# 990

# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**Open to Public** 

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service 2012, and ending September 30 20 13 For the 2012 calendar year, or tax year beginning October 1 D Employer identification number Check if applicable: C Name of organization World Missionary Press, Inc 35-1076405 Doing Business As Address change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Name change 574-831-2111 Initial return P. O. Box 120 City, town or post office, state, and ZIP code Terminated G Gross receipts \$ 5.520.957 Amended return New Paris, IN 46553-0120 H(a) Is this a group return for affiliates? ☐ Yes ✓ No Application pending F Name and address of principal officer: Harold E. Mack, president H(b) Are all affiliates included? ☐ Yes ✓ No P. O. Box 120, New Paris, IN 46553-0120 If "No," attach a list. (see instructions) Tax-exempt status: √ 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or H(c) Group exemption number ▶ Website: ▶ www.wmpress.org Form of organization: ✓ Corporation Trust Association ☐ Other ▶ L Year of formation: M State of legal domicile: Briefly describe the organization's mission or most significant activities: World Missionary Press prints topical Scripture booklets, Bible study booklets, salvation coloring books, and New Testaments in various languages for free distribution around Activities & Governance the world. Materials have been printed in 341 languages and gave gone into 211 nations and territories. This year 83,679,285 items were printed. Each 48-page small-size topical Scripture booklet cost about 3.32 cents to produce. 2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . . . 12 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 10 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 50 6 Total number of volunteers (estimate if necessary) . . . . . 1,000 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Current Year** 8 Contributions and grants (Part VIII, line 1h) . . . 3,763,708 5,389,438 Revenue 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . 4,012 5,870 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 27.833 23,529 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 3,791,249 5,423,141 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . . 0 0 Benefits paid to or for members (Part IX, column (A), line 4) . . . . . . 0 0 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,128,332 1,224,894 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,400,952 2,958,572 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 4,183,466 3,529,284 Revenue less expenses. Subtract line 18 from line 12 . 1,239,675 19 261,965 End of Year **Beginning of Current Year** 20 Total assets (Part X, line 16) 1,823,746 3,089,566 21 Total liabilities (Part X, line 26) . . . 294,765 320,910 22 Net assets or fund balances. Subtract line 21 from line 20 1,528,981 2,768,656 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Date Here Victoria R.

Preparer's signature

Check | if

self-employed

Firm's EIN ▶

PTIN

Yes No

May the IRS discuss this return with the preparer shown above? (see instructions)

Type or print name and title

Print/Type preparer's name

Firm's name

Paid

Preparer

**Use Only** 

Date

Part	<b></b>
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	The Articles of Incorporation include as our mission: To cause, encourage, and promote throughout the world, the writing,
	publishing, printing and distribution of Scripture booklets, gospel literature and Bible studies, which convey the message of the gospel of Jesus Christ in various languages. Not to be sold, but distributed free to the recipients.
	guspei of Jesus Cilitat III various languages. Not to be soid, but distributed free to the recipients.
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.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, it any, for each program convice reported.
4a	(Code: N/A ) (Expenses \$ 2,719,346 including grants of \$ 0 ) (Revenue \$ 0 )
	(, (, (, (
	PRODUCTION COSTS include printing of 76,404,116 48-page Scripture booklets; 6,168,996 Bible-study size booklets; 925,565
	salvation coloring books; and 180,608 New Testaments for free distribution worldwide, of which 13.2% of the volume printed was
	contract printing, including printing in 6 foreign countries.
	Scripture booklets have now been produced in a total of 341 languages (4 new languages added this year).
	Because of high-speed, high-volume operation, using hundreds of volunteers and modest staff wages, the total average cost to
	produce a 48-page size booklet is 3.3 cents.
4b	(Code: N/A ) (Expenses \$ 915,799 including grants of \$ 0 ) (Revenue \$ 0 )
	SHIPPING of Scriptural material printed (above) destined for 118 nations during the year. Besides many small orders sent,
	152,707 ten-lb. boxes were shipping by USPS, UPS, and many freight shipments, including 39 ship containers (19 forty-foot
	containers and 20 twenty-foot containers). WMP has 80+ volunteer national coordinators in 74 countries.
	Literature has gone into 211 nations and territories in our 52-year history.
	Elicitatio neo gono into 211 hadrono ana tontonoo m our de-yeur matory.
4-	(Code: \(\sigma_{\text{Code}}\)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
-	
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 3.635.145

3,635,145

Part I	V 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 Schedule A	1	<b>√</b>	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	✓	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
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? If "Yes," complete Schedule C, Part II	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		<b>√</b>
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		1
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, VIII, IX, or X as applicable.	10		•
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	1	
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
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i> .	11e		
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	<b>√</b>	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
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 assistance to any organization or entity located outside the United States? 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 assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<b>√</b>
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	18		<b>√</b>
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	19		<b>▼</b>
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		<b>√</b>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		ļ .

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<b>√</b>
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		<b>√</b>
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 25	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		✓
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		<b>√</b>
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		<b>√</b>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
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 III	27		<b>√</b>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	✓	<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>√</b>
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		1
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		1
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
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? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R,</i>			
20	Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	

#### Form 990 (2012) Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance $\checkmark$ Check if Schedule O contains a response to any question in this Part V . 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . 1a 23 1b b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . 0 Did the organization comply with backup withholding rules for reportable payments to vendors and 1c 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 50 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) . . . 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," 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 4a b If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 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? . . . . . . . b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . . . . 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7c If "Yes," indicate the number of Forms 8282 filed during the year . . . . . . . . . . . d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g 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 and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . . . . . . . . . . . 8 9 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? . . . . . . 9a Did the organization make a distribution to a donor, donor advisor, or related person? . . . 9b 10 Section 501(c)(7) organizations. Enter: 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 11 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 11b 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. . . 12b Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Is the organization licensed to issue qualified health plans in more than one state? 13a

Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which 

14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . .

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a

14b

13b

13c

Form 99	0 (2012)			Page 6
Part '		and i	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			ons. ✓
Section	Check if Schedule O contains a response to any question in this Part VI	• •		<u> </u>
00011	517A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year   1a 12			
	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.			
р 2	Enter the number of voting members included in line 1a, above, who are independent . Line 10 Line 10 Line 10 Line 11 Line 11 Line 11 Line 12 Line 12 Line 12 Line 12 Line 12 Line 14 Line 14 Line 15 Line 15 Line 16 Line 16 Line 16 Line 17 L	2	✓	
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		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	✓	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5 6	/	<b>√</b>
6 7a	Did the organization have members or stockholders?	0	<b>V</b>	
	one or more members of the governing body?	7a	✓	
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		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
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		<b>√</b>
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C		
		10	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		<b>✓</b>
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	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		✓
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-	,	
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a 12b	<b>√</b>	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	✓	
14 15	Did the organization have a written document retention and destruction policy?	14	✓	
а	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	15a	<b>√</b>	
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?	16a		J
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			•
60-1.	organization's exempt status with respect to such arrangements?	16b		
17	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Indiana (See Schedule O for addition 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.			
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 and financial statements available to the public during the tax year.	of inte	rest p	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	)	

organization: ► Mrs. Marie C. Mack, Treasurer, 19168 County Road 146, New Paris, IN (574) 831-2111, Ext. 221

# 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 employees."
- 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 nor any related organization compensated any current officer, director, or trustee.

Oncok this box is ricitally the organization no	l any rollars	<u> </u>	<u> </u>	((	<b>C)</b>	Jpo.			comon, amouto	,, с. п. с. с.		
(A)	(B)	Position		Position (do not check more than one						(D)	(E)	(F)
Name and Title	Average					tnan o is both		Reportable	Reportable	Estimated		
	hours per					or/truste		compensation	compensation from			
	week (list any hours for	우등	sul	Off	<u>~</u>	먪	Fo	from the	related organizations	other compensation		
	related	divid	ti ut	Officer	g	ploy	Former	organization	(W-2/1099-MISC)	from the		
	organizations below dotted		ions		Key employee	8 6	•	(W-2/1099-MISC)		organization and related		
	line)	l Z	함		yee	嚴				organizations		
		6	Institutional trustee			Highest compensated employee						
				_	_	8						
(1) Jay E. Benson, President (deceased 1/5/2013)	43.3											
Director (until deceased)	T	✓		<b>√</b>				22,062	o	3,828		
(2) Victoria R. Benson, Vice-president	34.3											
Director/Asst secretary/Acting pres to 9/14/13		✓		✓				17,081	o	3,989		
(3) John Burnham	.50											
Director		✓							o	0		
(4) Dean Crowder	2.31											
Director		✓							o	o		
(5) Wes Culver, Board chairman	.70											
Director		✓		✓					0	0		
(6) David Lehman	.54											
Director		✓							0	0		
(7) Harold E. Mack, President (elected 9-14-2013)	47.1											
Director		1	L	✓				24,655	o	18,113		
(8) Robert Moore	.58	]										
Director		✓							0	0		
(9) Robert Parker, Vice-chairman	1.0											
Director		✓	L	✓					o	0		
(10) Robert Riegsecker	.50											
Director		1							0	0		
(11) Sharon Schaubert	.62		l									
Director		/			L				0	0		
(12) Michael Weaver	.42											
Director		1	<u> </u>						0	0		
(13) Tim Yoder, Secretary	2.0		1									
Director		✓	匚	✓					0	0		
(14) Marie C. Mack, Treasurer	34.6											
(not a director)		L	L_	✓	L			16,993	0	0		

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees			lighes	st C	ompensated E	mployees (d	continu	red)
	(A) Name and title	<b>(B)</b> Average hours per week (list any	er officer and a director/trustee		an ee)	(D)  Reportable compensation from	(E)  Reportabl compensation related		(F) Estimated amount of other			
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-M		compensation from the organization and related organizations
(15)												-
(16)												
(17)												
(18)												
(19)												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
1b c	Sub-total			•			 	<b>&gt; &gt;</b>	80,791		0	25,930 0
2	Total rumber of individuals (including bureportable compensation from the organ	t not limited					abov	e) w	/ho received m			25,930 O of
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc							oloyee, or high			Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$	150	,000	0? /	f "Ye	s,"	complete Sch			e
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co	ompe	nsa	tion	ı fro	m an	y ur	related organi	zation or inc		
Secti	on B. Independent Contractors											J J   V
1	Complete this table for your five highest compensation from the organization. Repyear.											
	(A) Name and business add	Iress							(B) Description of s	services		(C) Compensation
	NONE											n/a
								F				
2	Total number of independent contractor received more than \$100,000 of compen							o th	nose listed ab	ove) who		

Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII. . (B) Related or exempt function revenue (C) Unrelated business (D) Revenue excluded from tax (A) Total revenue under sections 512, 513, or 514 Contributions, Gifts, Grants and Other Similar Amounts Federated campaigns . . . 1a 0 1b Membership dues . . . . 0 Fundraising events . . . . 1c 0 Contributions, Gifts, 1d d Related organizations . . . 0 Government grants (contributions) 1e 0 All other contributions, gifts, grants, and similar amounts not included above 1f 5,389,438 Noncash contributions included in lines 1a-1f: \$ 42,689 Total. Add lines 1a-1f. 5,389,438 Program Service Revenue **Business Code** 2a NONE 0 0 0 0 b 0 0 0 0 0 0 0 0 0 0 0 d 0 0 0 0 f All other program service revenue. 0 0 0 0 **Total.** Add lines 2a–2f . . . . . . . . . . . . g 0 Investment income (including dividends, interest, 3 and other similar amounts) . . . . . . . 7,135 O 0 7,135 4 Income from investment of tax-exempt bond proceeds ▶ 0 0 0 0 5 Royalties 2,730 0 0 2,730 (i) Real (ii) Personal 6a Gross rents . . 48,192 Less: rental expenses 52,673 Rental income or (loss) (4,481)Net rental income or (loss) d (4,481)0 0 (4,481)Gross amount from sales of (i) Securities (ii) Other assets other than inventory 29,880 14,598 Less: cost or other basis and sales expenses . 30,414 15,329 Gain or (loss) . . (534)(731)Net gain or (loss) (1,265)0 0 (1,265)Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 . . . . . 0 **b** Less: direct expenses . . . . 0 c Net income or (loss) from fundraising events 0 0 9a Gross income from gaming activities. See Part IV, line 19 . . . . . a 0 b Less: direct expenses . . . . 0 c Net income or (loss) from gaming activities . 0 10a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold . . . 0 Net income or (loss) from sales of inventory . 0 0 Miscellaneous Revenue **Business Code** 11a Sale of scrap from operations 900099 28,814 28,814 0 0 b Misc income re operations 900099 770 770 0 0 С 0 0 0 0 All other revenue . . . . d 0 0 0 0 **Total.** Add lines 11a-11d . . . . . . е 29,584 12 Total revenue. See instructions. . .

5,423,141

29,584

4,119

0

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).

Sectio	n 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respon-				(D)
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0	0	50.000	0.005
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	104,678	45,965	52,028	6,685
7		0	0	0	0
7 8	Other salaries and wages	783,554	546,116 0	174,467	62,971
9	Other employee benefits	271,293	229,146	35,574	6,573
10	Payroll taxes	65,369	43,658	16,547	5,164
11	Fees for services (non-employees):				
а	Management	0	0	0	0
b	Legal	0	0	0	0
С	Accounting	11,890	0	11,890	0
d	Lobbying	0	0	0	0
е	Professional fundraising services. See Part IV, line 17	0	1000		0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	10.251	2.005	1 651	E 715
12	Advertising and promotion	10,351 65,913	2,985	1,651 6,796	5,715 59,117
13	Office expenses	33,450	9,340	21,961	2,149
14	Information technology	24,643	6,428	11,724	6,491
15	Royalties	224	224	0	0,401
16	Occupancy	81,995	65,870	11,814	4,311
17	Travel	18,326	3,693	2,681	11,952
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	. 0	0
19	Conferences, conventions, and meetings .	7,059	468	371	6,220
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	75,769	65,094	6,335	4,340
23	Insurance	0	0	0	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) are such list line 24e.				
gggton 1	(A) amount, list line 24e expenses on Schedule O.)				
a	Paper for printing Scriptures in-plant	1,495,221	1,495,221	0	0
b	Contract printing of Scriptures	408,983	408,983	0	0
c d	Shipping & distribution of Scriptures Equipment maintenance/parts and tools	667,154	667,154	0	0
e e	All other expenses Miscellaneous	44,677	40,160	3,360	
25	Total functional expenses. Add lines 1 through 24e	12,917	4,640	6,475	
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)	4,183,466	3,635,145	363,674	184,647

Part X Balance Sheet

a was	art X	Balance Sheet  Check if Schedule O contains a response to any question in this Part X			
		Official in deficial contains a response to any question in this rate.	(A)	İ	(B)
			Beginning of year		End of year
	1	Cash—non-interest-bearing	130	1	130
	2	Savings and temporary cash investments	489,034	2	1,427,495
	3	Pledges and grants receivable, net	18,000	3	0
	4	Accounts receivable, net	3,014	4	1,189
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	0
	6	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			
sts		organizations (see instructions). Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
V	8	Inventories for sale or use	97,933	8	168,351
	9	Prepaid expenses and deferred charges	141,121	9	200,011
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	2,301,133	956,492	100	1 102 070
	11	Less: accumulated depreciation		11	1,183,870
	12	Investments—other securities. See Part IV, line 11		12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	118,022		108,520
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	1,823,746		3,089,566
	17	Accounts payable and accrued expenses	120,490		170,579
	18	Grants payable	0	18	0
	19	Deferred revenue	1,136	19	2,635
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
iab		disqualified persons. Complete Part II of Schedule L	0	22	0
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	56,167	24	40,167
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	116,972	25	107,529
	26	Total liabilities. Add lines 17 through 25	294,765	26	320,910
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	1,242,367	27	2,315,731
Ba	28	Temporarily restricted net assets	286,614	28	452,925
nd	29	Permanently restricted net assets	0	29	0
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds	N/A	30	N/A
Net Assets or	31	Paid-in or capital surplus, or land, building, or equipment fund	N/A	31	N/A
t A	32	Retained earnings, endowment, accumulated income, or other funds.	N/A	32	N/A
Ne	33	Total net assets or fund balances	1,528,981	33	2,768,656
	34	Total liabilities and net assets/fund balances	1,823,746		3,089,566

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			23,141
2	Total expenses (must equal Part IX, column (A), line 25)	2		4,18	3,466
3	Revenue less expenses. Subtract line 2 from line 1	3		1,23	9,675
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,52	8,981
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		2,76	8,656
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				Ш
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other	1-1	_		
	If the organization changed its method of accounting from a prior year or checked "Other," exp Schedule O.	nain	in.		
_					,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				<b>V</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both:	ilea (	וכ		
	•				
<b>L</b>	Separate basis Consolidated basis Both consolidated and separate basis		. 2b	,	
b	Were the organization's financial statements audited by an independent accountant?	d on	-	V	
	separate basis, consolidated basis, or both:	u on	a		
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	oreial	nt		
Ü	of the audit, review, or compilation of its financial statements and selection of an independent account			./	
	If the organization changed either its oversight process or selection process during the tax year, exp			<b>-</b>	
	Schedule O.	Jiani	'''		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	orth	in		
Ju	the Single Audit Act and OMB Circular A-133?		. 3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	ao th			<del>                                     </del>
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		3b		
				m <b>99</b> 0	(2012)

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

20**12** 

**Employer identification number** Name of the organization World Missionary Press, Inc. 35-1076405 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ✓ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF ☐ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary. or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I. II. and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990; or check the box on line H of its Form 990-EZ or on

Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Employer identification number
World Missionary Press, Inc. 35-1076405

AAOI IO IAI	issionally F1635, inc.		
Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1	Business group  (Name and address not subject to public inspection)	\$500,000	Person  Payroll  Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Estate  (Name and address not subject to public inspection)	\$ <u>964,516</u>	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Non-profit organization  (Name and address not subject to public inspection)	\$286,000	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Individual (Name and address not subject to public inspection)	\$ 415,000	Person  Payroll  Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Estate (Name and address not subject to public inspection)	\$ <u>111,625</u>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Individual couple (Name and address not subject to public inspection)	\$200,000	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)

Name of organization

World Missionary Press, Inc.

Employer identification number
35-1076405

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.							
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		     \$						
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$ \$						
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						

Name of or	ganization				Employer identification number
	ssionary Press, Inc.				35-1076405
Part III	Exclusively religious, charitable, e that total more than \$1,000 for the For organizations completing Part III contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions.	e <b>year.</b> Complete col I, enter the total of ex he year. (Enter this in	umns <b>(a)</b> through <b>(</b> clusively religious, formation once. Se	e) and the charitable	following line entry. , etc.,
(a) No. from	(b) Purpose of gift	(c) Use		(d) Des	scription of how gift is held
Part I					
		(e) Trans	fer of gift		
-	Transferee's name, address, a	and ZIP + 4	Relation	ship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) De:	scription of how gift is held
-		(a) Trans	fer of gift		
	Transferee's name, address, a	-	ship of tra	nsferor to transferee	
(a) No.					
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) De	scription of how gift is held
-		(e) Trans	fer of gift		
_	Transferee's name, address, a	Relation	nship of tra	nsferor to transferee	
(a) No. from		T		1	
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) De	scription of how gift is held
+		(e) Trans	fer of gift		
	Transferee's name, address, a	•	nship of tra	nsferor to transferee	
					***************************************
			***************************************		

#### SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

**Employer identification number** Name of the organization World Missionary Press, Inc. 35-1076405 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . 1 Aggregate contributions to (during year). 2 3 Aggregate grants from (during year) . . 4 Aggregate value at end of year . . . . 5 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 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to 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 an 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 a Total number of conservation easements . . . . . 2a Total acreage restricted by conservation easements . . . . . . . . . . . . Number of conservation easements on a certified historic structure included in (a) . . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 ☐ Yes ☐ No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, 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) 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" to 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. b 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: 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: 

Part								
3	Using the organization's acquisition, accollection items (check all that apply):	cession, and oth	ner recor	ds, chec	k any of the	e follov	ving that are a	significant use of its
а	☐ Public exhibition		<b>d</b> [	Loan	or exchang	je prog	rams	
b	☐ Scholarly research		е [	Other				
С	☐ Preservation for future generations							
4	Provide a description of the organization XIII.	n's collections a	nd expla	in how th	ney further	the org	ganization's exe	empt purpose in Part
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?   Yes No							
Part								
1000000	line 9, or reported an amount of							,
1a	Is the organization an agent, trustee, c				r contribut	ions or	other assets	not
	included on Form 990, Part X?							
b	If "Yes," explain the arrangement in Part	XIII and comple	te the fo	llowina ta	able:			
	3 - · · · · · · · · · · · · · · · · · ·							Amount
С	Beginning balance					10	;	
d	Additions during the year					10	1	
е	Distributions during the year					16	9	
f	Ending balance					11	F	
2a	Did the organization include an amount							. Yes No
b	If "Yes," explain the arrangement in Part	XIII. Check here	if the ex	planatio	n has been	provide	ed in Part XIII	$\square$
Par	Endowment Funds. Complete	e if the organiza	ation an	swered				
		(a) Current year	(b) Prid	or year	(c) Two year	rs back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and							
	losses							
d	Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the	current year en	d balanc	e (line 1g	, column (a	)) held	as:	
а	Board designated or quasi-endowment	<b></b>	%					
b	Permanent endowment	_%						
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c	%						
	The percentages in lines 2a, 2b, and 2c	should equal 10	0%.					
3a	Are there endowment funds not in the p	oossession of th	e organi:	zation tha	at are held	and ac	Iministered for	
	organization by:							Yes No
	(i) unrelated organizations							. 3a(i)
	(ii) related organizations							. 3a(ii)
b	If "Yes" to 3a(ii), are the related organiza							. 3b
4	Describe in Part XIII the intended uses o							
Part						2047 2000		0.0000 1000 1000
	Description of property	(a) Cost or oth (investme			or other basis ther)		Accumulated epreciation	(d) Book value
1a	Land		32,175		134,859			167,034
b	Buildings		608,893		890,275		871,554	627,614
С	Leasehold improvements		0		0		0	0
d	Equipment		0		1,098,716		726,604	372,112
e	Other		3,957		198,860		185,707	17,110
Total.	Add lines 1a through 1e. (Column (d) mus	st equal Form 99	90, Part )	K, columr	n (B), line 10	O(c).)	▶	1,183,870

Part VII	Investments-Other Securities	. See Form 990, Part X,	line 12.	AND THE RESERVE THE PARTY OF TH
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year n	
(1) Financial	derivatives			
. ,	eld equity interests			
(3) Other				
(A)			*	
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H) (I)				
	A mount or good Forms 000 Port V and (D) line 101		Market and the second s	
Part VIII	nust equal Form 990, Part X, col. (B) line 12.) Investments—Program Related	d Soc Form OOD Bort V	line 12	
Relate to Advice or and the design of the last			T	l. sation.
	a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year r	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) (10)				
	o) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Pa	ert X line 15		
I dit ix		a) Description		(b) Book value
(1) Present	value of reinsured annuities (providing	<del>.</del>	a Part V holow)	108,490
	eld at fair value	income to cover nabilities in	T Fait A below)	30
(3)	sid de fair value			30
(4)				
(5)				
(6)				
(7)		***************************************		
(8)				
(9)				
(10)				
Total. (Colui	mn (b) must equal Form 990, Part X, c			108,520
Part X	Other Liabilities. See Form 990	, Part X, line 25.		,
1.	(a) Description of liability	(b) Book value		
	income taxes			
	annuity obligation—current	4,449		
(3) Est. gift	annuity obligation—long-term	103,080		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
	n) must equal Form 990, Part X, col. (B) line 25.)	107,529		
2. FIN 48 (AS	C 740) Footnote. In Part XIII, provide the	text of the footnote to the org	ganization's financial statements tha	t 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 . . . . . .

-	le D (Form 990) 2012	Page 4
Pari		
1	Total revenue, gains, and other support per audited financial statements	1 5,475,814
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains on investments	
b	Donated services and use of facilities	
c	Recoveries of prior year grants	
d	Other (Describe in Part XIII.)	
е	Add lines 2a through 2d	2e 52,673
3	Subtract line 2e from line 1	3 5,423,141
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 0	
b	Other (Describe in Part XIII.)	
С	Add lines 4a and 4b	4c 0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 5,423,141
Part		
1	Total expenses and losses per audited financial statements	1 4,236,139
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
а	Donated services and use of facilities	
b	Prior year adjustments	
С	Other losses	
d	Other (Describe in Part XIII.)	
е	Add lines 2a through 2d	2e 52,673
3	Subtract line <b>2e</b> from line <b>1</b>	3 4,183,466
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	Prince
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 0	
b	Other (Describe in Part XIII.)	
С	Add lines <b>4a</b> and <b>4b</b>	4c 0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 4,183,466
Part	XIII Supplemental Information	
Comp	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, l	art IV, lines 1b and 2b;
	, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	
inform	nation.	
Part X	, Line 2. Our financial statements include a footnote regarding liability for uncertain tax positions under FIN	48. The footnote states:
"The (	Organization follows the account guidance for uncertainty in income taxes. The standard clarifies the account	nting for uncertainty in
incom	e taxes by prescribing the recognition threshold a tax position is required to meet before being recognized	in the financial statements.
	7.1	
The a	uidance also addressed derecognition, classification, interest and penalties on income taxes, and accounting	ig in interim periods.
		A
Manad	gement believes the Organization has no material uncertainties in income taxes."	

Part XII, Line 2d. Rental expenses, Form 990 Part VIII, Line 6b.

Part XIII, Line 2d. Rental expenses, Form 990 Part VIII, Line 6b.

	Schedule D (Form 990) 2012 Page <b>5</b>				
Part XIII	Supplemental Information (continued)	_			
<u></u>					
N/A (se	previous page)				

#### SCHEDULE F (Form 990)

# **Statement of Activities Outside the United States**

OMB No. 1545-0047

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

Employer identification number Name of the organization World Missionary Press, Inc. 35-1076405

Form 990, Part IV, line		es Outside t	the United States. Comp	olete if the organization ans	wered "Yes" to
1 For grantmakers. Does the assistance, the grantees' eligrants or assistance?					
2 For grantmakers. Describe assistance outside the Unite		the organizati	on's procedures for moni	toring the use of its grant	ts and other
3 Activities per Region. (The formula)	llowing Part	I. line 3 table o	can be duplicated if addition	nal space is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) Central America/Caribbean	0	0	program services	shipping of Scriptures	2,497
(2) East Asia & Pacific	0	0	program services	printing of Scriptures	110,959
(3) East Asia & Pacific	0	0	program services	shipping of Scriptures	1,772
(4) Europe	0	0	program services	shipping of Scriptures	7,692
(5) Middle East & North Africa	0	0	program services	printing of Scriptures	1,250
(6) North America (Mexico)	0	0	program services	shipping of Scriptures	9,759
(7) Russia & NIC	0	0	program services	shipping of Scriptures	1,750
(8) South America	0	0	program services	shipping of Scriptures	44,538
(9) South Asia	0	0	program services	printing of Scriptures	141,109
(10) South Asia	0	0	program services	shipping of Scriptures	16,734
(11) Sub-Saharan Africa	0	0	program services	shipping of Scriptures	59,464
(12) Sub-Saharan Africa	0	0	program services	travel to & from region	1,208
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	0	0			398,732
<b>b</b> Total from continuation sheets to Part I		_			
c Totals (add lines 3a and 3b)	0	0			398,732

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance
1)							
2)							
3)							
1)							
5)							
6)							
7)							,
3)							
9)							
10)							
11)							
12)							
13)							
14)							
15)							
16)							

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	of
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)			<del></del>			
(18)						

Page	4

Part	IV	Foreign Forms		
1	the d	the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign poration (see Instructions for Form 926)	☐ Yes	☑ No
2	may Rece	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and eipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a Owner (see Instructions for Forms 3520 and 3520-A)	☐ Yes	☑ No
3	the d	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To ain Foreign Corporations. (see Instructions for Form 5471)	☐ Yes	☑ No
4	qual <i>Infor</i>	the organization a direct or indirect shareholder of a passive foreign investment company or a lified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, rmation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing d. (see Instructions for Form 8621)	☐ Yes	☑ No
5	the	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain sign Partnerships. (see Instructions for Form 8865)	☐ Yes	☑ No
6	"Yes	the organization have any operations in or related to any boycotting countries during the tax year? If s," the organization may be required to file Form 5713, International Boycott Report (see Instructions Form 5713)	☐ Yes	☑ No

#### Part V

#### **Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Part I, Line 3, column (f) — Program services, printing Scriptures
World Missionary Press at times finds it necessary to outsource the printing of its Scriptural materials to printers in foreign countries.
Quotes are sought, and at the time of approval of the project(s), half the funds are transmitted, either directly to the foreign organization
or to its U.S. base for forwarding. Upon completion of the project(s) and receipt of an invoice (and subsequently, sample copies of the
printed pieces), the balance of the payment is remitted. The Scripture booklets, Bible studies, or salvation coloring books are supplied
to local churches and ministries free of charge for free distribution in these nations.
Part I, Line 3, column (f) — Program services, shipping Scriptures
When warranted by a widespread need for WMP Scriptural materials within a country, WMP ships pallets and 20-ft. or 40-ft. containers
from the plant in New Paris. For ministries who are willing and able to import materials into their countries and coordinate distribution of the
contents to other ministries on a volunteer basis, we reimburse the expenses of clearing the container through customs, transporting it to
their location, and the direct expenses of distribution within their countries incurred on behalf of WMP. We may advance funds needed
immediately upon arrival of the container, but we require documentation of expenses: copies of paid invoices and customs documents. For
further reimbursement, we require itemized monthly reports of expenses, the number of 10-lb boxes dispersed, and the number of boxes
remaining in their inventory. In some instances, the container itself is purchased for them to keep for warehousing materials.
Part I, Line 3, column (f) — Program services, travel by WMP personnel to and from the region
WMP personnel periodically travel to selected countries of the world where its materials are printed or distributed. Overseas trips require
Board approval on a case by case basis. These trips are generally funded by contributions restricted for that purpose. This year a trip was
made in March, 2013, by WMP's Director of Global Distribution and WMP's Dispatch Manager to Ethiopia, Africa, at the invitation of a net-
working partner, which paid for air travel and accommodations at their Anglo-Africa regional conference. Only costs incurred directly by
WMP for this trip are given.

### **SCHEDULE M** (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

2012

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

World Missionary Press, Inc.

Employer identification number

35-1076405

Part	Types of Property					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c)  Noncash contribution  amounts reported on  Form 990, Part VIII, line 1g	Method of c noncash contrib	determining
1	Art—Works of art			, , , , ,		
2	Art—Historical treasures					
3	Art—Fractional interests					
4	Books and publications					
5	Clothing and household					
	goods			Y		
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Securities - Publicly traded	<b>√</b>	6	28,050	Ave Hi/Lo MV o	lay received
10	Securities-Closely held stock .					
11	Securities—Partnership, LLC,					
	or trust interests					
12	Securities-Miscellaneous					
13	Qualified conservation					
	contribution—Historic					
	structures					
14	Qualified conservation					
	contribution—Other					
15	Real estate—Residential					
16	Real estate—Commercial					
17	Real estate—Other					
18	Collectibles					
19	Food inventory					
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts			40.440	0 11:// 0.00/	dan and a
25	Other ► ( Gold & silver )	<b>✓</b>	2		Ave Hi/Lo MV	day received
26 27	Other ► ( Items in use ) Other ► ( Items sold )	<b>✓</b>	12+		estimated MV	
28	Other ( tells sold )		52+	709	cash received	
29	Number of Forms 8283 received	by the or	l ganization during the tax v	vear for contributions for		
	which the organization completed				29	0
						Yes No
30a	During the year, did the organiza	tion receive	e by contribution any prop	erty reported in Part I. lines	s 1-28 that	
•••	it must hold for at least three year					
	used for exempt purposes for the				*****	30a ✓
b	If "Yes," describe the arrangemen	t in Part II.				
31	Does the organization have a		stance policy that require	es the review of any no	n-standard	
	No hard shall hard				00000	31 🗸
32a	Does the organization hire or us	e third par	ties or related organizatior	ns to solicit, process, or se	_	
						32a ✓
b	If "Yes," describe in Part II.					
33	If the organization did not report a	n amount ir	o column (c) for a type of pro	operty for which column (a)	is checked,	
	describe in Part II.					

Part II	<b>Supplemental Information.</b> Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
Part I, Line	26. Donated items in use
Items in	nclude face value of postage stamps donated for office use.
Part I, Line	27. Donated items sold
Items ir	nclude weekly pastries donated by a pastry shop, valued by funds collected from staff/volunteers who eat them. Other items are
sale of alu	minum pop cans brought in by supporters and subsequently sold for recycling.
	······································

#### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

20**12** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

> Attach to Form 990 or 990-EZ.

Open to Public Inspection

**Employer identification number** 

35-1076405 **World Missionary Press, Inc.** Part I, Line 5. The number of W-2s filed for 2012 was 50; at 9-30-13 there were 47 paid employees (37 full-time and 10 part-time). Part V, Line 1a. Of the 23 forms filed, 5 were 1099-MISC; 3 were 1099-INT; and 15 were 1099-R to report payments to donors of charitable gift annuities. (WMP discontinued receiving new gift annuities in 1998.) Part VI, Line 1b. Board directors and officers Harold Mack and Victoria Benson were employees of the organization. Part VI, Line 2. Jay Benson and Victoria Benson had a family relationship. Jay Benson deceased 1/5/2013 during the fiscal period. Harold Mack and Marie Mack have a family relationship. Part VI, Line 4. The Articles of Incorporation were amended 12/3/2012 to include the sentence "This corporation is a religious corporation (a provision required by Indiana Code 23-17-3-2)." Article II, Sections 1 and 2 of the Bylaws were amended by the members on 9/14/2013 that, in determining a quorum, any member or director attending either a members meeting or a Board of Directors meeting "by means which allow all members to simultaneously hear each other during the meeting is considered to be present in person at the meeting." Part VI, Line 6. World Missionary Press is organized as a non-profit organization with members who elect directors of the governing body. Part VI, Line 7a. Members elect directors to one-year terms in the annual November members' meeting each year. Part VI, Line 11a. Instructions require answering "NO" because the copies we provide to our Board of Directors before filing with the IRS are not considered "complete" (names and addresses of donors on Schedule B are redacted for public inspection). Part VI, Line 11b. Management prepares the Form 990 subsequent to the annual independent audit and provides a draft to the chairman of the Finance and Audit Review Committee (an active CPA) for review. Copies of the final draft are e-mailed to directors before filing with the IRS and posting on the organization's website. Part VI, Line 12c. Potential conflicts of interest are monitored through annually updated questionnaires uniquely specific to (1) employees with purchasing authority and (2) Board directors, seeking to ascertain personal, family, or business relationships with each other and with vendors, or the receipt of gifts or samples of more than token value. The two employees on the Board abstain from voting when the Board approves the hourly wage for all employees. All possible conflicts of interest are reviewed. Part VI, Lines 15a and b. The Finance Committee annually reviews the hourly wage provided to all employees, without regard to position, for recommendation to the Board. The Board seeks to provide a living, but sacrificial, wage as initiated by the founders in 1961. Benefits are provided equitably to all who are eligible, including management. Comparability data is not considered relevant.

Name of the organization	Employer Identification number
World Missionary Press, Inc.	35-1076405
Part VI, Line 17. The Form 990 is required by the state in which WMP is incorporated. Copies are provided to other states in order to comply	
with charitable solicitation regulations regarding reporting or renewing registrations; e.g. AZ, HI, MN, TN, WA, WI, and WV.	
Part VI, Line 18. Forms 1023 and 990 are available free on request. Current and past years of Form 990 are	posted on WMP's website and
referenced in its annual report newsletter. Form 1023 (filed in 1964) is available on request without its original attachments.	
Part VI, Line 19. Current and past audited financial statements are posted on WMP's website, and copies are available free on request as	
as referenced in the annual report newsletter. Governing documents and conflict-of-interest policy are available on request.	
Part VII, Line 1a, column F. "Other compensation" includes employer contributions to non-taxable high-de	ductible group health insurance
premiums and limited reimbursements of out-of-pocket medical expenses in accordance	with an HRA. The vice-president
was covered under her husband's plan for part of the year; the treasurer was covered by i	ner husband's family plan.
Part VIII, Line 5. Royalties are received from mineral rights donated in 1986.	
Part VIII, Line 6. WMP makes low-rental housing available for staff and volunteers and is responsible for m	aintenance and property taxes.
Part VIII, Line 11a. Sale of scrap paper and aluminum printing plates used in operations is considered a re	covery of cost.
Part VIII, Line 11b. Miscellaneous income related to operations includes redemption credit from WMP's cr	edit card activity and is applied
toward the purchase of service and items used in operations.	
Part IX, Line 5. Compensation includes benefits (group health insurance) required by Form 990 instruction	ns. Wages are based on fiscal year.
Part IX, Line 11g. Other fees for non-employee service include payments over the year to an OSHA consul	tant who also provides safety
training, payroll services, outsourced graphic design of monthly newsletters, and profes	sional cleaning.
Part IX, Line 23. All insurance is included in other categories per Form 990 instructions: Multi-peril and lia	bility (Occupancy, Line 16); WMP-
owned vehicle (Travel, Line 17); group health insurance and workers' compensation (Em	ployee benefits, Lines 5 and 9).
Directors' and Officers' Liability Insurance is now included in WMP's multi-peril and liabil	ity policy at no separate charge.
Part X, Line 2. Funds at year-end include funds reserved for satisfying donor restrictions (see Part X, Line	28) for: purchase of a 6-color press
(purchased 10-30-13), future increased printings, upgrades in process on adjacent building	ngs purchased during the year.
Part X, Line 8. Inventories include only raw materials and printing supplies. Printed Scriptures (considere	d of no market value) are expensed.
Part X, Line 15. Other assets include the present value of reinsured gift annuities, which provide income to cover annuity obligations.	
Part X, Line 25. Other liabilities are gift annuity obligations based on the current life expectancies of annuitants.	
Part X, Line 28. Temporarily restricted net assets include (1) \$61,707 for certain printings not yet done, (2)	\$80,492 for upgrading adjacent
property purchased, (3) \$310,726 for 6-color printing press (purchased after year-end) and	related equipment. [END]