Yackel & Associates, PLLC
19721 Scriber Lake Rd Ste C
Lynnwood, WA 98036-6119

Everett Gospel Mission
PO Box 423
Everett, WA 98206

Forms 990 / 990-EZ Return Summary

For calendar year 2016, or tax year beginning 07/01/16 , and ending 06/30/17

91-0780146

EVERETT GOSPEL MISSION

Net Asset / Fund Balance at Beginning of Year			3,083,385
Revenue			
Contributions	4,629,499		
Program service revenue	144,050		
Investment income	4,388		
Capital gain / loss			
Fundraising / Gaming:			
Gross revenue			
Direct expenses			
Net income			
Other income	81,617		
Total revenue		4,859,554	
Expenses			
Program services	3,727,147		
Management and general	318,732		
Fundraising	661,748		
Total expenses		4,707,627	
Excess / (deficit)			151,927
Changes			755
Net Asset / Fund Balance at End of Year			3,236,067

Reconciliation of Revenue		**Reconciliation of Expenses**	
Total revenue per financial statements	4,859,554	Total expenses per financial statements	4,706,872
Less:		Less:	
Unrealized gains		Donated services	
Donated services		Prior year adjustments	
Recoveries		Losses	
Other		Other	
Plus:		Plus:	
Investment expenses		Investment expenses	
Other		Other	
Total revenue per return	4,859,554	**Total expenses per return**	4,707,627

Balance Sheet

	Beginning	Ending	Differences
Assets	4,474,422	4,601,419	
Liabilities	1,391,037	1,365,352	
Net assets	3,083,385	3,236,067	152,682

Miscellaneous Information

Amended return	
Return / extended due date	05/15/18
Failure to file penalty	

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

u Do not enter social security numbers on this form as it may be made public.

u Information about Form 990 and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2016

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 07/01/16 **, and ending** 06/30/17

B Check if applicable:
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Final return/terminated
- [ ] Amended return
- [ ] Application pending

C Name of organization: EVERETT GOSPEL MISSION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): PO BOX 423 | Room/suite

City or town, state or province, country, and ZIP or foreign postal code: EVERETT WA 98206

D Employer identification number: 91-0780146

E Telephone number: 425-252-1297

G Gross receipts $ 4,859,554

F Name and address of principal officer:
SYLVIA ANDERSON
PO BOX 423
EVERETT WA 98206

H(a) Is this a group return for subordinates? [ ] Yes [X] No

H(b) Are all subordinates included? [ ] Yes [ ] No
If "No," attach a list. (see instructions)

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) t (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: u WWW.EGMISSION.ORG

H(c) Group exemption number u

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other u

L Year of formation: 1961 **M** State of legal domicile: WA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
EVERETT GOSPEL MISSION ENGAGES WITH THE COMMUNITY TO ALLEVIATE POVERTY.

2 Check this box u [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	31
6 Total number of volunteers (estimate if necessary)	6	525
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0

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	Prior Year	Current Year
Revenue		
8 Contributions and grants (Part VIII, line 1h)	4,448,573	4,629,499
9 Program service revenue (Part VIII, line 2g)	148,210	144,050
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-4,541	4,388
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,244	81,617
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,602,486	4,859,554
Expenses		
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,160,569	1,219,282
16a Professional fundraising fees (Part IX, column (A), line 11e)	217,327	228,080
b Total fundraising expenses (Part IX, column (D), line 25) u 661,748		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	3,197,281	3,260,265
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	4,575,177	4,707,627
19 Revenue less expenses. Subtract line 18 from line 12	27,309	151,927

Net Assets or Fund Balances	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	4,474,422	4,601,419
21 Total liabilities (Part X, line 26)	1,391,037	1,365,352
22 Net assets or fund balances. Subtract line 21 from line 20	3,083,385	3,236,067

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer | Date

ROBERT V. YACKEL TREASURER

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
ROBERT V. YACKEL, CPA		05/07/18		P00012992

Firm's name } YACKEL & ASSOCIATES, PLLC — Firm's EIN } 47-2417693

Firm's address } 19721 SCRIBER LAKE RD STE C, LYNNWOOD, WA 98036-6119 — Phone no. 425-670-1310

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III .... [X]

1 Briefly describe the organization's mission:

EVERETT GOSPEL MISSION ENGAGES WITH THE COMMUNITY TO ALLEVIATE POVERTY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? .... [ ] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? .... [ ] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 3,283,421 including grants of $) (Revenue $)

EVERETT GOSPEL MISSION ENGAGES WITH THE COMMUNITY TO ALLEVIATE POVERTY. WE PROVIDE FOOD, SHELTER AND COUNSELING TO LOW-INCOME AND TRANSIENT INDIVIDUALS. APPROXIMATELY 225 PEOPLE ARE SERVED EACH DAY.

4b (Code:) (Expenses $ including grants of $) (Revenue $)

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O.)

(Expenses $ 443,726 including grants of $) (Revenue $)

4e Total program service expenses u 3,727,147

Part IV Checklist of Required Schedules

		Line	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17	X	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	6			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	31			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		X
b	If "Yes," enter the name of the foreign country: u					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI . . . X

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . . 1a 13 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . . . 1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed u NONE

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: u

EVERETT GOSPEL MISSION PO BOX 423
EVERETT WA 98206 425-252-1297

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII . . . . ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JIM APOSTOLOS BOARD MEMBER	0.00 0.00	X						0	0	0
(2) TRISH LYON PRESIDENT	4.00 0.00	X		X				0	0	0
(3) RANDY MYERS BOARD MEMBER	0.00 0.00	X						0	0	0
(4) ROBERT V. YACKEL TREASURER	1.00 0.00	X		X				0	0	0
(5) CHRISTINA NELSON BOARD MEMBER	0.00 0.00	X						0	0	0
(6) DAVID PUGH SECRETARY	3.00 0.00	X		X				0	0	0
(7) DEBBIE STECK BOARD MEMBER	0.00 0.00	X						0	0	0
(8) LANNY ALBU VICE PRESIDENT	4.00 0.00	X		X				0	0	0
(9) MARC NANCE BOARD MEMBER	0.00 0.00	X						0	0	0
(10) PAUL LAMBERTON BOARD MEMBER	0.00 0.00	X						0	0	0
(11) RANDY HAACKE BOARD MEMBER	0.00 0.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(12) TOM WALKER BOARD MEMBER	0.00 0.00	X						0	0	0
(13) SYLVIA ANDERSON CEO	40.00 0.00			X				118,950	0	24,143

		(D)	(E)	(F)
1b	Sub-total u	118,950		24,143
c	Total from continuation sheets to Part VII, Section A u			
d	Total (add lines 1b and 1c) u	118,950		24,143

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization u 1

			Yes	No
3	Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization u 0

Part VIII **Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	323,357				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	4,306,142				
	g	Noncash contributions included in lines 1a-1f: $ 1,446,513						
	h	**Total.** Add lines 1a–1f			4,629,499			
Program Service Revenue			Busn. Code					
	2a	BED DONATIONS			74,122	74,122		
	b	HOUSING			69,655	69,655		
	c	LOCKER REVENUE			273	273		
	d							
	e							
	f	All other program service revenue						
	g	**Total.** Add lines 2a–2f			144,050			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			4,388			4,388
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
			(i) Real	(ii) Personal				
	6a	Gross rents						
	b	Less: rental exps.						
	c	Rental inc. or (loss)						
	d	Net rental income or (loss)						
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory						
	b	Less: cost or other basis & sales exps.						
	c	Gain or (loss)						
	d	Net gain or (loss)						
	8a	Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18	a					
	b	Less: direct expenses	b					
	c	Net income or (loss) from fundraising events						
	9a	Gross income from gaming activities. See Part IV, line 19	a					
	b	Less: direct expenses	b					
	c	Net income or (loss) from gaming activities						
	10a	Gross sales of inventory, less returns and allowances	a					
	b	Less: cost of goods sold	b					
	c	Net income or (loss) from sales of inventory						
		Miscellaneous Revenue	Busn. Code					
	11a	FUNDRAISING GROSS REVENUE			42,061	42,061		
	b	MESH			26,570	26,570		
	c	MISCELLANEOUS REVENUE			12,486	12,486		
	d	All other revenue			500	500		
	e	**Total.** Add lines 11a–11d			81,617			
	12	**Total revenue.** See instructions.			4,859,554	225,667	0	4,388

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	143,093	93,000	27,093	23,000
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	634,304	419,248	116,950	98,106
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	38,837	25,591	7,196	6,050
9 Other employee benefits	32,543	21,443	6,030	5,070
10 Payroll taxes	370,505	244,136	68,650	57,719
11 Fees for services (non-employees):				
a Management				
b Legal	200,288	111,178	39,651	49,459
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	228,080			228,080
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	106,204	99,801	1,246	5,157
12 Advertising and promotion				
13 Office expenses	10,230	5,995	3,877	358
14 Information technology				
15 Royalties				
16 Occupancy	423,281	419,437	3,844	
17 Travel	33,284	30,532	841	1,911
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	7,287	5,877	1,157	253
20 Interest	51,999	39,681	12,318	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	199,514	199,514		
23 Insurance	28,136	28,136		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOOD	912,299	912,031	268	
b PERSONAL ITEMS	588,956	588,956		
c HOUSING & ESSENTIALS	203,555	203,555		
d SUPPLIES	158,879	151,212	7,340	327
e All other expenses	336,353	127,824	22,271	186,258
25 **Total functional expenses.** Add lines 1 through 24e	4,707,627	3,727,147	318,732	661,748
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here u ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest bearing			185,309	1	208,688
	2	Savings and temporary cash investments			451,820	2	603,212
	3	Pledges and grants receivable, net			34,229	3	34,935
	4	Accounts receivable, net			59,911	4	88,325
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			61,500	8	66,106
	9	Prepaid expenses and deferred charges			56,747	9	43,654
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	6,441,506			
	b	Less: accumulated depreciation	10b	2,894,125	3,612,049	10c	3,547,381
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets			6,422	14	6,422
	15	Other assets. See Part IV, line 11			6,435	15	2,696
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			4,474,422	16	4,601,419
Liabilities	17	Accounts payable and accrued expenses			189,605	17	202,640
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			1,191,338	23	1,162,712
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			10,094	25	
	26	**Total liabilities.** Add lines 17 through 25			1,391,037	26	1,365,352
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here** u [X] **and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			2,292,371	27	2,267,818
	28	Temporarily restricted net assets			754,007	28	933,314
	29	Permanently restricted net assets			37,007	29	34,935
		Organizations that do not follow SFAS 117 (ASC 958), check here u ☐ **and complete lines 30 through 34.**					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building, or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			3,083,385	33	3,236,067
	34	Total liabilities and net assets/fund balances			4,474,422	34	4,601,419

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Part XI **Reconciliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,859,554
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,707,627
3	Revenue less expenses. Subtract line 2 from line 1	3	151,927
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,083,385
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	755
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,236,067

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII ☐

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

u **Attach to Form 990 or Form 990-EZ.**

u **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization
EVERETT GOSPEL MISSION

Employer identification number
91-0780146

Part I **Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 [X] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 [ ] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 [ ] An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 [ ] An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a [ ] **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b [ ] **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c [ ] **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d [ ] **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e [ ] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1–10 above (see instructions))	**(iv)** Is the organization listed in your governing document?		**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
			Yes	**No**		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (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) u	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
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)						
6 **Public support.** Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2015 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test—2016.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test—2015.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2016.** 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 organization ▶ ☐

b **10%-facts-and-circumstances test—2015.** 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 organization ▶ ☐

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

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) u	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in 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 (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2016** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2015** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	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		
c	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 12a or 12b in Part I, answer (b) and (c) 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.*	4b		
c	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.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) 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).*	5a		
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		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	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? *If "Yes," provide detail in **Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	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	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI.***	9b		
c	Did a disqualified person (as defined in 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 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.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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		

Section 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 the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			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?	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 in (2), 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 supported organizations played in this regard.*	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**).*

- a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*
- b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*
- c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer (a) and (b) below.***			
a	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 in (a) 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	Parent of Supported Organizations. ***Answer (a) and (b) below.***			
a	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? *Provide details in* ***Part VI.***	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.*	3b		

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4).	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d **Total** (add lines 1a, 1b, and 1c)	1d		
e **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 1-1/2% 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 .035.	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V **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	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions.	
7	**Total annual distributions.** Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 2016 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

	Section E - Distribution Allocations (see instructions)	**(i) Excess Distributions**	**(ii) Underdistributions Pre-2016**	**(iii) Distributable Amount for 2016**
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	**Excess distributions carryover to 2017.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b	Excess from 2013			
c	Excess from 2014			
d	Excess from 2015			
e	Excess from 2016			

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.)

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

u **Attach to Form 990, Form 990-EZ, or Form 990-PF.**
u **Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at *www.irs.gov/form990.***

OMB No. 1545-0047

2016

Name of the organization	**Employer identification number**
EVERETT GOSPEL MISSION	91-0780146

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[ ] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the $33^1/_3$ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . . ▶ $ . . . .

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization EVERETT GOSPEL MISSION

Employer identification number 91-0780146

Part I **Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TRADER JOE'S 800 SOUTH SHAMROCK AVE MONROVIA CA 91016	$ 140,360	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
2	SNOHOMISH COUNTY HUMAN SERVICES DEPT 4TH FLOOR, ADMIN WEST BUILDING 3000 ROCKEFELLER AVE, M/S 305 EVERETT WA 98201	$ 278,444	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
3		$ 100,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization: EVERETT GOSPEL MISSION

Employer identification number: 91-0780146

Part II **Noncash Property** (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	FOOD	$ 140,360	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

u Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
u Attach to Form 990.
u Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047
2016
Open to Public Inspection

Name of the organization	Employer identification number
EVERETT GOSPEL MISSION	91-0780146

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (e.g., recreation or education)
- ☐ Preservation of a historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year u

4 Number of states where property subject to conservation easement is located u

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
u

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
u $

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 u $

(ii) Assets included in Form 990, Part X u $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 u $

b Assets included in Form 990, Part X u $

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV **Escrow and Custodial Arrangements.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V **Endowment Funds.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment u %
b Permanent endowment u %
c Temporarily restricted endowment u %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI **Land, Buildings, and Equipment.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		586,482		586,482
b Buildings		5,072,557	2,376,303	2,696,254
c Leasehold improvements				
d Equipment		782,467	517,822	264,645
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) u				3,547,381

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* u		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 13.)* u		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* u	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* u	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	4,859,554
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	4,859,554
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	4,859,554

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	4,706,872
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	4,706,872
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	755		
c	Add lines **4a** and **4b**			4c	755
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	4,707,627

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER

BOOK / TAX DEPRECIATION DIFFERENCE $ 755

Part XIII Supplemental Information *(continued)*

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

u **Attach to Form 990 or Form 990-EZ.**

u **Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.***

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization: EVERETT GOSPEL MISSION

Employer identification number 91-0780146

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a [X] Mail solicitations
- b [X] Internet and email solicitations
- c [X] Phone solicitations
- d [X] In-person solicitations
- e [X] Solicitation of non-government grants
- f [X] Solicitation of government grants
- g [X] Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? [X] **Yes** [ ] **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fund-raiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total ▶							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

WASHINGTON

Part II **Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				

Part III **Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes .... % ☐ No	☐ Yes .... % ☐ No	☐ Yes .... % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain:

11 Does the organization conduct gaming activities with nonmembers? ☐ **Yes** ☐ **No**

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ **Yes** ☐ **No**

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	**13a**	%
b	An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name u

Address u

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ **Yes** ☐ **No**

b If "Yes," enter the amount of gaming revenue received by the organization u $ and the amount of gaming revenue retained by the third party u $

c If "Yes," enter name and address of the third party:

Name u

Address u

16 Gaming manager information:

Name u

Gaming manager compensation u $

Description of services provided u

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ **Yes** ☐ **No**

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year u $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

u Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
u Attach to Form 990.
u Information about Schedule M (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2016

Open To Public Inspection

Name of the organization: EVERETT GOSPEL MISSION

Employer identification number: 91-0780146

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art — Works of art				
2	Art — Historical treasures				
3	Art — Fractional interests				
4	Books and publications				
5	Clothing and household goods	X		617,209	MARKET VALUE
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities — Publicly traded				
10	Securities — Closely held stock				
11	Securities — Partnership, LLC, or trust interests				
12	Securities — Miscellaneous				
13	Qualified conservation contribution — Historic structures				
14	Qualified conservation contribution — Other				
15	Real estate — Residential				
16	Real estate — Commercial				
17	Real estate — Other				
18	Collectibles				
19	Food inventory	X	2400	688,944	MARKET VALUE
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other u ( )	X	1	140,360	
26	Other u ( )				
27	Other u ( )				
28	Other u ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . 29

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

u Attach to Form 990 or 990-EZ.

u Information about Schedule O (Form 990 or 990-EZ) and its instructions is *at www.irs.gov/form990.*

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization	Employer identification number
EVERETT GOSPEL MISSION	91-0780146

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

EVERETT GOSPEL MISSION ENGAGES WITH THE COMMUNITY TO ALLEVIATE POVERTY. WE PROVIDE FOOD, SHELTER AND COUNSELING TO LOW-INCOME AND TRANSIENT INDIVIDUALS. APPROXIMATELY 225 PEOPLE ARE SERVED EACH DAY.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

THE 990 IS PREPARED BASED UPON THE ANNUAL AUDITED FINANCIAL STATEMENT WHICH IS REVIEWED BY THE BOARD. THE TREASURER PREPARES THE 990 AND THEN THE BOARD REVIEWS IT.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE MISSION'S CONFLICT OF INTEREST POLICY IS MONITORED ANNUALY. EACH BOARD MEMBER AND OFFICER IS ASKED AT THE FIRST OF EACH YEAR REGARDING ANY CONFLICTS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE BOARD REVIEWS AND APPROVES THE COMPENSATION FOR THE TOP OFFICIAL USING MARKET DATA FOR SIMILAR ORGANIZATIONS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

THE BOARD REVIEWS AND APPROVES THE COMPENSATION FOR OFFICERS AND KEY EMPLOYEES USING MARKET DATA FOR SIMILAR ORGANIZATIONS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST TO THE ORGANIZATION'S

Name of the organization: EVERETT GOSPEL MISSION

Employer identification number: 91-0780146

OFFICE.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

BOOK / TAX DEPRECIATION DIFFERENCE $ 755

PAGE 1 OF 1

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property)

u **Attach to your tax return.**

u **Information about Form 4562 and its separate instructions is at *www.irs.gov/form4562.***

OMB No. 1545-0172

2016

Attachment Sequence No. **179**

Name(s) shown on return: EVERETT GOSPEL MISSION

Identifying number: 91-0780146

Business or activity to which this form relates: INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,010,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2015 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12 ▶	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	199,514

Part III MACRS Depreciation (Don't include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2016	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here u ☐		

Section B—Assets Placed in Service During 2016 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	199,514
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

THERE ARE NO AMOUNTS FOR PAGE 2

91-0780146

Federal Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Other Depreciation:												
1	Phone System	1/01/12	48,379				48,379	7	MO	S/L	31,101	6,911
2	Canon copiers & scanners	1/01/12	45,854				45,854	7	MO	S/L	29,479	6,550
5	Construction Costs	10/01/92	1,472,180				1,472,180	40	MO	S/L	1,140,939	36,805
6	Fence	6/01/93	1,147				1,147	7	MO	S/L	1,147	0
7	Carpeting	8/11/00	6,190				6,190	7	MO	S/L	6,190	0
8	Improvements - Shower	10/10/02	22,924				22,924	40	MO	S/L	7,784	574
9	Improvements - Men's Upstairs Showe	1/14/04	96,686				96,686	40	MO	S/L	30,214	2,418
10	20 Gray single-tier lockers	2/05/04	3,571				3,571	7	MO	S/L	3,571	0
11	Improvements - Shower	8/20/04	7,211				7,211	40	MO	S/L	2,148	181
12	Improvements - Shower (flooring)	9/30/04	1,450				1,450	20	MO	S/L	858	72
13	Improvements - Shower (flooring)	3/09/05	1,182				1,182	20	MO	S/L	670	59
14	Boiler (Men's Mission)	11/03/05	9,999				9,999	40	MO	S/L	2,666	250
15	Bathroom Remodel (Men's Mission)	4/29/08	25,486				25,486	40	MO	S/L	5,256	638
16	Exterior Lights	1/05/09	11,443				11,443	20	MO	S/L	4,291	572
17	Flooring	3/31/11	1,427				1,427	40	MO	S/L	190	36
18	Roof and floor in day room	8/30/11	77,880				77,880	40	MO	S/L	9,573	1,947
19	Reception area	8/30/11	10,986				10,986	40	MO	S/L	1,350	275
20	Sprinkler system upgrade	6/22/12	7,426				7,426	20	MO	S/L	1,516	371
21	Storage shed	5/31/13	1,847				1,847	20	MO	S/L	292	93
22	Gideon Transitional House	2/12/02	343,000				343,000	40	MO	S/L	123,623	8,575
23	Roof (30 year laminated composition	12/20/04	27,668				27,668	30	MO	S/L	10,683	922
24	Flooring	1/19/05	3,146				3,146	10	MO	S/L	3,146	0
25	Cable Lines	1/05/09	2,289				2,289	20	MO	S/L	858	115
26	Painting	8/21/09	74,528				74,528	27	MO	S/L	18,745	2,710
27	Admin Building	2/01/12	436,853				436,853	40	MO	S/L	45,195	10,922
28	Admin bldgs deck	5/17/12	1,984				1,984	40	MO	S/L	207	49
29	Katherine Court Mission	1/01/98	168,094				168,094	40	MO	S/L	86,148	4,203
30	New Women's Mission Buildings	1/01/99	1,390,557				1,390,557	40	MO	S/L	590,987	34,764
31	Fencing	3/31/00	31,662				31,662	7	MO	S/L	31,662	0
32	Improvements - Kitchen	4/30/03	9,562				9,562	40	MO	S/L	3,148	239
33	Vinyl flooring - kitchen hallway	9/24/03	12,619				12,619	40	MO	S/L	4,049	315
34	Storage shed	9/25/03	1,177				1,177	20	MO	S/L	755	59
35	Flooring	7/20/04	513				513	10	MO	S/L	513	0
36	75 Gallon Hot Water Tank	10/28/04	2,390				2,390	15	MO	S/L	1,872	159
37	Remodel Bldg A (new office)	11/10/04	13,499				13,499	40	MO	S/L	3,937	338
38	Rheem Water Tank	3/04/05	1,570				1,570	15	MO	S/L	1,186	105
39	Elevator Gate (Women's Mission)	1/13/06	3,028				3,028	40	MO	S/L	795	76
40	Wire for Internet Connection	2/22/08	1,443				1,443	20	MO	S/L	607	73
41	Siding (Women's Mission)	5/30/08	10,834				10,834	40	MO	S/L	2,212	271
42	Architect Fees	7/01/08	39,717				39,717	40	MO	S/L	7,943	993
43	Siding (Women's Mission)	1/06/09	122,225				122,225	40	MO	S/L	22,917	3,056
44	Refuse Container - Siding	1/06/09	1,521				1,521	40	MO	S/L	285	38
45	Flooring	1/31/11	3,175				3,175	10	MO	S/L	1,746	317
46	Adopt a Room	4/30/11	5,096				5,096	40	MO	S/L	669	127
47	Flooring - rooms 1 and 3	12/29/11	3,029				3,029	10	MO	S/L	1,388	303
48	Acoustic ceiling (new)	2/29/12	1,450				1,450	40	MO	S/L	160	36
49	Electrical upgrades	3/12/12	4,046				4,046	40	MO	S/L	438	101
50	Sprinkler heads bldg B	3/20/12	885				885	10	MO	S/L	384	88
51	Floor replacement - all main floors	3/27/12	52,844				52,844	10	MO	S/L	22,899	5,284
52	Flooring in Bldg D rooms	4/30/12	5,447				5,447	10	MO	S/L	2,315	545
53	Floor in Childrens Play Room Bldg D	5/15/12	3,708				3,708	10	MO	S/L	1,545	371
54	Womens appliances donated by Lowes	12/31/12	22,500				22,500	10	MO	S/L	8,063	2,250
55	Land - Smith St. - Men's Mission	1/01/98	126,843				126,843	99	--	Land	0	0
56	Land - Katherine Court	1/02/98	50,000				50,000	99	--	Land	0	0
57	Land - New Women's Mission	1/01/99	347,639				347,639	99	--	Land	0	0
58	Land - Gideon Transitional House	2/12/02	62,000				62,000	99	--	Land	0	0
59	Floor buffer	6/01/93	866				866	7	MO	S/L	866	0
61	Steam table	10/15/00	1,197				1,197	7	MO	S/L	1,197	0
62	Boiler	10/17/00	4,043				4,043	7	MO	S/L	4,043	0
63	Pressure washer	12/29/00	693				693	5	MO	S/L	693	0
64	Appliances	2/06/01	762				762	5	MO	S/L	762	0
65	Shed	2/13/01	1,280				1,280	7	MO	S/L	1,280	0
66	3 Poly Truck - 30 Bushel	2/13/01	814				814	7	MO	S/L	814	0
67	Sound system	3/30/01	6,616				6,616	7	MO	S/L	6,616	0
71	Gas dryer	6/29/01	628				628	7	MO	S/L	628	0
73	Washer/Extractor	7/20/01	6,444				6,444	5	MO	S/L	6,444	0
74	Ice maker	7/20/01	2,872				2,872	7	MO	S/L	2,872	0
75	Maytag washer	7/31/01	605				605	5	MO	S/L	605	0
77	4 Dryers	8/22/01	6,379				6,379	5	MO	S/L	6,379	0
78	Maytag washer	9/13/01	687				687	5	MO	S/L	687	0

91-0780146

Federal Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
79	1996 Cheverolet C3 Pickup Truck	11/20/01	12,000				12,000	5	MO	S/L	12,000	0
81	Computer equipment - S.A. & M.R.	8/05/03	344				344	7	MO	S/L	344	0
82	2 Door Freezer - Men's Mission	8/07/03	2,843				2,843	7	MO	S/L	2,843	0
84	14in Security System w/ 4 Cameras &	2/20/04	915				915	7	MO	S/L	915	0
85	1991 Dodge Ram Van B350	3/15/04	1,300				1,300	5	MO	S/L	1,300	0
88	Turbo Air MSR-49NM	6/21/04	2,463				2,463	7	MO	S/L	2,463	0
94	4 Continental Washers (Women's)	9/29/04	10,362				10,362	15	MO	S/L	8,175	690
98	Lydia House Furniture (12 chest)	10/28/04	6,650				6,650	5	MO	S/L	6,650	0
102	Storage Shed	8/04/05	867				867	7	MO	S/L	867	0
116	Digital Audio Conference	8/03/06	956				956	5	MO	S/L	956	0
118	Folder Inserter/Letter Opener	8/22/06	7,420				7,420	5	MO	S/L	7,420	0
119	Desk (John)	9/05/06	707				707	7	MO	S/L	707	0
121	File Cabinet	10/10/06	582				582	7	MO	S/L	582	0
124	Table	12/13/06	574				574	7	MO	S/L	574	0
125	Software - Donor-2	12/14/06	16,700				16,700	3	MO	S/L	16,700	0
126	Computer	1/09/07	373				373	5	MO	S/L	373	0
130	Carpet - Men's Mission	5/25/07	2,124				2,124	7	MO	S/L	2,124	0
131	Tables & Chairs	7/30/07	2,189				2,189	7	MO	S/L	2,189	0
132	75 Folding Cots - Men's Mission	10/04/07	4,835				4,835	7	MO	S/L	4,835	0
133	CFD2R Refrigerator - Men's Mission	10/04/07	2,932				2,932	7	MO	S/L	2,932	0
134	Tables	11/20/07	615				615	7	MO	S/L	615	0
135	HD TV	1/31/08	3,594				3,594	7	MO	S/L	3,594	0
136	Computer Equipment	2/01/08	651				651	5	MO	S/L	651	0
137	Computer Equipment	3/03/08	1,839				1,839	5	MO	S/L	1,839	0
138	Furnace	3/13/08	3,475				3,475	5	MO	S/L	3,475	0
139	Oven	5/22/08	845				845	7	MO	S/L	845	0
140	Patio Table	5/29/08	1,280				1,280	7	MO	S/L	1,280	0
141	Washer (2) / Dryer (2)	9/22/08	2,224				2,224	7	MO	S/L	2,224	0
142	Refrigerator	12/15/08	1,200				1,200	7	MO	S/L	1,200	0
143	Meat Slicer	1/22/09	1,307				1,307	7	MO	S/L	1,307	0
144	Men's Washer/Dryer	2/18/09	2,353				2,353	7	MO	S/L	2,353	0
145	Furniture - Lydia House	2/25/09	1,000				1,000	7	MO	S/L	1,000	0
146	Dishwasher	3/02/09	662				662	7	MO	S/L	662	0
147	Refrigerator	3/05/09	7,711				7,711	7	MO	S/L	7,711	0
148	Patio Furniture	3/17/09	1,000				1,000	7	MO	S/L	1,000	0
149	Furniture	3/19/09	601				601	7	MO	S/L	601	0
152	Equipment	8/04/09	764				764	5	MO	S/L	764	0
153	Walk in Freezer (Mens)	8/18/09	34,944				34,944	7	MO	S/L	34,528	416
154	Sign (Men's)	9/01/09	1,247				1,247	27	MO	S/L	310	45
155	Refrigerator	9/22/09	981				981	5	MO	S/L	981	0
156	Television (Wall mount)	10/15/09	909				909	5	MO	S/L	909	0
157	Tables & Chairs (Men's)	10/30/09	787				787	7	MO	S/L	759	28
158	2008 Ford F250 Super Cab	11/30/09	29,037				29,037	5	MO	S/L	29,037	0
159	Equipment	12/02/09	3,141				3,141	5	MO	S/L	3,141	0
160	Sign	12/14/09	1,247				1,247	27	MO	S/L	298	46
161	Equipment	2/01/10	964				964	5	MO	S/L	964	0
162	Twin Mattresses (22)	2/16/10	3,884				3,884	7	MO	S/L	3,561	323
163	Software - Men's Heart Program	3/08/10	1,990				1,990	3	MO	S/L	1,990	0
164	Hand Dryers (5)	3/24/10	1,559				1,559	7	MO	S/L	1,411	148
165	Chairs (60)	4/01/10	1,273				1,273	7	MO	S/L	1,137	136
166	Video Camera	5/05/10	796				796	5	MO	S/L	796	0
167	Water Heater (Men's)	5/05/10	8,351				8,351	27	MO	S/L	1,873	303
168	DVD Machine	6/01/10	772				772	5	MO	S/L	772	0
169	Bunk Beds (Men's) SL	7/23/10	13,455				13,455	7	MO	S/L	10,572	1,922
170	Bundbeds	7/23/10	299				299	7	MO	S/L	256	43
171	Tape Drive	8/27/10	1,496				1,496	5	MO	S/L	1,496	0
172	Think Pad (John)	10/17/10	1,399				1,399	5	MO	S/L	1,399	0
173	Water heater (mens)	11/22/10	3,350				3,350	40	MO	S/L	475	83
174	Washer/Dryer (mens)	1/28/11	2,670				2,670	7	MO	S/L	2,098	381
175	Beds	3/03/11	1,429				1,429	7	MO	S/L	1,089	204
176	Mattresses	3/03/11	1,517				1,517	7	MO	S/L	1,156	217
177	Tankless Water Heater (womens)	3/15/11	3,826				3,826	40	MO	S/L	510	96
178	Furniture	3/30/11	823				823	7	MO	S/L	627	118
179	Van (Women's shelter)	3/30/11	8,892				8,892	5	MO	S/L	8,892	0
180	Furniture	4/06/11	1,235				1,235	7	MO	S/L	926	177
181	Bed Frames (bldg A)	5/03/11	823				823	7	MO	S/L	608	117
182	Furniture (Bldg A)	5/03/11	1,213				1,213	7	MO	S/L	895	174
183	Mattresses (bldg D)	5/03/11	1,335				1,335	7	MO	S/L	985	191
184	Sofa	5/03/11	1,737				1,737	7	MO	S/L	1,282	249
185	Projector	5/03/11	753				753	7	MO	S/L	556	107
186	Server	7/09/11	2,038				2,038	5	MO	S/L	2,038	0
187	Womens bed frames	7/13/11	10,346				10,346	7	MO	S/L	7,390	1,478

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
188	Womens freezer	7/23/11	1,599				1,599	7	MO	S/L	1,142	229
189	Fire alarm at admin bldg	9/01/11	3,462				3,462	7	MO	S/L	2,390	495
190	Mens chairs	9/09/11	3,570				3,570	7	MO	S/L	2,465	510
191	Reception chairs	9/30/11	986				986	7	MO	S/L	681	141
192	XXpad think pad dock station	10/13/11	2,452				2,452	5	MO	S/L	2,329	123
193	Womens beds	11/04/11	6,131				6,131	7	MO	S/L	4,087	876
194	Wire shelving for HENS	11/09/11	2,824				2,824	7	MO	S/L	1,883	403
195	Telephone cable	11/15/11	1,047				1,047	7	MO	S/L	698	150
196	Data cable - admin mens & womens	11/16/11	3,725				3,725	7	MO	S/L	2,483	532
197	Projector	11/18/11	3,340				3,340	7	MO	S/L	2,227	477
198	Admin furniture	11/29/11	12,082				12,082	7	MO	S/L	8,055	1,726
199	Frig/cooler	12/01/11	3,822				3,822	7	MO	S/L	2,503	546
200	Kitchen appliances	12/02/11	2,767				2,767	7	MO	S/L	1,812	395
201	Security system	12/21/11	902				902	7	MO	S/L	591	128
202	Golf cart & accessories	12/22/11	2,036				2,036	7	MO	S/L	1,333	291
203	Furniture	12/27/11	1,829				1,829	7	MO	S/L	1,198	261
204	Admin window blinds	12/29/11	1,964				1,964	15	MO	S/L	600	131
205	Under counter stove	12/31/11	969				969	7	MO	S/L	634	139
206	Bookcase	1/31/12	186				186	7	MO	S/L	120	26
207	Security (Admin Bldg)	2/01/12	900				900	7	MO	S/L	579	128
208	Boiler upgrade	2/03/12	3,000				3,000	7	MO	S/L	1,893	428
209	Front desk computer	2/14/12	511				511	5	MO	S/L	451	60
210	Womens chairs	3/01/12	901				901	7	MO	S/L	558	128
211	Astro van	3/15/12	3,237				3,237	5	MO	S/L	2,805	432
212	Computers	3/15/12	2,550				2,550	5	MO	S/L	2,210	340
213	Vertical blinds bldg C	4/30/12	1,027				1,027	15	MO	S/L	291	68
214	Johns desk and table	5/04/12	619				619	7	MO	S/L	368	89
215	Deck admin	7/03/12	2,358				2,358	40	MO	S/L	236	59
216	Patio set	8/13/12	844				844	7	MO	S/L	472	121
217	Cabling bldg b and c	8/16/12	1,259				1,259	7	MO	S/L	704	180
218	Flooring bldg d	9/05/12	378				378	10	MO	S/L	145	38
219	Womens water heater	9/19/12	3,924				3,924	40	MO	S/L	376	98
220	Flooring bldg c	9/24/12	1,427				1,427	10	MO	S/L	547	143
221	Computer	9/28/12	1,628				1,628	5	MO	S/L	1,248	326
222	Giant white board	10/05/12	963				963	7	MO	S/L	516	137
223	TV womens	10/16/12	676				676	5	MO	S/L	507	135
224	Womens director office furniture	11/07/12	2,452				2,452	7	MO	S/L	1,284	351
225	Boiler	12/17/12	58,701				58,701	40	MO	S/L	5,259	1,467
226	Computers	12/31/12	1,628				1,628	5	MO	S/L	1,167	325
227	Computer	1/10/13	827				827	5	MO	S/L	579	165
228	Computer	1/30/13	808				808	5	MO	S/L	566	161
229	Truck canopy	2/04/13	2,020				2,020	5	MO	S/L	1,380	404
230	Computer Mark Blessum	2/05/13	808				808	5	MO	S/L	552	162
231	Computer Phil	2/14/13	808				808	5	MO	S/L	552	162
232	Computer Steve	2/21/13	808				808	5	MO	S/L	552	162
233	Plumbing pump for admin bldg	2/26/13	931				931	40	MO	S/L	80	23
234	Computer Dean Perry	2/26/13	808				808	5	MO	S/L	552	162
235	Dryer at men's	2/28/13	1,507				1,507	7	MO	S/L	736	215
236	Computer Eric	3/02/13	808				808	5	MO	S/L	539	161
237	Computer mens front desk	3/07/13	808				808	5	MO	S/L	539	161
238	Computer Rena	3/12/13	808				808	5	MO	S/L	539	161
239	Computer	3/14/13	808				808	5	MO	S/L	539	161
240	Computer	3/19/13	808				808	5	MO	S/L	539	161
241	Computer Randy	5/09/13	808				808	5	MO	S/L	512	161
242	12 Passenger van	5/24/13	12,071				12,071	5	MO	S/L	7,645	2,414
243	Ovens mens kitchen	5/29/13	6,061				6,061	7	MO	S/L	2,742	866
244	Tilt skillet	6/30/13	5,475				5,475	7	MO	S/L	2,412	782
245	Flooring bldg a	6/30/13	29,633				29,633	10	MO	S/L	9,137	2,963
247	Office Interiors	7/01/13	1,791				1,791	7	MO	S/L	768	255
248	Kitchen Equipment	7/03/13	3,921				3,921	7	MO	S/L	1,681	560
249	Kitchen Equipment	8/03/13	1,513				1,513	7	MO	S/L	630	217
250	Scanner	9/05/13	674				674	5	MO	S/L	382	135
251	Bird Spike Kit	9/17/13	744				744	5	MO	S/L	409	149
252	Shed (Admin)	10/11/13	3,080				3,080	20	MO	S/L	424	154
253	Greenhouse (Mens)	9/27/13	1,954				1,954	7	MO	S/L	768	279
254	Office Interiors (Men)	9/30/13	11,704				11,704	7	MO	S/L	4,598	1,672
255	Day Room Tables	10/07/13	4,359				4,359	7	MO	S/L	1,713	622
256	Survelliance Equipment	10/07/13	2,638				2,638	5	MO	S/L	1,451	527
257	Tub Shower	12/04/13	1,533				1,533	7	MO	S/L	566	219
258	Shelves	1/24/14	616				616	5	MO	S/L	298	123
259	TV (Day Room)	2/28/14	2,777				2,777	5	MO	S/L	1,296	555
260	Grill (Feed Hope Kitchen)	2/28/14	1,286				1,286	5	MO	S/L	600	257

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Federal Asset Report
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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
261	Laptop (Conference Rm)	3/12/14	1,113				1,113	5	MO	S/L	519	223
262	Cabinet (Mens)	3/13/14	763				763	7	MO	S/L	254	110
263	Computer (John Hull)	4/04/14	3,182				3,182	5	MO	S/L	1,432	636
264	Docking Stations (J. Hull)	4/04/14	227				227	5	MO	S/L	102	46
265	Kitchen (Mens)	4/19/14	2,179				2,179	7	MO	S/L	674	312
266	Water Fountains	4/30/14	1,462				1,462	7	MO	S/L	453	208
267	Office Chairs	6/30/14	707				707	5	MO	S/L	283	141
268	Faucet	6/30/14	572				572	7	MO	S/L	164	81
269	Harrison House	12/17/13	393,364				393,364	40	MO	S/L	24,585	9,834
275	TAX ONLY - TANGIBLE	1/01/13	1				1	7	MO	S/L	1,483	0
277	Water Heater (bldg D)	8/19/14	5,611				5,611	27	MO	S/L	374	204
278	Bed/Mattresses	8/24/14	505				505	7	MO	S/L	132	73
279	Hand Sink and Pot Filter	9/23/14	1,833				1,833	7	MO	S/L	458	262
280	Computer (John Full)	10/13/14	1,196				1,196	5	MO	S/L	419	239
281	Admin Bldg Sign	10/28/14	4,215				4,215	27	MO	S/L	255	154
282	Paging System	2/20/15	1,507				1,507	7	MO	S/L	287	215
283	Counter Top (bldg c)	3/12/15	5,920				5,920	7	MO	S/L	1,128	845
284	Shelves (men)	3/19/15	517				517	5	MO	S/L	129	104
285	Bed and Toss Pillow(women)	3/19/15	5,350				5,350	7	MO	S/L	955	765
286	Mixer	4/13/15	672				672	7	MO	S/L	120	96
287	Network Upgrade	4/21/15	8,913				8,913	5	MO	S/L	2,080	1,783
288	Canopy (men)	5/02/15	560				560	5	MO	S/L	131	112
289	Water Fountain (men)	5/07/15	1,027				1,027	7	MO	S/L	171	147
290	Burner Grills	5/09/15	672				672	7	MO	S/L	112	96
291	Fan	5/13/15	749				749	5	MO	S/L	175	150
292	Carpet	5/13/15	1,442				1,442	7	MO	S/L	240	206
293	Shelving and Garden Cart	5/19/15	2,457				2,457	7	MO	S/L	380	351
294	Metal Bed (men)	6/05/15	1,077				1,077	7	MO	S/L	167	153
295	Video Cameras	6/25/15	1,160				1,160	7	MO	S/L	166	165
296	Shoe Racks (Men)	5/02/15	694				694	5	MO	S/L	162	139
297	New Fencing at Mens	9/21/15	4,544				4,544	7	MO	S/L	487	649
298	Door Zone Monitoring	8/07/15	2,118				2,118	5	MO	S/L	388	424
299	Flooring in Harrison House	3/02/16	2,677				2,677	40	MO	S/L	22	67
300	Elevator	6/23/16	2,369				2,369	40	MO	S/L	0	59
301	Surveillance Sys at Harrison House	8/07/15	5,831				5,831	5	MO	S/L	1,069	1,166
302	WatchGuard Network Security	2/09/16	3,501				3,501	5	MO	S/L	292	700
303	Network Stations	8/18/15	2,338				2,338	5	MO	S/L	390	467
304	Panic Bar	10/14/15	1,234				1,234	5	MO	S/L	185	247
305	Dryer for Men's	11/14/15	7,091				7,091	7	MO	S/L	675	1,013
306	Office 2016 Upgrade	3/18/16	3,164				3,164	5	MO	S/L	158	633
307	PA System for Mem's	4/01/16	1,690				1,690	5	MO	S/L	85	338
308	Hot Potable System	6/08/16	2,839				2,839	7	MO	S/L	34	405
309	DVR for Harrison House	5/31/16	1,584				1,584	5	MO	S/L	26	317
310	Furniture for Employee Lounge	6/18/16	2,951				2,951	5	MO	S/L	0	590
311	CIP New Shelter	6/30/16	15,240				15,240	0	--	Memo	0	0
312	Deck Harrison House	6/28/16	2,660				2,660	40	MO	S/L	0	67
313	Vinyl in Kitchen & Dinning Area	2/07/16	4,139				4,139	40	MO	S/L	43	104
314	Flooring	6/08/16	2,440				2,440	40	MO	S/L	5	61
315	Loan Fees for FA Software	6/22/16	6,422				6,422	0	--	Memo	0	0
316	Architecture Fees	6/30/17	51,321				51,321	0	--	Memo	0	0
317	Flooring	3/01/17	3,190				3,190	39	MO	S/L	0	27
318	Vending Machines	7/27/16	2,600				2,600	7	MO	S/L	0	340
319	Dryer	10/03/16	3,109				3,109	7	MO	S/L	0	333
320	Tankless Water Heater	10/31/16	4,932				4,932	7	MO	S/L	0	470
321	Laptop	11/11/16	2,581				2,581	5	MO	S/L	0	344
322	Kitchen Sinks	11/22/16	2,847				2,847	7	MO	S/L	0	237
323	Tankless Water Heater	11/30/16	4,859				4,859	40	MO	S/L	0	71
324	Fire Alarm Upgrade	12/07/16	2,310				2,310	7	MO	S/L	0	193
325	Dishwasher mens Kitchen	4/04/17	8,318				8,318	7	MO	S/L	0	297
326	Lockers Mens	4/18/17	3,331				3,331	7	MO	S/L	0	79
327	Computers	5/15/17	24,548				24,548	5	MO	S/L	0	818
328	Smoking Area Furniture	5/15/17	3,942				3,942	7	MO	S/L	0	94
329	Lockers	5/17/17	3,262				3,262	7	MO	S/L	0	39
330	Day Center Furniture	5/23/17	14,647				14,647	7	MO	S/L	0	174
331	Cooler Mens Kitchen	6/08/17	2,503				2,503	7	MO	S/L	0	30
	Total Other Depreciation		6,447,928				6,447,928				2,692,960	199,514
	Total ACRS and Other Depreciation		6,447,928				6,447,928				2,692,960	199,514

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Federal Asset Report
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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Amortization:												
276	TAX ONLY - INTANGIBLE	1/01/13	0				0	5	MO	Amort	0	0
			0				0				0	0
	Grand Totals		6,447,928				6,447,928				2,692,960	199,514
	Less: Dispositions and Transfers		0				0				0	0
	Less: Start-up/Org Expense		0				0				0	0
	Net Grand Totals		6,447,928				6,447,928				2,692,960	199,514

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Bonus Depreciation Report

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
Activity: Form 990, Page 1								
304	Panic Bar	10/14/15	1,234		0	0	0	1,234
305	Dryer for Men's	11/14/15	7,091		0	0	0	7,091
		Form 990, Page 1	8,325		0	0	0	8,325
		Grand Total	8,325		0	0	0	8,325

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Depreciation Adjustment Report
All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
			There are no assets that meet the criteria of this report			

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Future Depreciation Report FYE: 6/30/18

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Other Depreciation:

Asset	Description	Date In Service	Cost	Tax	AMT
1	Phone System	1/01/12	48,379	6,911	0
2	Canon copiers & scanners	1/01/12	45,854	6,551	0
5	Construction Costs	10/01/92	1,472,180	36,804	0
6	Fence	6/01/93	1,147	0	0
7	Carpeting	8/11/00	6,190	0	0
8	Improvements - Shower	10/10/02	22,924	573	0
9	Improvements - Men's Upstairs Showe	1/14/04	96,686	2,417	0
10	20 Gray single-tier lockers	2/05/04	3,571	0	0
11	Improvements - Shower	8/20/04	7,211	180	0
12	Improvements - Shower (flooring)	9/30/04	1,450	73	0
13	Improvements - Shower (flooring)	3/09/05	1,182	59	0
14	Boiler (Men's Mission)	11/03/05	9,999	250	0
15	Bathroom Remodel (Men's Mission)	4/29/08	25,486	637	0
16	Exterior Lights	1/05/09	11,443	573	0
17	Flooring	3/31/11	1,427	36	0
18	Roof and floor in day room	8/30/11	77,880	1,947	0
19	Reception area	8/30/11	10,986	275	0
20	Sprinkler system upgrade	6/22/12	7,426	372	0
21	Storage shed	5/31/13	1,847	92	0
22	Gideon Transitional House	2/12/02	343,000	8,575	0
23	Roof (30 year laminated composition	12/20/04	27,668	922	0
24	Flooring	1/19/05	3,146	0	0
25	Cable Lines	1/05/09	2,289	114	0
26	Painting	8/21/09	74,528	2,710	0
27	Admin Building	2/01/12	436,853	10,921	0
28	Admin bldgs deck	5/17/12	1,984	50	0
29	Katherine Court Mission	1/01/98	168,094	4,202	0
30	New Women's Mission Buildings	1/01/99	1,390,557	34,763	0
31	Fencing	3/31/00	31,662	0	0
32	Improvements - Kitchen	4/30/03	9,562	239	0
33	Vinyl flooring - kitchen hallway	9/24/03	12,619	316	0
34	Storage shed	9/25/03	1,177	59	0
35	Flooring	7/20/04	513	0	0
36	75 Gallon Hot Water Tank	10/28/04	2,390	160	0
37	Remodel Bldg A (new office)	11/10/04	13,499	337	0
38	Rheem Water Tank	3/04/05	1,570	105	0
39	Elevator Gate (Women's Mission)	1/13/06	3,028	75	0
40	Wire for Internet Connection	2/22/08	1,443	72	0
41	Siding (Women's Mission)	5/30/08	10,834	271	0
42	Architect Fees	7/01/08	39,717	993	0
43	Siding (Women's Mission)	1/06/09	122,225	3,055	0
44	Refuse Container - Siding	1/06/09	1,521	38	0
45	Flooring	1/31/11	3,175	318	0
46	Adopt a Room	4/30/11	5,096	128	0
47	Flooring - rooms 1 and 3	12/29/11	3,029	303	0
48	Acoustic ceiling (new)	2/29/12	1,450	37	0
49	Electrical upgrades	3/12/12	4,046	102	0
50	Sprinkler heads bldg B	3/20/12	885	89	0
51	Floor replacement - all main floors	3/27/12	52,844	5,285	0
52	Flooring in Bldg D rooms	4/30/12	5,447	544	0
53	Floor in Childrens Play Room Bldg D	5/15/12	3,708	371	0
54	Womens appliances donated by Lowes	12/31/12	22,500	2,250	0
55	Land - Smith St. - Men's Mission	1/01/98	126,843	0	0
56	Land - Katherine Court	1/02/98	50,000	0	0
57	Land - New Women's Mission	1/01/99	347,639	0	0
58	Land - Gideon Transitional House	2/12/02	62,000	0	0
59	Floor buffer	6/01/93	866	0	0
61	Steam table	10/15/00	1,197	0	0
62	Boiler	10/17/00	4,043	0	0
63	Pressure washer	12/29/00	693	0	0
64	Appliances	2/06/01	762	0	0
65	Shed	2/13/01	1,280	0	0
66	3 Poly Truck - 30 Bushel	2/13/01	814	0	0
67	Sound system	3/30/01	6,616	0	0
71	Gas dryer	6/29/01	628	0	0
73	Washer/Extractor	7/20/01	6,444	0	0
74	Ice maker	7/20/01	2,872	0	0
75	Maytag washer	7/31/01	605	0	0

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Future Depreciation Report FYE: 6/30/18

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Asset	Description	Date In Service	Cost	Tax	AMT
77	4 Dryers	8/22/01	6,379	0	0
78	Maytag washer	9/13/01	687	0	0
79	1996 Cheverolet C3 Pickup Truck	11/20/01	12,000	0	0
81	Computer equipment - S.A. & M.R.	8/05/03	344	0	0
82	2 Door Freezer - Men's Mission	8/07/03	2,843	0	0
84	14in Security System w/ 4 Cameras &	2/20/04	915	0	0
85	1991 Dodge Ram Van B350	3/15/04	1,300	0	0
88	Turbo Air MSR-49NM	6/21/04	2,463	0	0
94	4 Continental Washers (Women's)	9/29/04	10,362	691	0
98	Lydia House Furniture (12 chest)	10/28/04	6,650	0	0
102	Storage Shed	8/04/05	867	0	0
116	Digital Audio Conference	8/03/06	956	0	0
118	Folder Inserter/Letter Opener	8/22/06	7,420	0	0
119	Desk (John)	9/05/06	707	0	0
121	File Cabinet	10/10/06	582	0	0
124	Table	12/13/06	574	0	0
125	Software - Donor-2	12/14/06	16,700	0	0
126	Computer	1/09/07	373	0	0
130	Carpet - Men's Mission	5/25/07	2,124	0	0
131	Tables & Chairs	7/30/07	2,189	0	0
132	75 Folding Cots - Men's Mission	10/04/07	4,835	0	0
133	CFD2R Refrigerator - Men's Mission	10/04/07	2,932	0	0
134	Tables	11/20/07	615	0	0
135	HD TV	1/31/08	3,594	0	0
136	Computer Equipment	2/01/08	651	0	0
137	Computer Equipment	3/03/08	1,839	0	0
138	Furnace	3/13/08	3,475	0	0
139	Oven	5/22/08	845	0	0
140	Patio Table	5/29/08	1,280	0	0
141	Washer (2) / Dryer (2)	9/22/08	2,224	0	0
142	Refrigerator	12/15/08	1,200	0	0
143	Meat Slicer	1/22/09	1,307	0	0
144	Men's Washer/Dryer	2/18/09	2,353	0	0
145	Furniture - Lydia House	2/25/09	1,000	0	0
146	Dishwasher	3/02/09	662	0	0
147	Refrigerator	3/05/09	7,711	0	0
148	Patio Furniture	3/17/09	1,000	0	0
149	Furniture	3/19/09	601	0	0
152	Equipment	8/04/09	764	0	0
153	Walk in Freezer (Mens)	8/18/09	34,944	0	0
154	Sign (Men's)	9/01/09	1,247	46	0
155	Refrigerator	9/22/09	981	0	0
156	Television (Wall mount)	10/15/09	909	0	0
157	Tables & Chairs (Men's)	10/30/09	787	0	0
158	2008 Ford F250 Super Cab	11/30/09	29,037	0	0
159	Equipment	12/02/09	3,141	0	0
160	Sign	12/14/09	1,247	45	0
161	Equipment	2/01/10	964	0	0
162	Twin Mattresses (22)	2/16/10	3,884	0	0
163	Software - Men's Heart Program	3/08/10	1,990	0	0
164	Hand Dryers (5)	3/24/10	1,559	0	0
165	Chairs (60)	4/01/10	1,273	0	0
166	Video Camera	5/05/10	796	0	0
167	Water Heater (Men's)	5/05/10	8,351	304	0
168	DVD Machine	6/01/10	772	0	0
169	Bunk Beds (Men's) SL	7/23/10	13,455	961	0
170	Bundbeds	7/23/10	299	0	0
171	Tape Drive	8/27/10	1,496	0	0
172	Think Pad (John)	10/17/10	1,399	0	0
173	Water heater (mens)	11/22/10	3,350	84	0
174	Washer/Dryer (mens)	1/28/11	2,670	191	0
175	Beds	3/03/11	1,429	136	0
176	Mattresses	3/03/11	1,517	144	0
177	Tankless Water Heater (womens)	3/15/11	3,826	95	0
178	Furniture	3/30/11	823	78	0
179	Van (Women's shelter)	3/30/11	8,892	0	0
180	Furniture	4/06/11	1,235	132	0
181	Bed Frames (bldg A)	5/03/11	823	98	0
182	Furniture (Bldg A)	5/03/11	1,213	144	0
183	Mattresses (bldg D)	5/03/11	1,335	159	0
184	Sofa	5/03/11	1,737	206	0
185	Projector	5/03/11	753	90	0

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Asset	Description	Date In Service	Cost	Tax	AMT
186	Server	7/09/11	2,038	0	0
187	Womens bed frames	7/13/11	10,346	1,478	0
188	Womens freezer	7/23/11	1,599	228	0
189	Fire alarm at admin bldg	9/01/11	3,462	495	0
190	Mens chairs	9/09/11	3,570	510	0
191	Reception chairs	9/30/11	986	141	0
192	XXpad think pad dock station	10/13/11	2,452	0	0
193	Womens beds	11/04/11	6,131	876	0
194	Wire shelving for HENS	11/09/11	2,824	404	0
195	Telephone cable	11/15/11	1,047	149	0
196	Data cable - admin mens & womens	11/16/11	3,725	533	0
197	Projector	11/18/11	3,340	477	0
198	Admin furniture	11/29/11	12,082	1,726	0
199	Frig/cooler	12/01/11	3,822	546	0
200	Kitchen appliances	12/02/11	2,767	395	0
201	Security system	12/21/11	902	129	0
202	Golf cart & accessories	12/22/11	2,036	291	0
203	Furniture	12/27/11	1,829	261	0
204	Admin window blinds	12/29/11	1,964	131	0
205	Under counter stove	12/31/11	969	138	0
206	Bookcase	1/31/12	186	27	0
207	Security (Admin Bldg)	2/01/12	900	129	0
208	Boiler upgrade	2/03/12	3,000	429	0
209	Front desk computer	2/14/12	511	0	0
210	Womens chairs	3/01/12	901	129	0
211	Astro van	3/15/12	3,237	0	0
212	Computers	3/15/12	2,550	0	0
213	Vertical blinds bldg C	4/30/12	1,027	69	0
214	Johns desk and table	5/04/12	619	88	0
215	Deck admin	7/03/12	2,358	59	0
216	Patio set	8/13/12	844	120	0
217	Cabling bldg b and c	8/16/12	1,259	180	0
218	Flooring bldg d	9/05/12	378	38	0
219	Womens water heater	9/19/12	3,924	98	0
220	Flooring bldg c	9/24/12	1,427	142	0
221	Computer	9/28/12	1,628	54	0
222	Giant white board	10/05/12	963	138	0
223	TV womens	10/16/12	676	34	0
224	Womens director office furniture	11/07/12	2,452	350	0
225	Boiler	12/17/12	58,701	1,468	0
226	Computers	12/31/12	1,628	136	0
227	Computer	1/10/13	827	83	0
228	Computer	1/30/13	808	81	0
229	Truck canopy	2/04/13	2,020	236	0
230	Computer Mark Blessum	2/05/13	808	94	0
231	Computer Phil	2/14/13	808	94	0
232	Computer Steve	2/21/13	808	94	0
233	Plumbing pump for admin bldg	2/26/13	931	23	0
234	Computer Dean Perry	2/26/13	808	94	0
235	Dryer at men's	2/28/13	1,507	215	0
236	Computer Eric	3/02/13	808	108	0
237	Computer mens front desk	3/07/13	808	108	0
238	Computer Rena	3/12/13	808	108	0
239	Computer	3/14/13	808	108	0
240	Computer	3/19/13	808	108	0
241	Computer Randy	5/09/13	808	135	0
242	12 Passenger van	5/24/13	12,071	2,012	0
243	Ovens mens kitchen	5/29/13	6,061	866	0
244	Tilt skillet	6/30/13	5,475	782	0
245	Flooring bldg a	6/30/13	29,633	2,963	0
247	Office Interiors	7/01/13	1,791	256	0
248	Kitchen Equipment	7/03/13	3,921	560	0
249	Kitchen Equipment	8/03/13	1,513	216	0
250	Scanner	9/05/13	674	134	0
251	Bird Spike Kit	9/17/13	744	149	0
252	Shed (Admin)	10/11/13	3,080	154	0
253	Greenhouse (Mens)	9/27/13	1,954	279	0
254	Office Interiors (Men)	9/30/13	11,704	1,672	0
255	Day Room Tables	10/07/13	4,359	623	0
256	Survelliance Equipment	10/07/13	2,638	528	0
257	Tub Shower	12/04/13	1,533	219	0
258	Shelves	1/24/14	616	124	0

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Asset	Description	Date In Service	Cost	Tax	AMT
259	TV (Day Room)	2/28/14	2,777	555	0
260	Grill (Feed Hope Kitchen)	2/28/14	1,286	257	0
261	Laptop (Conference Rm)	3/12/14	1,113	222	0
262	Cabinet (Mens)	3/13/14	763	109	0
263	Computer (John Hull)	4/04/14	3,182	637	0
264	Docking Stations (J. Hull)	4/04/14	227	45	0
265	Kitchen (Mens)	4/19/14	2,179	311	0
266	Water Fountains	4/30/14	1,462	209	0
267	Office Chairs	6/30/14	707	141	0
268	Faucet	6/30/14	572	82	0
269	Harrison House	12/17/13	393,364	9,834	0
275	TAX ONLY - TANGIBLE	1/01/13	1	0	0
277	Water Heater (bldg D)	8/19/14	5,611	204	0
278	Bed/Mattresses	8/24/14	505	72	0
279	Hand Sink and Pot Filter	9/23/14	1,833	262	0
280	Computer (John Full)	10/13/14	1,196	239	0
281	Admin Bldg Sign	10/28/14	4,215	153	0
282	Paging System	2/20/15	1,507	216	0
283	Counter Top (bldg c)	3/12/15	5,920	846	0
284	Shelves (men)	3/19/15	517	103	0
285	Bed and Toss Pillow(women)	3/19/15	5,350	764	0
286	Mixer	4/13/15	672	96	0
287	Network Upgrade	4/21/15	8,913	1,782	0
288	Canopy (men)	5/02/15	560	112	0
289	Water Fountain (men)	5/07/15	1,027	147	0
290	Burner Grills	5/09/15	672	96	0
291	Fan	5/13/15	749	149	0
292	Carpet	5/13/15	1,442	206	0
293	Shelving and Garden Cart	5/19/15	2,457	351	0
294	Metal Bed (men)	6/05/15	1,077	154	0
295	Video Cameras	6/25/15	1,160	166	0
296	Shoe Racks (Men)	5/02/15	694	139	0
297	New Fencing at Mens	9/21/15	4,544	649	0
298	Door Zone Monitoring	8/07/15	2,118	424	0
299	Flooring in Harrison House	3/02/16	2,677	67	0
300	Elevator	6/23/16	2,369	59	0
301	Surveillance Sys at Harrison House	8/07/15	5,831	1,166	0
302	WatchGuard Network Security	2/09/16	3,501	700	0
303	Network Stations	8/18/15	2,338	468	0
304	Panic Bar	10/14/15	1,234	247	0
305	Dryer for Men's	11/14/15	7,091	1,013	0
306	Office 2016 Upgrade	3/18/16	3,164	633	0
307	PA System for Mem's	4/01/16	1,690	338	0
308	Hot Potable System	6/08/16	2,839	406	0
309	DVR for Harrison House	5/31/16	1,584	317	0
310	Furniture for Employee Lounge	6/18/16	2,951	590	0
311	CIP New Shelter	6/30/16	15,240	0	0
312	Deck Harrison House	6/28/16	2,660	66	0
313	Vinyl in Kitchen & Dinning Area	2/07/16	4,139	103	0
314	Flooring	6/08/16	2,440	61	0
315	Loan Fees for FA Software	6/22/16	6,422	0	0
316	Architecture Fees	6/30/17	51,321	0	0
317	Flooring	3/01/17	3,190	82	0
318	Vending Machines	7/27/16	2,600	372	0
319	Dryer	10/03/16	3,109	444	0
320	Tankless Water Heater	10/31/16	4,932	704	0
321	Laptop	11/11/16	2,581	516	0
322	Kitchen Sinks	11/22/16	2,847	407	0
323	Tankless Water Heater	11/30/16	4,859	121	0
324	Fire Alarm Upgrade	12/07/16	2,310	330	0
325	Dishwasher mens Kitchen	4/04/17	8,318	1,188	0
326	Lockers Mens	4/18/17	3,331	476	0
327	Computers	5/15/17	24,548	4,910	0
328	Smoking Area Furniture	5/15/17	3,942	563	0
329	Lockers	5/17/17	3,262	466	0
330	Day Center Furniture	5/23/17	14,647	2,093	0
331	Cooler Mens Kitchen	6/08/17	2,503	357	0
	Total Other Depreciation		6,447,928	203,575	0

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Asset	Description	Date In Service	Cost	Tax	AMT
	Total ACRS and Other Depreciation		6,447,928	203,575	0
Amortization:					
276	TAX ONLY - INTANGIBLE	1/01/13	0	0	0
			0	0	0
	Grand Totals		6,447,928	203,575	0

Form **990** | **Two Year Comparison Report** | **2015 & 2016**

For calendar year 2016, or tax year beginning 07/01/16 , ending 06/30/17

Name: EVERETT GOSPEL MISSION

Taxpayer Identification Number: 91-0780146

			2015	2016	Differences
Revenue	**1.** Contributions, gifts, grants	1.	4,138,709	4,306,142	167,433
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.	309,864	323,357	13,493
	4. Program service revenue	4.	148,210	144,050	-4,160
	5. Investment income	5.	3,245	4,388	1,143
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7.	-7,786		7,786
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.	10,244	81,617	71,373
	12. Total revenue. Add lines 1 through 11	12.	4,602,486	4,859,554	257,068
Expenses	**13.** Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15.		143,093	143,093
	16. Salaries, other compensation, and employee benefits	16.	1,160,569	1,076,189	-84,380
	17. Professional fundraising fees	17.	217,327	228,080	10,753
	18. Other professional fees	18.	263,655	306,492	42,837
	19. Occupancy, rent, utilities, and maintenance	19.	319,053	423,281	104,228
	20. Depreciation and Depletion	20.	208,659	199,514	-9,145
	21. Other expenses	21.	2,405,914	2,330,978	-74,936
	22. Total expenses. Add lines 13 through 21	22.	4,575,177	4,707,627	132,450
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	27,309	151,927	124,618
Other Information	**24.** Total exempt revenue	24.	4,602,486	4,859,554	257,068
	25. Total unrelated revenue	25.			
	26. Total excludable revenue	26.	153,913	230,055	76,142
	27. Total assets	27.	4,474,422	4,601,419	126,997
	28. Total liabilities	28.	1,391,037	1,365,352	-25,685
	29. Retained earnings	29.	3,083,385	3,236,067	152,682
	30. Number of voting members of governing body	30.	13	13	
	31. Number of independent voting members of governing body	31.	13	13	
	32. Number of employees	32.	28	31	
	33. Number of volunteers	33.	523	525	

Form **990** | **Tax Return History** | **2016**

Name: EVERETT GOSPEL MISSION

Employer Identification Number: 91-0780146

	2012	2013	2014	2015	2016	2017
Contributions, gifts, grants			4,351,829	4,448,573	4,629,499	
Membership dues						
Program service revenue			152,447	148,210	144,050	
Capital gain or loss			500	-7,786		
Investment income			2,248	3,245	4,388	
Fundraising revenue (income/loss)			-22,044			
Gaming revenue (income/loss)						
Other revenue			11,198	10,244	81,617	
Total revenue			4,496,178	4,602,486	4,859,554	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.			116,113		143,093	
Other compensation			1,103,657	1,160,569	1,076,189	
Professional fees			263,735	480,982	534,572	
Occupancy costs			291,758	319,053	423,281	
Depreciation and depletion			203,840	208,659	199,514	
Other expenses			2,356,968	2,405,914	2,330,978	
Total expenses			4,336,071	4,575,177	4,707,627	
Excess or (Deficit)			160,107	27,309	151,927	
Total exempt revenue			4,496,178	4,602,486	4,859,554	
Total unrelated revenue						
Total excludable revenue			166,393	153,913	230,055	
Total Assets			4,507,317	4,474,422	4,601,419	
Total Liabilities			1,453,465	1,391,037	1,365,352	
Net Fund Balances			3,053,852	3,083,385	3,236,067	

Taxable Interest on Investments

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs ($ or %)
INVESTMENT INCOME	$ 4,388		14			
TOTAL	$ 4,388					

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
PUBLIC RELATIONS	$ 106,204	$ 99,801	$ 1,246	$ 5,157
TOTAL	$ 106,204	$ 99,801	$ 1,246	$ 5,157

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
PRINTING	$ 137,661	$ 14,328	$	$ 123,333
EQUIPMENT EXPENSE	54,856	47,043	5,177	2,636
POSTAGE & PRINTING	40,973	5,588	2,146	33,239
BANK CHARGES	29,508		5,686	23,822
WOMENS PROGRAMS	26,423	26,423		
MENS PROGRAMS	19,874	19,874		
EMERGENCY MEDICAL AID	12,808	12,808		
SUBSCRIPTIONS & DUES	5,198		5,198	
MISCELLANEOUS	4,878	1,733	2,896	249
LIC & FEES	2,617	2,227	390	
RENT	2,100			2,100
TRAINING	-543	-2,200	778	879
TOTAL	$ 336,353	$ 127,824	$ 22,271	$ 186,258