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Short Form

200312

OMB No 1545-1150

Form 990-EZ

Return of Organization Exempt From Income Tax

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

For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year

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

2003

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2003 calendar year, or tax year beginning January 1st, 2003, and ending December 31st, 2003

B Check if applicable

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

Please use IRS label or print or type See Specific Instructions

C Name of organization La Mission, Inc.
Number and street (or P O box, if mail is not delivered to street address) Room/suite 5015 Baggett Place
City or town, state or country, and ZIP + 4 Cocoa, FL. 32926-2411

D Employer identification number 59 3413937
E Telephone number (321) 632-1927
F Group Exemption Number

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method Cash Accrual Other (specify)

I Website:

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

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

K Check 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.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file Form 990 instead of Form 990-EZ \$ 68,681.85

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 37 of the instructions)

Table with 21 rows for Revenue, Expenses, and Net Assets. Includes handwritten notes like 'RECEIVED OSC 26' and 'RECEIVED IN CORRES'.

SCANNED APR 3 2 2004

Part II Balance Sheets - If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ

(See page 40 of the instructions)

Table with 7 rows for Balance Sheets, columns (A) Beginning of year and (B) End of year.

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form 990-EZ (2003)

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Part III Statement of Program Service Accomplishments (See page 41 of the instructions)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)
What is the organization's primary exempt purpose? <u>A channel for the Great Commission</u> Describe what was achieved in carrying out the organization's exempt purposes in a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title		
28	<u>Operations of 5 churches and 4 schools in Haiti, W.I.</u> (Grants \$)	28a 49,412.81
29	 (Grants \$)	29a
30	 (Grants \$)	30a
31	Other program services (attach schedule) (Grants \$)	31a
32	Total program service expenses (add lines 28a through 31a)	32

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 41 of the instructions)				
(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 E. Swann / 5015 Baggett Place, Cocoa, FL 32926-2411	President 22 hours	-0-	-0-	-0-
Paul Hoskins / 445 Albatross St., Merritt Island FL 32952	Treasurer 7 hours	-0-	-0-	-0-
Mark Shropshire / Alan Sheppard Ave., Cocoa, FL 32926	Vice President 5 hours	-0-	-0-	-0-

Part V Other Information (Note the attachment requirement in General Instruction V, page 14)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		X
a	Did the organization have unrelated business gross income of \$1,000 or more or 60331e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		X
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement)		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions		X
b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved		X
39	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 9		X
b	Gross receipts, included on line 9, for public use of club facilities		X
40a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 -0- section 4912 -0- section 4955 -0-		X
b	501(c)(3) and (4) organizations 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 an explanation		X
c	Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958		-0-
d	Enter Amount of tax on line 40c, above, reimbursed by the organization		-0-
41	List the states with which a copy of this return is filed		Florida
42	The books are in care of Robert E. Swann Telephone no. (321) 632-1927 Located at 5015 Baggett Place, Cocoa		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 and enter the amount of tax-exempt interest received or accrued		

Under penalties of perjury, I declare that I have examined this return and believe it is true, correct, and complete. Declaration of preparer (other than officer) is based on information furnished by filer.

Please Sign Here

Signature of officer: Robert E. Swann

Type or print name and title: Robert E. Swann

Paid Preparer's Use Only

Preparer's signature: _____

Firm's name (or yours if self-employed), address, and ZIP + 4: _____

