L4 Ministries

2022 Year-End Financial Statements and IRS Form 990-EZ filings



Dear Officers and Board Members,

Happy 2023! God has richly blessed our ministry efforts in 2022, and these reports reflect the financial side of the story of God's workings. I humbly submit this report for you review and approval ahead of our quarterly Board meeting and IRS filing deadline of March 15th, 2023.

In this report:

- 2022 YE Balance Sheet
- 2022 YE Income Report, Profit/Loss Report
- Dec Checking and Savings Bank Statements and accounting reconciliation reports
- IRS Tax Filings, Form 990-EZ, Sch A, Sch E, and Sch O, and accounting reconciliation reports

May God richly bless you for your leadership in this ministry!

Pastor Christopher Officer President, L4 Ministries L4 Ministries Inc

Balance Sheet as of 12/31/2022

		ASSETS
612.52	Checking Account	1000
850.05	Savings Account	1010
1,462.57	ASSETS	TOTAL A
	TIES and FUNDS	LIABILIT
0.00	Accounts Payable	2100
	Unrestricted Funds	3000
1,462.57	General Fund	3010
1,462.57	TOTAL Unrestricted Funds	
1,462.57	LIABILITIES and FUNDS	TOTAL L

L4 Ministries Inc Page 1 of 1

Income Statement

For the period 1/1/2022 to 12/31/2022

REVENU	JE	
4000	Contributions, Gifts, Grants etc.	6,675.64
4100	Program Service Revenue	1,400.00
4500	Miscellaneous Revenue	
4590	All Other Revenue	0.05
	TOTAL Miscellaneous Revenue	0.05
TOTAL F	REVENUE	8,075.69
EXPENS	E	
5000	Grants etc. Paid	500.00
5300	Fees for Services (non-employees)	1,039.50
5450	Occupancy, Rent, Utilities etc.	1,200.00
5451	Legal Expense	1,738.99
5500	Printing, Publications and Shipping	1,069.38
5510	ADVERTISING EXPENSE	130.89
5700	Other Expenses	
5780	All Other Expenses	934.36
	TOTAL Other Expenses	934.36
TOTAL E	EXPENSE	6,613.12
NET INC	COME	1,462.57



Statement of Account

 Statement Date
 12/30/22

 Page
 1 of 2

 Account Number
 XXXXXXXXXXXXXXX6233

(509) 527-3636 I (800) 272-9933 Toll-Free



L4 Ministries Inc L4 School Of Christian Leadership 326 Brearcliffe Dr Red Bluff CA 96080

SUMMARY OF ACCOUNTS

Basic Business Checking

XXXXXXXXXXXX6233

\$612.52 Sleigh bells are ringing and angels are singing, "Thank goodness for you!"

Amid all the hustle and bustle this magical season brings we love to pause to wish you happy holidays and a joyful new year from the entire Banner Bank team.

CHECKING ACCOUNT XXXXXXXXXXXXXX6233

Basic Business Checking

Account Title: L4 Ministries Inc

L4 School Of Christian Leadership

Account Number	XXXXXXXXXXXXX6233	Statement Dates	12/01/22 thru 12/31/22
Previous Balance	37.21	Days in the statement period	31
1 Deposits/Credits	615.31	Average Ledger	600.41
1 Debits	40.00	Average Collected	600.41
0 ' 0	00	· ·	

Service Charge .00
Interest Paid .00
Current Balance 612.52

Deposits and Additions

Date	Description				Amount
12/02	GOL1CU CK WEBXFR	P2P WEB	1770527921 S	CHRISTOPHER M O	615.31

005

IMPORTANT INFORMATION YOU SHOULD KNOW PLEASE EXAMINE YOUR STATEMENT AND REPORT ANY IRREGULARITIES TO US. THIS STATEMENT WILL BE CONSIDERED CORRECT FOR ALL PURPOSES UNLESS YOU NOTIFY US.

BALANCING YOUR ACCOUNT ITEMS OUTSTANDING - NOT CHARGED TO ACCOUNT - INCLUDING CHECKS, ATM WITHDRAWALS DEBIT CARD OR AUTOMATIC DEDUCTIONS

NO. (if any)	AMOUNT		
		BANK BALANCE SHOWN ON THIS STATEMENT	\$
		ADD	
		DEPOSITS NOT SHOWN IN THIS STATEMENT (IF ANY)	\$
		_	
		TOTAL	\$
		SUBTRACT	
		TOTAL ITEMS OUTSTANDING	\$
		BALANCE	\$
		_	
		SHOULD AGREE WITH YOU AFTER DEDUCTING SERVICE	
		ON THIS STATEMENT.	() 2
TOTAL	\$		

IMPORTANT DISCLOSURES

CONTACT US

BANNER BANK PO BOX 907

Walla Walla, WA 99362 Toll Free: 1-800-272-9933 or

24 Hour Banner Bank by Phone: 1-800-527-6435

ACCOUNT STATEMENTS If you find an error in your statement, or if you need more information about a transaction, please contact us at the address listed above. The Bank will not be liable for any check that is altered or any signature that is forged unless you notify us within thirty (30) calendar days after the statement and the altered or forged item(s) are made available. For any other error(s), you must also report this within this thirty (30) day period. When writing to us, please provide the information requested below.

ELECTRONIC TRANSFERS

In case of errors or questions about your electronic transfers, call us or write us at the address listed above as soon as you can if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number (if any).
- Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why
 you need more information.
- Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

CREDIT LINES

Information about your loan and/or credit line accounts are provided for informational purposes only. Please refer to your loan statement or loan agreement for further information.





Statement of Account

Statement Date	12/30/22
Page	2 of 2
Account Number	XXXXXXXXXXXXX6233

(509) 527-3636 I (800) 272-9933 Toll-Free

Withdrawals and Deductions

Date	Description	Amount
12/07	DBT CRD 0205 12/07/22 96 LZC* LEGALZOOM.C 888-3100151CA Card# *7219	-40.00

Daily Balance Summary

Date	Balance	Date	Balance	Date	Balance
12/01	37.21	12/02	652.52	12/07	612.52

* * * * * * * * * * END OF STATEMENT * * * * * * * * *

L4 Ministries Inc

Reconciliation Details for account Checking Account for statement ending 12/31/2022

| <u>Date</u> | <u>Num</u> | <u>Payee</u> | | <u>CIr</u> | <u>Amount</u> |
|-----------------|-------------|-------------------------------|---------------------|------------|---------------|
| CLEARED TRA | NSACTIONS | FROM YOUR BANK STATEM | ENT | | |
| Cleared Chec | ks and Paym | nents | | | |
| 6/3/2022 | 24 | Pure Desire Ministries | | R | (226.24) |
| Total of 1 Clea | red Checks | and Payments | | | (226.24) |
| Cleared Depo | sits | | | | |
| 6/3/2022 | | Sheena Officer - Donation for | or PURE DESIRE BOOK | R | 226.24 |
| Total of 1 Clea | red Deposit | S | | | 226.24 |
| Total Cleared T | ansactions | | | | 0.00 |
| | | | Opening Cleared Ba | lance: | 652.52 |
| | | | Closing Cleared Ba | lance: | 652.52 |
| | | | Statement Ba | lance: | 652.52 |
| | | | Differ | rence: | 0.00 |
| UNCLEARED TI | RANSACTIO | ONS | | | |
| Uncleared Ch | ecks and Pa | yments | | | |
| 12/6/2022 | 25 | legalzoom | | | (40.00) |
| Total of 1 Unc | eared Chec | ks and Payments | | | (40.00) |
| Total Uncleared | Transactio | ns | | | (40.00) |



Statement of Account

| Statement Date | 12/30/22 |
|----------------|------------------|
| Page | 1 of 1 |
| Account Number | XXXXXXXXXXXX1127 |

(509) 527-3636 I (800) 272-9933 Toll-Free



L4 Ministries Inc L4 School Of Christian Leadership 326 Brearcliffe Dr Red Bluff CA 96080

SUMMARY OF ACCOUNTS

Business Savings

XXXXXXXXXXXX1127

\$850.05 Sleigh bells are ringing and angels are singing, "Thank goodness for you!"

Amid all the hustle and bustle this magical season brings we love to pause to wish you happy holidays and a joyful new year from the entire Banner Bank team.

| SAVINGS ACCOUNT | XXXXXXXXXXXX1127 |
|-----------------|------------------|
| SAVINGS ACCOUNT | |

Business Savings

Account Title: L4 Ministries Inc

L4 School Of Christian Leadership

| notian Ecadoromp | | |
|------------------|--|--|
| XXXXXXXXXXX1127 | Statement Dates | 12/01/22 thru 12/31/22 |
| \$850.00 | Days in the statement period | 31 |
| \$.00 | Average Ledger | \$850.00 |
| \$.00 | Average Collected | \$850.00 |
| \$.00 | Interest Earned | \$.02 |
| \$.05 | Annual Percentage Yield Earned | 0.03% |
| \$850.05 | 2022 Interest Paid | \$.05 |
| | \$850.00
\$.00
\$.00
\$.00
\$.05 | XXXXXXXXXXXXXXXX1127 Statement Dates \$850.00 Days in the statement period \$.00 Average Ledger \$.00 Average Collected \$.00 Interest Earned \$.05 Annual Percentage Yield Earned |

Deposits and Additions

| Date | Description | Amount |
|-------|------------------|--------|
| 12/31 | Interest Deposit | .05 |

01/14/2023 009

IMPORTANT INFORMATION YOU SHOULD KNOW PLEASE EXAMINE YOUR STATEMENT AND REPORT ANY IRREGULARITIES TO US. THIS STATEMENT WILL BE CONSIDERED CORRECT FOR ALL PURPOSES UNLESS YOU NOTIFY US.

BALANCING YOUR ACCOUNT ITEMS OUTSTANDING - NOT CHARGED TO ACCOUNT - INCLUDING CHECKS, ATM WITHDRAWALS DEBIT CARD OR AUTOMATIC DEDUCTIONS

| NO. (if any) | AMOUNT | | |
|--------------|--------|---|----|
| | | BANK BALANCE SHOWN
ON THIS STATEMENT | \$ |
| | | ADD | |
| | | DEPOSITS NOT SHOWN
IN THIS STATEMENT (IF ANY) | \$ |
| | | | |
| | | | |
| | | | |
| | | TOTAL | \$ |
| | | SUBTRACT | |
| | | TOTAL ITEMS OUTSTANDING | \$ |
| | | | |
| | | BALANCE | \$ |
| | | SHOULD AGREE WITH YOUF
AFTER DEDUCTING SERVICE
ON THIS STATEMENT. | |
| TOTAL | \$ | | |

IMPORTANT DISCLOSURES

CONTACT US

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24 Hour Banner Bank by Phone: 1-800-527-6435

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- Tell us your name and account number (if any).
- Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why
 you need more information.
- Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

CREDIT LINES

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L4 Ministries Inc

Reconciliation Details for account Savings Account for statement ending 12/31/2022

| <u>Date</u> | <u>Num</u> | <u>Payee</u> | <u>Clr</u> | <u>Amount</u> |
|----------------|--------------|----------------------|--------------------------|---------------|
| CLEARED TRA | NSACTIONS | S FROM YOUR BANK STA | TEMENT | |
| Cleared Depo | osits | | | |
| 12/31/202 | 2 | Interest Earned | R | 0.05 |
| Total of 1 Cle | ared Deposit | s | | 0.05 |
| Total Cleared | ransactions | : | | 0.05 |
| | | | Opening Cleared Balance: | 850.00 |
| | | | Closing Cleared Balance: | 850.05 |
| | | | Statement Balance: | 850.05 |
| | | | Difference: | 0.00 |

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form, as it may be made public. Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

| A F | or the | 2022 calenda | ar year, or tax year beginning January 1 , 2022, and ending D | December 31 | , 20 22 |
|------------|--------------|--------------------|---|-----------------|--------------------------|
| B 0 | heck if ap | pplicable: | C Name of organization D Er | nployer identif | fication number |
| | Address c | hange | L4 Ministries Inc | 92-04 | 455560 |
| | Name cha | * | Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Te | elephone numb | er |
| = | nitial retur | rn
n/terminated | 326 Brearcliffe Dr | (530) 5 | 529-5815 |
| \equiv | Amended | | City or town, state or province, country, and ZIP or foreign postal code | roup Exempt | ion |
| = | | n pending | Red Bluff, CA 96080 | lumber | |
| G A | ccount | ting Method: | ☐ Cash | k if the org | ganization is not |
| ΙV | /ebsite | www.l4mi | nistries.org requi | red to attach | Schedule B |
| J Ta | ax-exen | npt status (che | eck only one) — 🗸 501(c)(3) 🔲 501(c) () (insert no.) 🔲 4947(a)(1) or 🔲 527 (Form | า 990). | |
| KF | orm of | organization: | ✓ Corporation ☐ Trust ☐ Association ☐ Other: | | |
| LA | dd lines | s 5b, 6c, and | 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total asse | | |
| (Par | t II, coli | umn (B)) are \$ | S500,000 or more, file Form 990 instead of Form 990-EZ | . \$ | |
| Pa | art I | | e, Expenses, and Changes in Net Assets or Fund Balances (see the instr | | |
| | | Check if | the organization used Schedule O to respond to any question in this Part I $$. $$. | | <u> </u> |
| | 1 | Contribution | ons, gifts, grants, and similar amounts received | . 1 | 6,676 |
| | 2 | Program se | ervice revenue including government fees and contracts | 2 | 1,400 |
| | 3 | Membersh | ip dues and assessments | 3 | |
| | 4 | Investment | t income | 4 | 0 |
| | 5a | Gross amo | ount from sale of assets other than inventory 5a | | |
| | b | Less: cost | or other basis and sales expenses | | |
| | С
6 | | ss) from sale of assets other than inventory (subtract line 5b from line 5a) | 5c | |
| | а | Gross inc | ome from gaming (attach Schedule G if greater than | | |
| Revenue | | \$15,000) . | | | |
| Vel | b | | me from fundraising events (not including \$ of contributions | | |
| æ | | | aising events reported on line 1) (attach Schedule G if the | | |
| | | | ch gross income and contributions exceeds \$15,000) 6b | | |
| | С | | et expenses from gaming and fundraising events 6c | _ | |
| | d | | e or (loss) from gaming and fundraising events (add lines 6a and 6b and subtrac | | |
| | 70 | , | s of inventory, less returns and allowances | 6d | |
| | 7a
b | | | _ | |
| | C | | of goods sold | 7c | |
| | 8 | | nue (describe in Schedule O) | | |
| | 9 | | nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 | | 8,076 |
| | 10 | Grants and | I similar amounts paid (list in Schedule O) | 10 | 500 |
| | 11 | | aid to or for members | | 300 |
| Ś | 12 | | ther compensation, and employee benefits | | |
| JSe | 13 | | al fees and other payments to independent contractors | | 2,778 |
| Expenses | 14 | | y, rent, utilities, and maintenance | | 1,200 |
| Ä | 15 | | ublications, postage, and shipping | | 1,200 |
| | 16 | | enses (describe in Schedule O) | | 934 |
| | 17 | | enses. Add lines 10 through 16 | | 6,613 |
| S | 18 | Excess or | (deficit) for the year (subtract line 17 from line 9) | 18 | 1,463 |
| set | 19 | | or fund balances at beginning of year (from line 27, column (A)) (must agree with | | , |
| ASS | | | ur figure reported on prior year's return) | | |
| Net Assets | 20 | Other char | nges in net assets or fund balances (explain in Schedule O) | 20 | |
| z | 21 | | or fund balances at end of year. Combine lines 18 through 20 | | 1,463 |

Form 990-EZ (2022) Page **2**

| Pa | rt II Balance Sheets (see the instructions f | or Part II) | | | | |
|-------|---|--|--|---|-------------|---------------------------------------|
| | Check if the organization used Schedule | O to respond to a | ny question in this | Part II | | 🔲 |
| | | | | (A) Beginning of year | | (B) End of year |
| 22 | Cash, savings, and investments | | | | 22 | 1,463 |
| 23 | Land and buildings | | | | 23 | |
| 24 | Other assets (describe in Schedule O) | | | | 24 | |
| 25 | Total assets | | | | 25 | |
| 26 | , | | | | 26 | |
| 27 | Net assets or fund balances (line 27 of column | · , | | | 27 | |
| Par | | | | | | Evmanasa |
| | Check if the organization used Schedule | <u>-</u> | ny question in this | Part III \square | (Rea | Expenses uired for section |
| Wha | t is the organization's primary exempt purpose? | Christian Education | | | | c)(3) and 501(c)(4) |
| as n | cribe the organization's program service accomplisheasured by expenses. In a clear and concise means benefited, and other relevant information for each | anner, describe the ach program title. | e services provided | , the number of | orga | nizations; optional for |
| 28 | Our school, L4 School of Christian Leadership, held | its first trimester for | ts students in Oct, 20 | 022. We provided | | |
| | 10 weeks of Christian education to nine (9) adults. | | | | | |
| | (Overland) | in all relations and | | ····· | 00- | |
| 20 | | | ants, check here . | | 28a | 3,440 |
| 29 | Truth=Freedom Men's Conference. We planned to ho | st in 2023 an educati | onal men's conference | ce, and we | | |
| | invested in keynote speaker deposits in 2022 | | | | | |
| | (Grants \$) If this amount | includes foreign are | ants, check here . | · | 29a | 1 000 |
| 30 | We work with education and grants for new Christian | | | | 2 3a | 1,000 |
| 00 | monies to cover specific legal start up fees and traini | | | | | |
| | mones to cover specific legal start up rees and train | 1119. | | | | |
| | (Grants \$ 500) If this amount | includes foreign gra | nts check here | ····· | 30a | 500 |
| 31 | Other program services (describe in Schedule O) | | | | | 300 |
| | . • , | | ints, check here . | | 31a | |
| 32 | Total program service expenses (add lines 28a t | | | | 32 | 4.940 |
| Par | t IV List of Officers, Directors, Trustees, and Key | Employees (list each | n one even if not comp | pensated—see the in | struc | tions for Part IV) |
| | Check if the organization used Schedule | O to respond to a | ny question in this | Part IV | | |
| | (a) Name and title | (b) Average
hours per week
devoted to position | (c) Reportable
compensation
(Forms W-2/1099-MISC/
1099-NEC)
(if not paid, enter -0-) | (d) Health benefits,
contributions to employe
benefit plans, and
deferred compensation | 0 | Estimated amount of ther compensation |
| Chris | stopher Officer | | | | | |
| Pres | dent | 15 | 0 | | 0 | 0 |
| Shee | na Rubi-Officer | | | | | |
| Secr | etary | 15 | 0 | (|) | 0 |
| Mica | n Stetson | | | | | |
| Trea | surer | 1 | 0 | (|) | 0 |
| Debo | rah Burroughs | | | | | |
| | | 1 | 0 | (|) | 0 |
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Form 990-EZ (2022) Page **3**

Other Information (Note the Schedule A and personal benefit contract statement requirements in the Part V instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V Yes No 33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a 33 34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the 34 35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business 35a If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O 35b Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 35c 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 36 Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 37b 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 outstanding at the end of the tax year covered by this return? 38a If "Yes," complete Schedule L, Part II, and enter the total amount involved Section 501(c)(7) organizations. Enter: 39 Initiation fees and capital contributions included on line 9 39a **b** Gross receipts, included on line 9, for public use of club facilities Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: 0; section 4912: 0; section 4955: section 4911: Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 40b ✓ Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 0 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 0 All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter List the states with which a copy of this return is filed: California 41 42a The organization's books are in care of: Christopher Officer (530) 529-5815 Telephone no. 326 Brearcliffe Dr, Red Bluff, CA ZIP + 496080 **b** At any time during the calendar year, did the organization have an interest in or a signature or other authority over Yes No a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 42b If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here 43 and enter the amount of tax-exempt interest received or accrued during the tax year 43 Yes No 44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be 44a Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be 44b If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an 44d 45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45a 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," Form 990 and Schedule R may need to be completed instead of 45b

Form 990-EZ (2022) Page **4**

| | | | | | | | | . – | - | Yes | No |
|-----------|----------------|--|--|-----------------------------|----------------|----------|----------------------|----------|-------|-----------|----------|
| 46 | | ne organization engage, directly or in
andidates for public office? If "Yes," c | | | | | | | 40 | | , |
| Part ' | | Section 501(c)(3) Organizations | | raiti | | • • | | | 46 | | ✓ |
| rait | | All section 501(c)(3) organizations | | stions 47–49h ar | nd 52 and | l com | nlete the | e table | s fo | r line | 25 |
| | | 50 and 51. | o maor anower que | otiono ii iob ai | 10 02, 0110 | | ipioto tin | o table | ,0 10 | | ,, |
| | | Check if the organization used Sch | nedule O to respond | to any question i | n this Part | VI | | | | | |
| | | | | | | | | | Ī | Yes | No |
| 47 | Did th | ne organization engage in lobbying | activities or have a | section 501(h) elec | ction in effe | ect du | ring the | tax | | | |
| | year? | If "Yes," complete Schedule C, Part | :11 | | | | | . 7 | 47 | | √ |
| 48 | Is the | organization a school as described in | section 170(b)(1)(A)(i | i)? If "Yes," comple | te Schedul | eЕ | | | 48 | √ | • |
| 49a | Did th | ne organization make any transfers to | an exempt non-cha | ritable related orga | anization? | | | . 4 | 9a | | √ |
| b | If "Ye | s," was the related organization a se | ction 527 organizatio | n? | | | | . 4 | 9b | | |
| 50 | | plete this table for the organization's | | | | | | | | | d key |
| | emplo | byees) who each received more than | \$100,000 of comper | sation from the or | ganization. | If the | re is none | e, ente | r "No | ne." | |
| | | | (b) Average | (c) Reportable compensation | , , , | ealth be | enefits,
employee | (e) Esti | nated | lamou | nt of |
| | (a) | Name and title of each employee | hours per week devoted to position | (Forms W-2/1099-MIS | SC/ benefit p | ans, an | d deferred | | | ensati | |
| | | | | 1099-NEC) | CO | mpensa | ation | | | | |
| none | | | | | | | | | | | |
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| | | | | | | | | | | | |
| 51 | Comp
\$100, | number of other employees paid over
olete this table for the organization's
000 of compensation from the organ
Name and business address of each independ | s five highest compenization. If there is no | ensated independe | | tors v | | recei | | | than |
| | | | | () // | | | | | | | |
| none | | | | | | | | | | | |
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| | | | | | | | | | | | |
| d | Total | number of other independent contra | ctors each receiving | over \$100,000 . | | | | | | | |
| 52 | Did t | he organization complete Schedu | le A? Note: All se | ction 501(c)(3) or | ganization | s mu | st attach | n a | | | |
| | comp | leted Schedule A | | | | | | . 🗸 🕻 | es/ | | lo |
| | | of perjury, I declare that I have examined this r | | | | | | nowledge | and I | oelief, i | it is |
| true, cor | rect, an | d complete. Declaration of preparer (other than | officer) is based on all info | rmation of which prepa | rer has any kn | owledg | e. | | | | |
| | _ | | | | | | | | | | |
| Sign | | Signature of officer | | | | Date | | | | | |
| Here | | | | | | | | | | | |
| | | Type or print name and title | 1_ | | _ | | | | | | |
| Paid | | Print/Type preparer's name | Preparer's signature | | Date | | Check | | IN | | |
| Prep | arer | | | | | | self-emplo | yed | | | |
| Use (| | Firm's name | | | | Firm's | EIN | | | | |
| | | Firm's address | | | | Phone | no. | | | | |
| Mav th | ne IRS | discuss this return with the preparer | shown above? See i | nstructions | | | | . | 165 | | 10 |

Form **990-EZ** (2022)

1/14/2023

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

| Name of the organization | | | | | Employer identification | n number |
|---|------------------------------------|---|-------------------------|---------------------------------------|---|---|
| L4 Ministries Inc | | | | | | 55560 |
| Part I Reason for Public Cha | | | | | | ons. |
| The organization is not a private found | | , | | - | , | |
| 1 A church, convention of chur | | | | | 0(b)(1)(A)(i). | |
| 2 A school described in section | | , | | • | | |
| 3 A hospital or a cooperative he | | | | | | /iii) Entartha |
| 4 A medical research organizat hospital's name, city, and sta | te: | | | | | |
| 5 An organization operated for
section 170(b)(1)(A)(iv). (Cor | nplete Part II.) | | | • | | al unit described in |
| 6 A federal, state, or local gove 7 An organization that normally described in section 170(b)(| receives a subs | tantial part of its sup | | | | n the general public |
| 8 A community trust described | in section 170(b) | (1)(A)(vi). (Complete | Part II.) | | | |
| 9 An agricultural research orga
or university or a non-land-gr
university: | ant college of agr | iculture (see instruction | ons). Ente | er the nan | ne, city, and state of | the college or |
| 10 An organization that normally receipts from activities relate support from gross investme acquired by the organization | d to its exempt funt income and un | nctions, subject to ce
related business taxal | rtain exce
ble incom | eptions; a
ne (less se | and (2) no more than
ection 511 tax) from | 33 ¹ /3% of its |
| 11 An organization organized an | d operated exclus | sively to test for public | c safety. | See sect i | ion 509(a)(4). | |
| 12 An organization organized and | | | | | | |
| one or more publicly supported the box on lines 12a through 1 | • | | | | ` '` ' | ` ' ' ' |
| a Type I. A supporting orgathe supported organization. \(\) Supporting organization. \(\) | n(s) the power to | regularly appoint or e | lect a ma | ijority of t | | |
| b Type II. A supporting organization(s). You mus | f the supporting o | organization vested in | the same | | | |
| c Type III functionally inte | grated. A suppor | ting organization oper | ated in c | | | ally integrated with, |
| d Type III non-functionally | * * * * | , | | - | | orted organization(s) |
| that is not functionally interesting the requirement (see instructional see instructions) | egrated. The orga | nization generally mu | st satisfy | a distribu | ution requirement an | |
| e Check this box if the orgatunctionally integrated, or | | | | | | e II, Type III |
| f Enter the number of supported | | | | | | |
| g Provide the following information | on about the supp | orted organization(s). | | | | |
| (i) Name of supported organization | (ii) EIN | (iii) Type of organization
(described on lines 1–10
above (see instructions)) | listed in you | organization
ur governing
ment? | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
| | | | Yes | No | | |
| (A) | | | | | | |
| (B) | | | | | | |
| (C) | | | | | | |
| (D) | | | | | | |
| (E) | | | | | | |
| Total | | | | | | |

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 4 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) % Public support percentage from 2020 Schedule A, Part II, line 14 15 331/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 331/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| Secti | on A. Public Support | | | • | · | , | |
|-------|---|------------------------|-------------------|-------------------|-----------------|-----------------|-------------|
| Calen | dar year (or fiscal year beginning in) | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees | | | | | | |
| | received. (Do not include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities | | | | | | |
| | furnished in any activity that is related to the | | | | | | |
| | organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an | | | | | | |
| | unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either paid to or expended on its behalf | | | | | | |
| _ | · | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the | | | | | | |
| | organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| 7a | Amounts included on lines 1, 2, and 3 | | | | | | |
| | received from disqualified persons . | | | | | | |
| b | Amounts included on lines 2 and 3 | | | | | | |
| ~ | received from other than disqualified | | | | | | |
| | persons that exceed the greater of \$5,000 | | | | | | |
| | or 1% of the amount on line 13 for the year | | | | | | |
| С | Add lines 7a and 7b | | | | | | |
| 8 | Public support. (Subtract line 7c from | | | | | | |
| | line 6.) | | | | | | |
| | on B. Total Support | | | | 1 | | |
| | dar year (or fiscal year beginning in) | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) 2021 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, | | | | | | |
| | royalties, and income from similar sources. | | | | | | |
| b | Unrelated business taxable income (less | | | | | | |
| | section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | |
| С | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business | | | | | | |
| | activities not included on line 10b, whether | | | | | | |
| | or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or | | | | | | |
| | loss from the sale of capital assets | | | | | | |
| 40 | (Explain in Part VI.) | <u> </u> | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| 14 | First 5 years. If the Form 990 is for the | organization' | s first second | third fourth | or fifth tax ve | ar as a sectio | n 501(c)(3) |
| | organization, check this box and stop he | • | | | • | | * / * / |
| Secti | on C. Computation of Public Suppor | | | | | | |
| 15 | Public support percentage for 2021 (line | | | 13, column (f)) | | 15 | % |
| 16 | Public support percentage from 2020 Sch | | • | | | 16 | % |
| | on D. Computation of Investment In | | | | | | <u> </u> |
| 17 | Investment income percentage for 2021 (| | | by line 13, colu | ımn (f)) | 17 | % |
| 18 | Investment income percentage from 2020 | Schedule A, I | Part III, line 17 | | | 18 | % |
| 19a | 331/3% support tests-2021. If the organ | | | | | | |
| | 17 is not more than $33^{1}/_{3}\%$, check this box | and stop here . | . The organizati | on qualifies as | a publicly supp | orted organizat | ion . ▶ □ |
| b | 331/3% support tests—2020. If the organize | | | | | | |
| | line 18 is not more than 331/3%, check this | pox and stop h | ere. The organ | ization qualifies | as a publicly s | upported organ | nization |
| 20 | Private foundation. If the organization di | d not check a | box on line 14 | 19a or 19b (| check this box | and see instru | ctions |

Supporting Organizations Part IV

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

Se

| Secti | ion A. All Supporting Organizations |) i dit | · v.) | |
|-------|--|---------|-------|----|
| Jecti | on A. All Supporting Organizations | | Yes | No |
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. | 4 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported | 1 | | |
| За | organization was described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below. | 2
3a | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. | 3b | | |
| С | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | 3c | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. | | | |
| С | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. | 4b | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document). | 4c | | |
| b | Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | | |
| 6 | Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i> | 5c | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990). | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990). | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. | 9a | | |
| b | | 9b | | |
| С | Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. | 9c | | |
| 10a | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. | 10a | | |

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

determine whether the organization had excess business holdings.)

| Part | IV Supporting Organizations (continued) | | | |
|------------------|--|-----|-----|----|
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and | | | |
| | 11c below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described on line 11a above? | 11b | | |
| С | A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, | | | |
| | provide detail in Part VI. | 11c | | |
| Secti | on B. Type I Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. | 2 | | |
| Secti | on C. Type II Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed | | | |
| <u> </u> | the supported organization(s). | 1 | | |
| Secti | on D. All Type III Supporting Organizations | | 24 | |
| | | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | | | |
| 2 | | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | | |
| 0 1 | supported organizations played in this regard. | 3 | | |
| | on E. Type III Functionally Integrated Supporting Organizations | | | ١ |
| 1
a
b
c | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in the organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in Part VI). | | | |
| 2 | Activities Test. Answer lines 2a and 2b below. | | Yes | No |
| а | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | 2a | | |
| b | Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. | 2b | | |
| 3
a | Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i> | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. | 3h | | |

| Part | Type III Non-Functionally Integrated 509(a)(3) Supporting Org | gani | izations | |
|------|--|--------|---------------------------|-----------------------------|
| 1 | \Box Check here if the organization satisfied the Integral Part Test as a qualifying | | | |
| | instructions. All other Type III non-functionally integrated supporting organ | nizat | ions must complete Sect | |
| Sect | tion A-Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| _1_ | Net short-term capital gain | 1 | | |
| _ 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3. | 4 | | |
| _ 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| _ 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | |
| Sect | tion B—Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | | |
| а | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| С | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| е | Discount claimed for blockage or other factors (explain in detail in Part VI): | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d. | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by 0.035. | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | tion C—Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | | |
| 2 | Enter 0.85 of line 1. | 2 | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, column A) | 3 | | |
| 4 | Enter greater of line 2 or line 3. | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | | |
| | emergency temporary reduction (see instructions). | 6 | | |
| 7 | Check here if the current year is the organization's first as a non-function | allv i | integrated Type III suppo | rting organization |

Schedule A (Form 990) 2021

(see instructions).

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D—Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 5 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 Distributable amount for 2021 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) **Underdistributions Distributable** Section E—Distribution Allocations (see instructions) **Excess Distributions** Pre-2021 Amount for 2021 Distributable amount for 2021 from Section C, line 6 2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2021 **a** From 2016 From 2017 **c** From 2018 **d** From 2019 **e** From 2020 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2021 distributable amount Carryover from 2016 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2021 from 4 Section D, line 7: Applied to underdistributions of prior years Applied to 2021 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2022. Add lines 3j and 4c. Breakdown of line 7: Excess from 2017 . . . Excess from 2018 . . . Excess from 2019 . . . Excess from 2020 . . .

Schedule A (Form 990) 2021

Excess from 2021 . . .

| Part VI | Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) |
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SCHEDULE E (Form 990)

Schools

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Employer identification number

920455560 L4 Ministries Inc Part I YES NO 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? 1 2 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, 2 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage, or 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, Through social media and on our website, www.l4ministries.org Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff? . . ✓ Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Copies of all material used by the organization or on its behalf to solicit contributions? 4d ✓ If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? 5a ✓ 5_b 5с Employment of faculty or administrative staff? . Scholarships or other financial assistance? . 5d Educational policies? 5e Use of facilities? 5f Athletic programs? 5g 5h If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? 6a Has the organization's right to such aid ever been revoked or suspended? 6b If you answered "Yes" on either line 6a or line 6b, explain on Part II. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through

4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering

General Instructions

Future developments. For the latest information about developments related to Schedule E (Form 990), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/Form990.

Reminder

Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, modified Rev. Proc. 75-50 to provide a third method for a private school to satisfy the publicity requirement in section 4.03. Accordingly, also answer "Yes" to line 3 if the organization has publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage.

Purpose of Schedule

Schedule E (Form 990) is used by an organization that files Form 990 or 990-EZ to report information on private schools.

Who Must File

An organization that answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48, must complete and attach Schedule E to Form 990 or 990-EZ, as applicable. This means the organization checked the box on Schedule A (Form 990), Public Charity Status and Public Support, Part I, line 2, because it's a school.

If an organization isn't required to file Form 990 or 990-EZ but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

For Forms 990 and 990-EZ filers, use Part II if additional space is needed for explanations.

Specific Instructions

Part I

Relevant parts of Rev. Proc. 75-50, 1975-2 C.B. 587, are given below. The revenue procedure gives guidelines and recordkeeping requirements for determining whether private schools that are recognized as exempt from tax have racially nondiscriminatory policies toward their students.

Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, modified Rev. Proc. 75-50 to provide a third method for a private school to satisfy the requirement in section 4.03.

- **4.01 Organizational requirements.** A school must include a statement in its charter, bylaws, or other governing instrument, or in a resolution of its governing body, that it has a racially nondiscriminatory policy as to students and therefore doesn't discriminate against applicants and students on the basis of race, color, and national or ethnic origin.
- **4.02 Statement of policy.** Every school must include a statement of its racially nondiscriminatory policy as to students in all its brochures and catalogues dealing with student admissions, programs, and scholarships. A statement substantially similar to the Notice described in paragraph (a), subsection 1, section 4.03, below, will be acceptable for this purpose. Further, every school must include a reference to its racially nondiscriminatory policy in other written advertising that it uses as a means of informing prospective students of its programs. The following references will be acceptable.

The (name) school admits students of any race, color, and national or ethnic origin.

- **4.03 Publicity.** The school must make its racially nondiscriminatory policy known to all segments of the general community served by the school.
- 1. The school must use one of the following three methods to satisfy this requirement.
- a. The school may publish a notice of its racially nondiscriminatory policy in a newspaper of general circulation that serves all racial segments of the community. This publication must be repeated at least once annually during the period of the school's solicitation for students or, in the absence of a solicitation program, during the school's registration period. Where more than one community is served by a school, the school may publish its notice in those newspapers that are reasonably likely to be read by all racial segments of the communities 01/14/2023

that it serves. The notice must appear in a section of the newspaper likely to be read by prospective students and their families and it must occupy at least three column inches. It must be captioned in at least 12-point boldface type as a notice of nondiscriminatory policy as to students, and its text must be printed in at least 8-point type. The following notice will be acceptable.

Notice of Nondiscriminatory Policy as to Students

The (name) school admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

- b. The school may use the broadcast media to publicize its racially nondiscriminatory policy if this use makes such nondiscriminatory policy known to all segments of the general community the school serves. If this method is chosen, the school must provide documentation that the means by which this policy was communicated to all segments of the general community was reasonably expected to be effective. In this case, appropriate documentation would include copies of the tapes or script used and records showing that there was an adequate number of announcements, that they were made during hours when the announcements were likely to be communicated to all segments of the general community, that they were of sufficient duration to convey the message clearly, and that they were broadcast on radio or television stations likely to be listened to by substantial numbers of members of all racial segments of the general community. Announcements must be made during the period of the school's solicitation for students or, in the absence of a solicitation program, during the school's registration
- c. The school may display a notice of its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year (excluding temporary outages due to website maintenance or technical problems) in a manner reasonably expected to be noticed by visitors to the homepage. The notice used to satisfy the publicity requirement under 1(a), above, is acceptable. A publicly accessible homepage is one that does not require a visitor to input information, such as an email address or a username and password, to access the homepage. Factors to be considered in determining whether a notice is reasonably expected to be noticed by visitors to the homepage include the size, color, and graphic treatment of the notice in relation to other parts of the homepage, whether the notice is unavoidable, whether other parts of the homepage distract attention from the notice, and whether the notice is visible without a visitor having to do anything other than simple scrolling on the homepage. A link on the homepage to another page where the notice appears, or a notice that appears in a carousel or only by selecting a dropdown or by hover (mouseover) is not acceptable. If a school does not have its own website, but it has webpages contained in a website, the school must display a notice of its racially nondiscriminatory policy on its primary landing page within the website in a manner that satisfies all other requirements of this subsection 1(c) to use this publication method.

Communication of a racially nondiscriminatory policy as to students by a school to leaders of racial groups as the sole means of publicity generally won't be considered effective to make the policy known to all segments of the community.

- 2. The requirements of subsection 1, section 4.03, won't apply when one of the following paragraphs applies.
- a. If, for the preceding 3 years, the enrollment of a parochial or other church-related school consists of students at least 75% of whom are members of the sponsoring religious denomination or unit, the school may make known its racially nondiscriminatory policy in whatever newspapers or circulars the religious denomination or unit utilizes in the communities from which the students are drawn. These newspapers and circulars may be those distributed by a particular religious denomination or unit or by an association that represents a number of religious organizations of the same denomination. If, however, the school advertises in newspapers of general circulation in the community or communities from which its students are drawn and paragraphs (b) and (c) of this subsection aren't applicable to it, then it must comply with paragraph (a), subsection 1, section 4.03.

b. If a school customarily draws a substantial percentage of its students nationwide, worldwide, or from a large geographic section or sections of the United States and follows a racially nondiscriminatory policy as to students, the publicity requirement may be satisfied by complying with section 4.02, earlier. Such a school may demonstrate that it follows a racially nondiscriminatory policy within the meaning of the preceding sentence either by showing that it currently enrolls students of racial minority groups in meaningful numbers or, when minority students are not enrolled in meaningful numbers, that its promotional activities and recruiting efforts in each geographic area were reasonably designed to inform students of all racial segments in the general communities within the area of the availability of the school. The question whether a school satisfies the preceding sentence will be determined on the basis of the facts and circumstances of each case.

c. If a school customarily draws its students from local communities and follows a racially nondiscriminatory policy as to students, the publicity requirement may be satisfied by complying with section 4.02, earlier. Such a school may demonstrate that it follows a racially nondiscriminatory policy within the meaning of the preceding sentence by showing that it currently enrolls students of racial minority groups in meaningful numbers. The question whether a school satisfies the preceding sentence will be determined on the basis of the facts and circumstances of each case. One of the facts and circumstances that the IRS will consider is whether the school's promotional activities and recruiting efforts in each area were reasonably designed to inform students of all racial segments in the general communities within the area of the availability of the school. The IRS recognizes that the failure by a school drawing its students from local communities to enroll racial minority group students may not necessarily indicate the absence of a racially nondiscriminatory policy as to students when there are relatively few or no such students in these communities. Actual enrollment is, however, a meaningful indication of a racially nondiscriminatory policy in a community in which a public school or schools became subject to a desegregation order of a federal court or otherwise expressly became obligated to implement a desegregation plan under the terms of any written contract or other commitment to which any federal agency was a party.

The IRS encourages schools to satisfy the publicity requirement by the methods described in subsection 1, section 4.03, regardless of whether a school considers itself within subsection 2, because it believes these methods to be the most effective to make known a school's racially nondiscriminatory policy. It's each school's responsibility to determine whether paragraph (a), (b), or (c), subsection 2, applies to it. On audit, a school must be prepared to demonstrate that the failure to publish its racially nondiscriminatory policy in accordance with subsection 1, section 4.03, was justified by the application to it of paragraph (a), (b), or (c), subsection 2. Further, a school must be prepared to demonstrate that it has publicly disavowed or repudiated any statements purported to have been made on its behalf (after November 6, 1975) that are contrary to its publicity of a racially nondiscriminatory policy as to students, to the extent that the school or its principal official were aware of such statements.

- **4.04 Facilities and programs.** A school must be able to show that all of its programs and facilities are operated in a racially nondiscriminatory
- **4.05 Scholarship and loan programs.** As a general rule, all scholarship or other comparable benefits available for use at any school must be offered on a racially nondiscriminatory basis. Their availability on this basis must be known throughout the general community being served by the school and should be referred to in the publicity required by this section in order for that school to be considered racially nondiscriminatory as to students. Scholarships and loans that are made pursuant to financial assistance programs favoring members of one or more racial minority groups that are designed to promote a school's racially nondiscriminatory policy won't adversely affect the school's exempt status.

Financial assistance programs favoring members of one or more racial groups that don't significantly derogate from the school's racially nondiscriminatory policy similarly won't adversely affect the school's exempt status.

- **4.06 Certification.** An individual authorized to take official action on behalf of a school that claims to be racially nondiscriminatory as to students is required to certify annually, under penalties of perjury, that to the best of his or her knowledge and belief the school has satisfied the applicable requirements of sections 4.01 through 4.05, Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260. This certification is line 7, Schedule E.
- **4.07 Faculty and staff.** The existence of a racially discriminatory policy for employment of faculty and administrative staff is indicative of a racially discriminatory policy as to students. On the other hand, the absence of racial discrimination in employment of faculty and administrative staff is indicative of a racially nondiscriminatory policy as to students.
- **7.01 Specific records.** Except as provided in section 7.03, each exempt private school must maintain for a minimum period of 3 years, beginning with the year after the year of compilation or acquisition, the following records for the use of the IRS on proper request.
- 1. Records indicating the racial composition of the student body, faculty, and administrative staff for each academic year.
- 2. Records sufficient to document that scholarship and other financial assistance is awarded on a racially nondiscriminatory basis.
- 3. Copies of all brochures, catalogues, and advertising dealing with student admissions, programs, and scholarships. Schools advertising nationally or in a large geographic segment or segments of the United States need only maintain a record sufficient to indicate when and in which publications their advertisements were placed.
- 4. Copies of all materials used by or on behalf of the school to solicit contributions.

7.02 Limitation.

- 1. For purposes of section 7.01, the racial composition of the student body, faculty, and administrative staff may be an estimate based on the best information readily available to the school, without requiring student applicants, students, faculty, or administrative staff to submit information to the school that the school otherwise doesn't require. For each academic year, however, a record of the method by which racial composition is determined must be maintained.
- 2. The IRS doesn't require that a school release personally identifiable records or personal information contained therein except in accordance with the requirements of the Family Educational Rights and Privacy Act of 1974, 20 U.S.C. section 1232g (1974). Similarly, the IRS doesn't require a school to keep records the maintenance of which is prohibited under state or federal law.
- **7.03 Exceptions.** The records described in section 7.01 need not be independently maintained for IRS use if:
- 1. Substantially the same information that each of these records would provide has been included in a report or reports filed in accordance with law with an agency or agencies of federal, state, or local government, and this information is current within 1 year; and
- 2. The school maintains copies of these reports from which this information is readily obtainable. Records described in section 7.01 providing information not included in reports filed with an agency or agencies must be maintained by the school for IRS use.
- **7.04 Failure to maintain records.** Failure to maintain or to produce, upon the proper request, the required records and information will create a presumption that the organization has failed to comply with these guidelines.

Part II. Supplemental Information

Use Part II to provide the narrative explanations required, if applicable, to supplement responses to Part I, lines 3, 4d, 5h, 6b, and 7. Part II may also be used to supplement other responses to questions on Schedule E (Form 990). In Part II, identify the specific line number that each response supports, in the order in which those lines appear on Schedule E (Form 990). Part II can be duplicated if more space is needed.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Go to www.irs.gov/Form990 for the latest information.

| L4 Ministries Inc | 920455560 |
|--|---|
| Form 990-EZ, Item 16 "Other Expenses": Administrative expense (website hosting, email, learning software | 5) \$934 43 |
| som 770 E2, item to other Expenses - Numination expense (Website Tosting) entiring software | , |
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| chedule O (Form 990) 2022 Page 2 ame of the organization Employer identification number Employer identification number |
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule O (Form 990), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/Form990.

Purpose of Schedule

An organization should use Schedule O (Form 990), rather than separate attachments, to provide the IRS with narrative information required for responses to specific questions on Form 990 or 990-EZ, and to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990 or 990-EZ.

Don't use Schedule O to supplement responses to questions in other schedules of the Form 990 or 990-EZ. Each of the other schedules includes a separate part for supplemental information.

Who Must File

All organizations that file Form 990 and certain organizations that file Form 990-EZ must file Schedule O (Form 990). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 11b and 19. If an organization isn't required to file Form 990 or 990-EZ but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

Specific Instructions

Use as many continuation sheets of Schedule O (Form 990) as needed.

Complete the required information on the appropriate line of Form 990 or 990-EZ prior to using Schedule O (Form 990).

Identify clearly the specific part and line(s) of Form 990 or 990-EZ to which each response relates. Follow the part and line sequence of Form 990 or 990-EZ.

Late return. If the return isn't filed by the due date (including any extension granted), attach a separate statement giving the reasons for not filing on time.

Don't use this schedule to provide the late-filing statement.

Amended return. If the organization checked the Amended return box on Form 990, Heading, item B, or Form 990-EZ, Heading, item B, use Schedule O (Form 990) to list each part or schedule and line item of the Form 990 or 990-EZ that was amended.

Group return. If the organization answered "Yes" to Form 990, line H(a), but "No" to line H(b), use a separate attachment to list the name, address, and EIN of each affiliated organization included in the group return. **Don't use** this schedule. See the instructions for Form 990, *I. Group Return*.

Form 990, Parts III, V, VI, VII, IX, XI, and XII. Use Schedule O (Form 990) to provide any narrative information required for the following questions in the Form 990.

- 1. Part III, Statement of Program Service Accomplishments.
 - a. "Yes" response to line 2.
 - b. "Yes" response to line 3.
 - c. Other program services on line 4d.
- 2. Part V, Statements Regarding Other IRS Filings and Tax Compliance.
 - a. "No" response to line 3b.
 - b. "Yes" or "No" response to line 13a.
 - c. "No" response to line 14b.
- 3. Part VI, Governance, Management, and Disclosure.
- a. Material differences in voting rights among members of the governing body on line 1a.
- b. Delegation of governing board's authority to executive committee on line 1a.
- c. "Yes" responses to lines 2 through 7b.
- d. "No" responses to lines 8a, 8b, and 10b.
 - e. "Yes" response to line 9.
- f. Description of process for review of Form 990, if any, in response to line 11b.
 - g. "Yes" response to line 12c.
- h. Description of process for determining **compensation**, in response to lines 15a and 15b.
- i. If applicable, in response to line 18, an explanation as to why the organization checked the *Other* box or didn't make any of Forms 1023, 1024, 1024-A, 990, or 990-T publicly available.
- j. Description of public disclosure of documents, in response to line 19.
- 4. Part VII, Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors.
- a. Explain if reporting of compensation paid by a related organization is provided only for the period during which the related organization was related, not the entire calendar year ending with or within the tax year, and state the period during which the related organization was related.
- b. Description of reasonable efforts undertaken to obtain information on compensation paid by related organizations, if the organization is unable to obtain such information to report in column (E).
- 5. Explanation for Part IX, Statement of Functional Expenses, line 11g (other fees for services), including the type and amount of each expense included on line 11g, if the amount in Part IX, line 11g, exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

- 6. Explanation for Part IX, Statement of Functional Expenses, line 24e (all other expenses), including the type and amount of each expense included on line 24e, if the amount on line 24e exceeds 10% of the amount in Part IX, line 25 (total functional expenses).
- 7. Part XI, Reconciliation of Net Assets. Explain any other changes in net assets or fund balances reported on line 9.
- 8. Part XII, Financial Statements and Reporting.
- a. Change in accounting method or description of other accounting method used on line 1.
- b. Change in committee oversight review from prior year on line 2c.
 - c. "No" response to line 3b.
- Form 990-EZ, Parts I, II, III, and V. Use Schedule O (Form 990) to provide any narrative information required for the following questions.
- 1. Part I, Revenue, Expenses, and Changes in Net Assets or Fund Balances.
- a. Description of other revenue, in response to line 8.
- b. List of grants and similar amounts paid, in response to line 10.
- c. Description of other expenses, in response to line 16.
- d. Explanation of other changes in net assets or fund balances, in response to line 20.
 - 2. Part II, Balance Sheets.
- a. Description of other assets, in response to line 24.
- b. Description of total liabilities, in response to line 26.
- 3. Description of other program services, in response to Part III, Statement of Program Service Accomplishments, line 31.
 - 4. Part V, Other Information.
 - a. "Yes" response to line 33.
 - b. "Yes" response to line 34.
- c. Explanation of why organization didn't report unrelated business gross income of \$1,000 or more to the IRS on Form 990-T, in response to line 35b.
 - d. "No" response to line 44d.

Other. Use Schedule O (Form 990) to provide narrative explanations and descriptions in response to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.



Don't include on Schedule O (Form 990) any social security number(s), because this schedule will be made available

for public inspection.

L4 Ministries Inc

Chart of Accounts with Government Form Lines

Printed: January 14, 2023

| Number | Name | Form | Line | Flip Sign? |
|--------|---|------|------|------------|
| 1000 | Checking Account | 990 | 22 | |
| 1010 | Savings Account | 990 | 22 | |
| 1050 | Temporary Cash Investments | 990 | 22 | |
| 1100 | Petty Cash | 990 | 22 | |
| 1200 | Pledges and Grants Receivable | 990 | 24 | |
| 1220 | Accounts Receivable | 990 | 24 | |
| 1300 | Notes and Loans Receivable | 990 | 24 | |
| 1310 | Inventories for sales or use | 990 | 24 | |
| 1320 | Prepaid expenses and deferred charges | 990 | 24 | |
| 1411 | Land, Buildings and Equipment | 990 | 23 | |
| 1420 | Accum. Deprec. Land, Buildings & Equip. | 990 | 23 | |
| 1500 | Long Term Investments | 990 | 24 | |
| 2000 | Credit Card | 990 | 26 | |
| 2100 | Accounts Payable | 990 | 26 | |
| 2110 | Accrued Expenses | 990 | 26 | |
| 2290 | Other Liabilities | 990 | 26 | |
| 2300 | Grants Payable | 990 | 26 | |
| 2310 | Deferred Revenue | 990 | 26 | |
| 2400 | Mortgages and Notes Payable | 990 | 26 | |
| 3010 | General Fund | 990 | 21 | |
| 3110 | Temporary Fund #1 | 990 | 21 | |
| 3210 | Permanent Fund #1 | 990 | 21 | |
| 4000 | Contributions, Gifts, Grants etc. | 990 | 01 | |
| 4020 | Membership Dues and Assessments | 990 | 03 | |
| 4100 | Program Service Revenue | 990 | 02 | |
| 4210 | Investment Income | 990 | 04 | |
| 4310 | Gross Sales of Assets | 990 | 05a | |
| 4320 | Sales of Assets costs and expenses | 990 | 05b | |
| 4360 | Gross Gaming Activities Income | 990 | 06a | |
| 4370 | Gross Fundraising Events Income | 990 | 06b | |
| 4380 | Gaming and Fundraising Direct Expenses | 990 | 06c | |
| 4460 | Gross Sales of Inventory | 990 | 07a | |
| 4470 | Cost of Goods Sold (Inventory) | 990 | 07b | |
| 4530 | Temporary Fund #1 Revenue | 990 | 80 | |
| 4560 | Permanent Fund #1 Revenue | 990 | 80 | |
| 4590 | All Other Revenue | 990 | 80 | |
| 5000 | Grants etc. Paid | 990 | 10 | |
| 5050 | Benefits paid to or for Members | 990 | 11 | |
| 5300 | Fees for Services (non-employees) | 990 | 13 | |
| 5450 | Occupancy, Rent, Utilities etc. | 990 | 14 | |
| 5451 | Legal Expense | | | |
| | | | | |

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L4 Ministries and Page 2 of 2

Chart of Accounts with Government Form Lines

| Number | Name | Form | Line | Flip Sign? |
|--------|-------------------------------------|------|------|------------|
| 5500 | Printing, Publications and Shipping | 990 | 15 | _ |
| 5510 | ADVERTISING EXPENSE | | | |
| 5720 | Temporary Fund #1 Expense | 990 | 16 | |
| 5740 | Permanent Fund #1 Expense | 990 | 16 | |
| 5780 | All Other Expenses | 990 | 16 | |

Balance Sheet accounts for Form 990

As of 12/31/2022

| Form Line | Accou | nt | | Amount |
|-----------|-------|------------------|-------------------|----------|
| 21 | 3010 | General Fund | | 1,462.57 |
| | | | Total for line 21 | 1,462.57 |
| 22 | 1010 | Savings Account | | 850.05 |
| 22 | 1000 | Checking Account | | 612.52 |
| | | | Total for line 22 | 1,462.57 |

L'44/Ministries Inc

Income Statement accounts for Form 990

he period 1/1/2022 to 12/31/2022

| Line | Accou | ınt | | Amount |
|------|-------|-------------------------------------|-------------------|----------|
| 01 | 4000 | Contributions, Gifts, Grants etc. | | 6,675.64 |
| | | | Total for line 01 | 6,675.64 |
| 02 | 4100 | Program Service Revenue | | 1,400.00 |
| | | | Total for line 02 | 1,400.00 |
| 80 | 4590 | All Other Revenue | | 0.05 |
| | | | Total for line 08 | 0.05 |
| 10 | 5000 | Grants etc. Paid | | 500.00 |
| | | | Total for line 10 | 500.00 |
| 13 | 5300 | Fees for Services (non-employees) | | 1,039.50 |
| | | | Total for line 13 | 1,039.50 |
| 14 | 5450 | Occupancy, Rent, Utilities etc. | | 1,200.00 |
| | | | Total for line 14 | 1,200.00 |
| 15 | 5500 | Printing, Publications and Shipping | | 1,069.38 |
| | | | Total for line 15 | 1,069.38 |
| 16 | 5780 | All Other Expenses | | 934.36 |
| | | | Total for line 16 | 934.36 |