

**Return of Organization Exempt From Income Tax**

**2001**

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

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

**A** For the 2001 calendar year or tax year beginning October 1, 2001 and ending September 30, 2002

**B** Check if applicable:

- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

IB10340 \*\*\*\*\*AUTO\*\*3-DIGIT 329  
THIRD WORLD MISSIONS INC P 11 I  
885 E HALL RD B 119 S  
MERRITT IS FL 32953-8418

**D** Employer identification number: 59-2915936

**E** Telephone number: (321) 453-0350

**F** Accounting method:  Cash  Accrual  
 Other (specify) \_\_\_\_\_

**G** Web site: \_\_\_\_\_

**J** Organization type (check only one):  501(c)(3) (insert no)  4947(a)(1) or  527

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS but if the organization received a Form 990 Package in the mail it should file a return without financial data. Some states require a complete return.

**H** and **I** are not applicable to section 527 organizations

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** If "Yes" enter number of affiliates: \_\_\_\_\_

**H(c)** Are all affiliates included?  Yes  No (if "No" attach a list. See instructions.)

**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Enter 4-digit GEN: \_\_\_\_\_

**L** Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12: **3,091,550**

**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See Specific Instructions on page 16)

<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received				
	<b>a</b> Direct public support	<b>1a</b>			
	<b>b</b> Indirect public support	<b>1b</b>	396,950		
	<b>c</b> Government contributions (grants)	<b>1c</b>			
	<b>d</b> Total (add lines 1a through 1c) (cash \$ 396,950 noncash \$ _____)	<b>1d</b>			396,950
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>			
	<b>3</b> Membership dues and assessments	<b>3</b>			
	<b>4</b> Interest on savings and temporary cash investments	<b>4</b>			46,124
	<b>5</b> Dividends and interest from securities	<b>5</b>			
	<b>6a</b> Gross rents	<b>6a</b>			
	<b>b</b> Less rental expenses	<b>6b</b>			
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	<b>6c</b>			
<b>7</b> Other investment income (describe: <b>Mortgage Interest</b> )	<b>7</b>			2,561,416	
<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities	<b>8a</b>	2,577		
	(B) Other	<b>8b</b>			
		<b>8c</b>	2,577		
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	<b>8d</b>			2,577
<b>9</b> Special events and activities (attach schedule)	<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1a)	<b>9a</b>			
	<b>b</b> Less direct expenses other than fundraising expenses	<b>9b</b>			
	<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	<b>9c</b>			
<b>10a</b> Gross sales of inventory, less returns and allowances		<b>10a</b>			
	<b>b</b> Less cost of goods sold	<b>10b</b>			
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	<b>10c</b>			
<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>			84,484	
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>			3,091,550	
<b>Expenses</b>	<b>13</b> Program services (from line 44, column (B))	<b>13</b>			156,893
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>			216,418
	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>			-0-
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>			-0-
	<b>17</b> Total expenses (add lines 13 and 14, column (A))	<b>17</b>			373,312
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	<b>18</b>			2,718,238
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>			27,877,864
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	<b>20</b>			(148,248)
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	<b>21</b>			30,447,854

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**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.				
26	Other salaries and wages				
27	Pension plan contributions				
28	Other employee benefits				
29	Payroll taxes				
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees	20,698		20,698	
33	Supplies				
34	Telephone				
35	Postage and shipping				
36	Occupancy				
37	Equipment rental and maintenance				
38	Printing and publications				
39	Travel	1,829		1,829	
40	Conferences, conventions, and meetings				
41	Interest	192,631		192,631	
42	Depreciation, depletion, etc. (attach schedule)				
43	Other expenses not covered above (itemize): a				
b	See attached schedule	158,154	156,893	1,261	
c					
d					
e					
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	373,312	156,893	216,418	-0-

Joint Costs Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes" enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_ (ii) the amount allocated to Program services \$ \_\_\_\_\_  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_ and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24)**

What is the organization's primary exempt purpose? **Youth missions training and evangelism**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

**Program Service Expenses**  
 (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts but optional for others)

a	Trained and equipped youths and adults to spread the Gospel of Jesus Christ in Third World countries or spiritually deficient countries through teen and adult work				
	(Grants and allocations \$ _____)				156,893
b					
	(Grants and allocations \$ _____)				
c					
	(Grants and allocations \$ _____)				
d					
	(Grants and allocations \$ _____)				
e	Other program services (attach schedule)				
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)				156,893

**Part IV Balance Sheets** (See Specific Instructions on page 24 )

Note		Where required attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year
Assets	45	Cash—non-interest-bearing		399	45	17,346
	46	Savings and temporary cash investments		4,726,742	46	463,858
	47a	Accounts receivable	47a 188,834			
		b Less allowance for doubtful accounts	47b	116,889	47c	188,834
	48a	Pledges receivable	48a			
		b Less allowance for doubtful accounts	48b		48c	
	49	Grants receivable			49	
	50	Receivables from officers, directors trustees, and key employees (attach schedule)			50	
	51a	Other notes and loans receivable (attach schedule)	51a 31,878,972			
		b Less allowance for doubtful accounts	51b 150,000	24,121,408	51c	31,728,972
	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges			53	
	54	Investments—securities (attach schedule)	► <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55a	Investments—land buildings and equipment basis	55a 616,660			
		b Less accumulated depreciation (attach schedule)	55b	626,660	55c	616,660
56	Investments—other (attach schedule)			56		
57a	Land buildings and equipment basis	57a				
	b Less accumulated depreciation (attach schedule)	57b	111,816	57c		
58	Other assets (describe ► <u>Accrued interest, misc</u> )		201,894	58	233,380	
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)		29,905,808	59	33,249,049	
Liabilities	60	Accounts payable and accrued expenses		103,315	60	48,332
	61	Grants payable			61	
	62	Deferred revenue		564,629	62	405,322
	63	Loans from officers directors trustees, and key employees (attach schedule)			63	
	64a	Tax-exempt bond liabilities (attach schedule)			64a	
		b Mortgages and other notes payable (attach schedule)		1,360,000	64b	2,347,542
65	Other liabilities (describe ► _____ )			65		
66	<b>Total liabilities</b> (add lines 60 through 65)		2,027,944	66	2,801,195	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted		27,877,864	67	30,447,854
	68	Temporarily restricted			68	
	69	Permanently restricted			69	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds			70	
	71	Paid-in or capital surplus, or land, building and equipment fund			71	
	72	Retained earnings endowment, accumulated income, or other funds			72	
73	<b>Total net assets or fund balances</b> (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19 column (B) must equal line 21)		27,877,864	73	30,447,854	
74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)		29,905,808	74	33,249,049	

Form 990 is available for public inspection and for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

**Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 26)**

<b>a</b>	Total revenue, gains, and other support per audited financial statements ▶	<b>a</b>	N/A
<b>b</b>	Amounts included on line a but not on line 12, Form 990	<b>b</b>	N/A
	(1) Net unrealized gains on investments \$ _____		
	(2) Donated services and use of facilities \$ _____		
	(3) Recoveries of prior year grants \$ _____		
	(4) Other (specify) _____		
	..... \$ _____		
	Add amounts on lines (1) through (4) ▶	<b>b</b>	N/A
<b>c</b>	Line a minus line b ▶	<b>c</b>	N/A
<b>d</b>	Amounts included on line 12, Form 990 but not on line a	<b>d</b>	N/A
	(1) Investment expenses not included on line 6b Form 990 \$ _____		
	(2) Other (specify) _____		
	..... \$ _____		
	Add amounts on lines (1) and (2) ▶	<b>d</b>	N/A
<b>e</b>	Total revenue per line 12, Form 990 (line c plus line d) ▶	<b>e</b>	N/A

**Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements ▶	<b>a</b>	N/A
<b>b</b>	Amounts included on line a but not on line 17, Form 990	<b>b</b>	N/A
	(1) Donated services and use of facilities \$ _____		
	(2) Prior year adjustments reported on line 20 Form 990 \$ _____		
	(3) Losses reported on line 20 Form 990 \$ _____		
	(4) Other (specify) _____		
	..... \$ _____		
	Add amounts on lines (1) through (4) ▶	<b>b</b>	N/A
<b>c</b>	Line a minus line b ▶	<b>c</b>	N/A
<b>d</b>	Amounts included on line 17, Form 990 but not on line a	<b>d</b>	N/A
	(1) Investment expenses not included on line 6b, Form 990 \$ _____		
	(2) Other (specify) _____		
	..... \$ _____		
	Add amounts on lines (1) and (2) ▶	<b>d</b>	N/A
<b>e</b>	Total expenses per line 17, Form 990 (line c plus line d) ▶	<b>e</b>	N/A

**Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 26)**

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter 0)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Robert M. Bland Merritt Island, Florida	President - 20 hrs	-0-	-0-	-0-
Katherine Vanderpool Merritt Island, Florida	Vice President - 20 hrs	-0-	-0-	-0-
Bernice M. Bland Merritt Island, Florida	Secretary - 20 hrs	-0-	-0-	-0-
Paul Kramer Waverly, Ohio	Treasurer - 5 hrs	-0-	-0-	-0-
.....				
.....				
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75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations of which more than \$10,000 was provided by the related organizations?  Yes  No  
If "Yes," attach schedule—see Specific Instructions on page 27

Part VI Other Information (See Specific Instructions on page 27)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes" attach a detailed description of each activity		<input checked="" type="checkbox"/>
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes" attach a conformed copy of the changes		<input checked="" type="checkbox"/>
78a	Did the organization have unrelated business gross income of \$1 000 or more during the year covered by this return?		<input checked="" type="checkbox"/>
b	If "Yes" has it filed a tax return on Form 990-T for this year?		<input checked="" type="checkbox"/>
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes" attach a statement		<input checked="" type="checkbox"/>
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	<input checked="" type="checkbox"/>	
b	If "Yes" enter the name of the organization <b>See attached schedule</b> ..... ..... and check whether it is <input checked="" type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81a	Enter direct or indirect political expenditures. See line 81 instructions	81a	-0-
b	Did the organization file Form 1120-POL for this year?	81b	<input checked="" type="checkbox"/>
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	<input checked="" type="checkbox"/>
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	<input checked="" type="checkbox"/>
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	<input checked="" type="checkbox"/>
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	<input checked="" type="checkbox"/>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	
85	501(c)(4), (5), or (6) organizations	85a	
a	Were substantially all dues nondeductible by members?	85b	
b	Did the organization make only in-house lobbying expenditures of \$2 000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85c	
c	Dues, assessments, and similar amounts from members	85d	
d	Section 162(e) lobbying and political expenditures	85e	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85f	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85g	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85h	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
86	501(c)(7) orgs	86a	
a	Enter initiation fees and capital contributions included on line 12	86b	
b	Gross receipts, included on line 12, for public use of club facilities		
87	501(c)(12) orgs	87a	
a	Enter gross income from members or shareholders	87b	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
88	At any time during the year did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	<input checked="" type="checkbox"/>
89a	501(c)(3) organizations		
a	Enter amount of tax imposed on the organization during the year under section 4911 <b>-0-</b> , section 4912 <b>-0-</b> , section 4955 <b>-0-</b>		
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	<input checked="" type="checkbox"/>
c	Enter amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		-0-
d	Enter amount of tax on line 89c above reimbursed by the organization		-0-
90a	List the states with which a copy of this return is filed <b>None</b>	90b	-0-
b	Number of employees employed in the pay period that includes March 12, 2001 (See instructions)		
91	The books are in care of <b>Darla Trout</b> Telephone no <b>( 321 ) 453-0350</b> Located at <b>885 E Hall Rd Merritt Island FL</b> ZIP + 4 <b>32953</b>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	-0-

**Part VII Analysis of Income-Producing Activities** (See Specific Instructions on page 32)

	Unrelated business income		Excluded by section 512, 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>93</b> Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments . . . .					
g Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments					
<b>95</b> Interest on savings and temporary cash investments			14	46,124	
<b>96</b> Dividends and interest from securities					
<b>97</b> Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property . . . .					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income . . . .					2,561,416
<b>100</b> Gain or (loss) from sales of assets other than inventory					2,577
<b>101</b> Net income or (loss) from special events					
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue					
a <u>Miscellaneous Income</u>					84,484
b _____					
c _____					
d _____					
e _____					
<b>104</b> Subtotal (add columns (B), (D), and (E))		-0-		46,124	2,648,476
<b>105</b> Total (add line 104 columns (B), (D) and (E))					2,694,600

Note Line 105 plus line 1d, Part I should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See Specific Instructions on page 32)

<b>Line No</b>	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
<b>ALL</b>	The public support and other income referred to in column E is related to the exempt purpose as stated in Part III, Line A. The activities involved in accomplishing the exempt purpose relate directly to such purpose by providing personnel, materials, and other resources necessary to perform missionary activities in third world and other spiritually deficient countries

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See Specific Instructions on page 33)

(A) Name, address and EIN of corporation, partnership or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End of-year assets
None	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See Specific Instructions on page 33)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

**Please Sign Here**

Under penalties of perjury, I declare that I have examined this return and believe it to be true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer: Robert M Bland  
 Name and title: Robert M Bland, President

Preparer's signature: Tami Leigh Dooms  
 Firm's name (or yours if self-employed) and address and ZIP + 4: Tami Leigh Dooms, Attorney at Law, 13000 US 41 N, Evansville, IN



**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information—(See separate instructions)**

OMB No 1545 0047

**2001**

Department of the Treasury  
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

**THIRD WORLD MISSIONS, INC**

Employer identification number

**59 2915936**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None .....				
.....				
.....				
.....				
.....				
Total number of other employees paid over \$50,000 . . . ▶	-0-			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individuals or firms) if there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None .....		
.....		
.....		
.....		
.....		
Total number of others receiving over \$50,000 for professional services . . . ▶	-0-	

**Part III** Statements About Activities (See page 2 of the instructions)

	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A or line 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		✓
<b>2</b> During the year, has the organization either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
<b>a</b> Sale, exchange, or leasing of property?		✓
<b>b</b> Lending of money or other extension of credit?		✓
<b>c</b> Furnishing of goods, services, or facilities?		✓
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		✓
<b>e</b> Transfer of any part of its income or assets?		✓
<b>3</b> Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below)		✓
<b>4</b> Do you have a section 403(b) annuity plan for your employees?		
<b>Note:</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.		

**Part IV** Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b  A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above or (2) section 501(c)(4), (5), or (6) if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14  An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)



**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting*

**Note** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	464,744	463,000	670,610	502,500	2,100,854
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	2,725,216	2,508,639	1,877,517	809,674	7,921,046
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	32,188	79,563	2,414	7,463	121,628
23 Total of lines 15 through 22	3,222,148	3,051,202	2,550,541	1,319,637	10,143,528
24 Line 23 minus line 17	3,222,148	3,051,202	2,550,541	1,319,637	10,143,528
25 Enter 1% of line 23	32,221	30,512	25,505	13,196	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 202,871
	b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts				26b -0-
	c Total support for section 509(a)(1) test. Enter line 24, column (e)				26c 10,143,528
	d Add: Amounts from column (e) for lines 18 7,921,046 19 -0- 22 121,628 26b -0-				26d 8,042,674
	e Public support (line 26c minus line 26d total)				26e 2,100,854
	f Public support percentage (line 26e (numerator) divided by line 26c (denominator))				26f 21 %
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year.				
	(2000) .. (1999) .. (1998) .. (1997) ..				
	b For any amount included in line 17 that was received from each person (other than "disqualified persons") prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (include in the list organizations described in lines 5 through 11, as well as individuals). Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year.				
	(2000) ... (1999) .. (1998) .. (1997) ..				
	c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____				27c _____
	d Add: Line 27a total _____ and line 27b total _____				27d _____
	e Public support (line 27c total minus line 27d total)				27e _____
	f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)				27f _____
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))				27g %
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				27h %
28 Unusual Grants	For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.				

**Part V Private School Questionnaire** (See page 7 of the instructions)  
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
<b>29</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
<b>30</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
<b>31</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. (If you need more space, attach a separate statement.)		
<b>32</b> Does the organization maintain the following:		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?		
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
<b>33</b> Does the organization discriminate by race in any way with respect to:		
<b>a</b> Students' rights or privileges?		
<b>b</b> Admissions policies?		
<b>c</b> Employment of faculty or administrative staff?		
<b>d</b> Scholarships or other financial assistance?		
<b>e</b> Educational policies?		
<b>f</b> Use of facilities?		
<b>g</b> Athletic programs?		
<b>h</b> Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
<b>34a</b> Does the organization receive any financial aid or assistance from a governmental agency?		
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
<b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 401 through 405 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation.		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions)  
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check  **a** if the organization belongs to an affiliated group Check  **b** if you checked "a" and "limited control" provisions apply

**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)		
37	Total lobbying expenditures to influence a legislative body (direct lobbying)		
38	Total lobbying expenditures (add lines 36 and 37)		
39	Other exempt purpose expenditures		
40	Total exempt purpose expenditures (add lines 38 and 39)		
41	Lobbying nontaxable amount Enter the amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 . . . . . 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 . . . . . \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)		
43	Subtract line 42 from line 36 Enter 0 if line 42 is more than line 36		
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38		

Caution If there is an amount on either line 43 or line 44 you must file Form 4720

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below  
 See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

During the year, did the organization attempt to influence national state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		✓	
b Paid staff or management (Include compensation in expenses reported on lines c through h)		✓	
c Media advertisements		✓	
d Mailings to members legislators, or the public		✓	
e Publications, or published or broadcast statements		✓	
f Grants to other organizations for lobbying purposes		✓	
g Direct contact with legislators, their staffs government officials, or a legislative body		✓	
h Rallies, demonstrations, seminars, conventions, speeches, lectures or any other means		✓	
i Total lobbying expenditures (Add lines c through h)			-0-

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities



**THIRD WORLD MISSIONS, INC.**  
**FORM 990**  
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**YEAR ENDED 9/30/02**

PART I, LINE 8 - GAIN (LOSS) ON SALE OF ASSETS

Realized Gain on Sale of Real Estate	<u>2,577</u>
	<u>\$ 2,577</u>

**THIRD WORLD MISSIONS, INC.**  
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**YEAR ENDED 9/30/02**

**PART II, LINE 43a - OTHER EXPENSES**

	<u>PROGRAM SERVICES</u>	<u>MANAGEMENT &amp; GENERAL</u>
Indonesia Overseas	(54)	
Honduras Overseas	6,410	
Madagascar Overseas	10,765	
Malawi Overseas	13,707	
Mongolia Overseas	18,317	
Mozambique Overseas	17,586	
Nicaragua Overseas		
Ecuador Overseas	7,844	
Russia Overseas	6,286	
Brazil Overseas	15,024	
Tanzania Overseas	9,436	
Thailand Overseas		
Uganda Overseas	10,343	
India Overseas	14,051	
Zambia Overseas	11,120	
Cameroon Overseas	15,755	
Teen Missions Philippines		
Ukraine Overseas	305	
Bank Charges		325
Taxes		892
Miscellaneous		44
	<u>\$156,893</u>	<u>\$1,261</u>

**THIRD WORLD MISSIONS, INC.**  
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**PART IV, LINE 51 - OTHER NOTES AND LOANS RECEIVABLE**

Higher Dimensions	145,010
Raymond Donahue	1,820
Brevard Christian World Outreach	120,153
Truth Worship Center	179,400
Destiny Christian Center	832,052
Forest Village Florida Group	1,768,949
Coral Springs Community Church	818,090
Greater Blessed Assurance	341,055
Logos Christian Fellowship	124,815
Faith Center	9,104,797
Church of the Good Shepherd	97,581
Marcos Pavkov	34,472
Emmanuel Apostolic Church	129,414
In Touch Ministries	274,997
Mary Stevens	250,302
Cityhill Church	385,675
Apostolic Church of Jesus	639,220
Pentecostal Gospel Temple	600,406
Juvenile Restoration Center	249,358
Thomas Gibbony	512
Living Sanctuary	697,206
ACOG New Life and Deliverance	322,750
Word Covenant Church	943,452
Evangelical House of God	754,383
New Birth Church	547,732
The Harvest House	72,631
Harvest Church Worship Center	220,349
Apostolic Church of Jesus Orlando West	847,813
Haitian Evangelical Baptist Church	794,110
Church United for Family Values	125,864
Living Water Worship Center	235,000
Larry Easton	69,243
Bridges of America	1,237,583
Northwind Ministries	342,595
Charismatic Episcopal Church	347,087
Fred Corley	53,068
Christian Prison Ministries	4,685,631
Agape Ministries	254,294
Ft Lauderdale Church of God	468,828
Church of Jesus	734,043
Common Sense Inc	84,045
Steadfast Harvest	688,301
Bethel Pentecostal	696,871
Jesus Is Lord Cathedral	126,198
Hope Chapel	57,241
Precious Gift Daycare	375,076
Escrow / Miscellaneous Adjustments	(500)
	<u>\$31,878,972</u>

**THIRD WORLD MISSIONS, INC.**

**FORM 990**

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**YEAR ENDED 9/30/02**

**PART VI, LINE 80 - RELATED ORGANIZATIONS (ALL EXEMPT)**

TEEN MISSIONS INTERNATIONAL, INC

TEEN MISSIONS CANADA, LTD

TEEN MISSIONS EUROPE, LTD

TEEN MISSIONS PAPUA NEW GUINEA

TEEN MISSIONS PHILLIPINES, LTD

TEEN MISSIONS AUSTRALIA, LTD

TEEN MISSIONS TRANSKEI

AIDS ORPHANS AND STREET CHILDREN, INC