					
	Name						
	Address						
16	Gaming manager information:						
	Name •						
	Gaming manager compensation \(\stacksquare{5} \)						
	Description of services provided	•					
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions:						
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?						
b	Yes UNO						
in the organization's own exempt activities during the tax year > \$							
Par			ions required by Part I, line 2b, col le. Also provide any additional info				i,
	Return Reference		Explanation				
				Schedule G (Fo	orm 990) 20	022	

