SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Employer identification number

		MISSIONS, INC.					34-17	'85031
Par		Reason for Public Cha	rity Status. (All o	rganizations must c	omplete	this part.) See instructions.	
	orga	anization is not a private founda						
1	\vdash	A church, convention of church				170(b)(1)	(A)(i).	
2		A school described in section		•			A	
3	Щ	A hospital or a cooperative hos					1986	
4	Ш	A medical research organization hospital's name, city, and state	on operated in conju e:	nction with a hospital o	described	in section	170(b)(1)(A)(iii). Ег	nter the
5		An organization operated for the section 170(b)(1)(A)(iv). (Con	ne benefit of a colleg nplete Part II.)	ge or university owned	or operate	ed by a go	vernmental unit des	cribed in
6		A federal, state, or local govern	nment or governmer	ntal unit described in s e	ection 17	0(b)(1)(A)((v).	
7	X	An organization that normally idescribed in section 170(b)(1)	receives a substanti)(A)(vi). (Complete I	al part of its support fro Part II.)	om a gove	rnmental u	unit or from the gene	eral public
8		A community trust described in	section 170(b)(1)(A)(vi). (Complete Part	II.)			
9		An agricultural research organ or university or a non-land-gra university:	ization described in nt college of agricult	section 170(b)(1)(A)(i) ture (see instructions).	() operate Enter the	d in conjur	nction with a land-gray, and state of the co	ant college illege or
10		An organization that normally i	receives (1) more th	an 33 1/3% of its supp	ort from c	ontribution	s, membership fees	, and gross
		receipts from activities related support from gross investment acquired by the organization a	to its exempt function income and unrelated	ons, subject to certain à ted business taxable in	exceptions come (les	s; and (2) as section :	no more than 33 1/3 511 tax) from busine	% of its esses
11		An organization organized and	operated exclusive	ly to test for public safe	ty. See s	ection 509	9(a)(4).	
12		An organization organized and	operated exclusive	ly for the benefit of, to	perform th	ne function	is of, or to carry out t	the purposes
		of one or more publicly suppor Check the box on lines 12a thr	ted organizations de	escribed in section 50 !	9(a)(1) or	section 50	09(a)(2). See sectio	n 509(a)(3)
а	L	Type I. A supporting organization(organization. You must cor	ร) the power to reตู้เ	ılarik appoint or elect a	oy its supp majority	oorted orga of the direa	anization(s), typically ctors or trustees of t	y by giving ne supporting
b		Type II. A supporting organi control or management of the	zation supervised one supporting organ	controlled in connecti ization vested in the sa	on with its	s supported	d organization(s), by ntrol or manage the	having supported
С	Г	organization(s). You must o	complete Part IV, S	ections A and C.		liana		
·	L	its supported organization(s	s) (see instructions).	You must complete F	n conneci Part IV. Se	ections A	ind functionally integ D. and E.	rated with,
d		Type III non-functionally in	rtegrated. A suppor	ting organization opera	ated in cor	nnection w	ith its supported ora	anization(s)
		that is not functionally integr	rated. The organizat	tion generally must sati	isfy a distr	ibution red	nuirement and an att	tentiveness
е	Г	requirement (see instruction Check this box if the organi	ation received a wr	itten determination from	A and D,	and Part	V. Tuna I Tuna II Tun	o)II
Ū	L	functionally integrated, or Ty	pe III non-functiona	illy integrated supportir	na organiz	ation.	гтурет, турет, тур	e III
f	ı	Enter the number of supported	organizations					C
g	<u> </u>	Provide the following information	n about the support					
	(I) F	Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1–10		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
				above (see instructions))		ment?	instructions)	instructions)
					Yes	No		
A)					162	NO		
					Į			
B)							, , , , , , , , , , , , , , , , , , ,	

C)				i				
D)		******		<u></u>				
,					!			
E)								
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otal							ام	0

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 584,254 585.034 546,167 560,498 638,740 2,914,693 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 584,254 585.034 546, 167 638,740 2,914,693 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) 1,288,863 Public support. Subtract line 5 from line 4 1,625,830 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2017 (b) 2018 (d) 2020 (e) 2021 (f) Total 7 Amounts from line 4 584,254 560.498 638,740 2,914,693 Gross income from interest, dividends. payments received on securities loans, rents, royalties, and income from similar sources 868 7,649 2,676 161 16.383 Net income from unrelated business activities, whether or not the business is regularly carried on 0 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 . . 2,931,076 Gross receipts from related activities, etc. (see instructions) First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2021 (line 6 column (f), divided by line 11, column (f)) 55.47% 16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this .17a 10%-facts-and-circumstances test-2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 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 b 10%-facts-and-circumstances test-2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

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

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.)

Se	ction A. Public Support	<u>,,</u>	, toolo notou bo	ou, piecee con	inplote t die ii.)		
Cale	endar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees			**************************************		3 /	()
	received. (Do not include any "unusual grants.")						(
2	Gross receipts from admissions, merchandise	1					
	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					6 .	
	unrelated trade or business under section 513						(
4	Tax revenues levied for the				943		
	organization's benefit and either paid to	ĺ					
	or expended on its behalf						(
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge			!	K D		٢
6	Total. Add lines 1 through 5	0) 0	0	0	0	
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						(
b	Amounts included on lines 2 and 3				140		· · · · · · · · · · · · · · · · · · ·
	received from other than disqualified	1					
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year		4]		ſ
С	Add lines 7a and 7b	C) ** Q	0	0	0	
8	Public support (Subtract line 7c from			Na Artika ka			
	line 6.)		10 10				r
Sec	tion B. Total Support		W.	The state of the s	<u> </u>		
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	C	, 0			 	C
10a	Gross income from interest, dividends,	4					
	payments received on securities loans, rents,						
	royalties, and income from similar sources						C
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses		•				
	acquired after June 30, 1975]	C
С	Add lines 10a and 10b	0	0	0	0	0	C
11	Net income from unrelated business	W W					
	activities not included on line 10b, whether			ļ		l i	
	or not the business is regularly carried on						C
12	Other income. Do not include gain or						
	loss from the sale of capital assets		İ		•		
	(Explain in Part VI.)	<u> </u>					C
13	Total support. (Add lines \$10c, 10c, 10c)						
	and 12.)	0		0	0	0	0
14	First 5 years. If the Form 390 is for the org		cond, third, fourth,	or fifth tax year as a	a section 501(c)(3)		
-	organization, check this box and stop here			· · · · · · · · ·			▶ [_
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2021 (line 8,	column (f), divided	by line 13, column	(f)		15	0.00%
-16	Public support percentage from 2020 Sched	dule A, Part III, line	<u> 15</u>		<u>, , , , , , , , , , , , , , , , , , , </u>	16	0.00%
Sec	tion D. Computation of Investme	<u>nt Income Per</u>	centage				
17	Investment income percentage for 2021 (lin					17	0.00%
18	Investment income percentage from 2020 S	Schedule A, Part III,	line 17			18	0.00%
19a	33 1/3% support tests—2021. If the organ	ization did not che	ck the box on line 1	4, and line 15 is m	ore than 33 1/3%,	and line 17 is	
	not more than 33 1/3%, check this box and	stop here. The org	janization qualifies	as a publicly suppo	orted organization		🕨 🛄
þ	33 1/3% support tests—2020. If the organ	ization did not che	ck a box on line 14	or line 19a, and line	e 16 is more than	33 1/3%, and	
	line 18 is not more than 33 1/3%, check this						🕨 📘
20	Private foundation. If the organization did	not check a box or	line 14 19a or 19	h check this hov a	nd see instructions		<u> </u>

Part IV

Supporting Organizations

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

Section A. All Supporting Organizations

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- 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.
- 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.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **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.
- 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substitutes supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 7 Did the organization provide a grant, lean, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(6)), 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).
- B Did the organization make a banto a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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**.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - 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.)

	Yes	No
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5C		10.00
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9b	Sagata et	54,55500
	ert as	
9c		
10a		
	(0.74)	
10b		

Part	Supporting Organizations (continued)			
44	Use the ergonization eccented a gift as postulation from any of the fall and a superior		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	44-	Avail ::	
b	A family member of a person described on line 11a above?	11a 11b	<u> </u>	
C	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide</i>	מוו	<u> </u>	1000
C	detail in Part VI.	11c	to aidus:	
Secti	on B. Type I Supporting Organizations	1		<u> </u>
		•	Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the		a dia	10.00
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	de de la constante de la const	
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		A state	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
04	supervised, or controlled the supporting organization.	2	<u> </u>	<u> L</u>
Section	on C. Type II Supporting Organizations		1	Τ
4	Worse a majority of the propriesticals directors on tructors alwing the Assessment Conference of the New York	181.55	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," lescribe in Part VI how control			
	or management of the supporting organization was vested in the same parsons that controlled or managed the supported organization(s).	30030	3.5	
Section	on D. All Type III Supporting Organizations	1	L	<u> </u>
	on brian type in 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		163	140
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		9-87-2	
	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		FREEDMAN
2	Were any of the organization's officers, directors, of 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	Andrew Control		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	enand versiche bever	10100000000000000000000000000000000000
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? #"Yes," describe in Part VI the role the organization's	7.		
	supported organizations played in this regard.	3		COMMUNICAÇÃO DE SE
Section	on 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 instr	uction	s).	
а	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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	e instruct	ionel	
'		o manuu		
	Activities Test. Answer lines 2a and 2b below.	f risonness	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			A (2-1)
	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		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's position that its supported organization(s) would have engaged in	O.L.		
	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>	2b		
	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? If "Yes" or "No," provide details in Part VI .	2-		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	The second of th	~~		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgai	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	trus	st on Nov. 20, 1970 (explain	in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ	izati	ons 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	0	0
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	(A)	
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
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	16		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other factors	46		
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	0	0
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 0.035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A line 8, column A)	1		0
2 Enter 0.85 of line 1.	2		0
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
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		0
7 Check here if the current year is the organization's first as a non-functionally	inte	egrated Type III supporting o	

Schedul	e A (Form 990) 2021 SUMMIT MISSIONS, INC.			34-178	5031	Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	i <mark>zations</mark> (continue	d)		
Section	on D - Distributions				Current Yea	ar
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1		
2	······································		3			
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpos	es of supported organiz	ations	3		
4						
5	Qualified set-aside amounts (prior IRS approval required—	provide details in Part V	0	5		
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.		ť.	7		0
8						
	(provide details in Part VI). See instructions.		· On · · · · · · · ·			
9	Distributable amount for 2021 from Section C, line 6			9		0
10_	Line 8 amount divided by line 9 amount		20.00	10		0.000
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021		(iii) Distributabl mount for 2	
1_	Distributable amount for 2021 from Section C, line 6		1 00 g / 200 g		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0
2	Underdistributions, if any, for years prior to 2021			10.0		
	(reasonable cause required—explain in Part VI). See	San Caranta de 🕢 🦄		11.11	1999	
	instructions.	10 m				r i
3	Excess distributions carryover, if any, to 2021	1970	/			
a_	From 2016	A 100 A	E CONTRACTOR	444		
<u> </u>	From 2017					
<u>c</u>	From 2018					
d	From 2019	AV No. W				
<u>е</u> f	Total of lines 3a through 3e	<i>A</i> *				
	Applied to underdistributions of prior years	U				
<u>g</u> h	A # 11 0004 # 4 # 4 H		property of the control of the contr	0		
						U
<u>i</u> -	Carryover from 2016 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from line 3f Distributions for 2021 from	0				
4	Distributions for 2021 from					
•	Section D, line 7:				100	
a	Applied to underdistributions of prior years			0		
b	Applied to 2021 distributable amount					٥
C	Remainder. Subtract lines 4a and 4b from line.4	C				- 0
5	Remaining underdistributions for years prior to 2021, if	,				
	any. Subtract lines 3g and 4a from line 2. For result				a el fade de	
	greater than zero, explain in Part VI. See instructions.			ol .		
6	Remaining underdistributions for 202. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain					
	in Part VI. See instructions			in i		0
7	Excess distributions carryover to 2022. Add lines 3j		rari patanga e		10.24	
	and 4c.	0				4.4.5
8	Breakdown of line					
а	Excess from 2017 0					
b	Excess from 2018					
£	Excess from 2019					
d	Excess from 2020 0			200		ii ik
е	Excess from 2021		ensett Herrick	st die		FIRELIE

	Form 990) 2021 SUMMIT MISSIONS, INC.	34-1785031	Page {
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; FB, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section II 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)	Part IV, Section E, lines 1c, 2a, 2b,	
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SCHEDULE D (Form 990)

Supplemental Financial Statements

► 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.

► Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name	or the organization	Employer identification number
<u>SUM</u>	MIT MISSIONS, INC.	34-1785031
Par	t I Organizations Maintaining Donor Advised Funds or Other Similar Fun	
	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	donoradvised
	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 for	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for an	
	conferring impermissible private benefit?	Yes No
Par		
	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 (for example, recreation or education)	a of a historically important land area
	Protection of natural habitat	n 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
	cascinent on the last day of the tax year.	Held at the End of the Tax Year
а	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 7/25/06, and not on a	
_	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or termi	nated by the organization during
	the tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection,	nandling 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 co	onservation easements during the year
7		
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing consel	vation easements during the year
0	T	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of	
^	and section 170(h)(4)(B)(ii)?	· · · · · · · · L Yes L No
9	In Part XIII, describe how the organization reports conservation easements in its revenue a	and expense statement and
	balance sheet, and include if applicable, the text of the footnote to the organization's finan- organization's accounting for conservation easements.	cial statements that describes the
Part		041011
Mair		Otner Similar Assets.
1a	Complete the organization answered "Yes" on Form 990, Part IV, line 8.	
Ia	If the organization elected as permitted under FASB ASC 958, not to report in its revenue	statement and balance sneet
	works of art, historical treasures, or other similar assets held for public exhibition, education public services, provide in Bott XIII the tout of the feature to its fine point of the feature of the f	n, or research in turtherance of
h	public service, provide in Part XIII the text of the footnote to its financial statements that de	
D	If the organization elected, as permitted under FASB ASC 958, to report in its revenue state works of art, historical transures, or other similar assets hold for public published and restant	
	works of art, historical treasures, or other similar assets held for public exhibition, educatio public service, provide the following amounts relating to these items:	n, or research in turtherance of
	/i) Revenue included on Form 900. Part VIII. line 4	. •
	(i) Revenue included on Form 990, Part VIII, line 1	· · · · · • • • • • • • • • • • • • • •
2	If the proprietion received or hold works of art, historical traceurs and the services	,
4	If the organization received or held works of art, historical treasures, or other similar assets following amounts required to be reported under EASP ASC 058 relating to those items.	or financial gain, provide the
_	following amounts required to be reported under FASB ASC 958 relating to these items:	.
d L	Revenue included on Form 990, Part VIII, line 1	, , , , , , > \$
<u> </u>	Assets included in Fulfill 880, Part A	> 8

	ule D (Form 990) 2021 SUMMIT MISSION			34-17850	
Par	Organizations Maintaining				
3	Using the organization's acquisition, a	ccession, and other records, check any	y of the following tha	t make significant u	se of its
	collection items (check all that apply):	. 🗀 .	_		
a	Public exhibition		r exchange program		
b	Scholarly research	e Other			
С	Preservation for future generation				
4	Provide a description of the organizati XIII.	on's collections and explain how they fo	urther the organizati	on's exempt purpos	e in Part
5	During the year, did the organization s assets to be sold to raise funds rather	olicit or receive donations of art, histori than to be maintained as part of the or	ical treasures, or oth ganization's collection	er similar	Yes No
Pari	Complete if the organization a 990, Part X, line 21.	ngements. answered "Yes" on Form 990, Part	t IV, line 9, or repo	orted an amount o	on Form
1a b	Is the organization an agent, trustee, of included on Form 990, Part X?			sets not	Yes No
	-		\ \	Ar	nount
c	Beginning balance			С	0
d	Additions during the year				
e	Distributions during the year				
_'	Ending balance		535 255 SS		
2a	Did the organization include an amoun		, W		Yes 🔀 No
b	If "Yes," explain the arrangement in Pa	rt XIII. Check here if the explanation h	as been provided or	Part XIII	· · · L
Part		answered "Yes" on Form 990 Part	t 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	0 0	0	0	0
b	Contributions				
C	Net investment earnings, gains, and losses	4			
	and losses				

			769	,		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	0	0	0	0	(
b	Contributions					
C	Net investment earnings, gains,	A.	(E)			
	and losses	. (1	\$			
þ	Grants or scholarships	4				, , , , , , , , , , , , , , , , , , ,
е	Other expenditures for facilities		b			
	and programs					
f	Administrative expenses		*****			
g	End of year balance	0	0	0	0	
2	Dravida the estimated narrowters of the		balanca (line de	Increase (=XX) is a fall as a con-		

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

Board designated or quasi-endowming þ

Permanent endowment

Term endowment Term endowment

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

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

organization by: (i) Unrelated organizations

(ii) Related organizations. If "Yes" on line 3a(1), are the related organizations listed as required on Schedule R?

	3a(i)	
	3a(ii)	
,	3b	

Yes No

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	. 0	295,840		295,840
b	Buildings	0	302,825		232,906
C	Leasehold improvements	0	0	0	0
d	Equipment [0	56,336	47,220	9,116
е	Other	0	8,053	7,395	658
Tota	I. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part X,	column (B), line 10c.) .		538.520

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	0	· · · · · · · · · · · · · · · · · · ·
(2) Closely held equity interests	0	
(3) Other		
(A)		
(B)	,,,,	
(C)		
(D)		•
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) .	0	The state of the s
Part VIII Investments—Program Related.	<u> </u>	
	'Yes" on Form 990	Part IV, line 11c. See Form 990, Part X, line 13.
		(c) Method of valuation:
(a) Description of investment	(b) Book value	Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		7
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	0	
Part IX Other Assets.		
	Ver" on Form 990	Part IV, line 11d. See Form 990, Part X, line 15.
(a) Descri	Non	(b) Book value
(1)	<u> </u>	(b) Book value
(2)	**************************************	
(3)		
(4)	*	
(5)		
(6)		
(7)		
(8) (9)		
Total. (Column (b) must equal Form 900, Part X, col. (B) lin	an 45 \	
	1e 15.)	<u> </u>
Part X Other Liabilities.	V " " 000 i	B 4848 44 44 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Complete with organization answered "	Yes" on Form 990, I	Part IV, line 11e or 11f. See Form 990, Part X,
line 25.		
1. (a) Description	on of liability	(b) Book value
(1) Federal income taxes		
(2) ACCRUED PAYROLL & PAYROLL TAXES	* ******	3,
(3) ACCRUED EXPENSES - OTHER		
(4) SHIPPING ADVANCES	,	42,
(5)	T Michigan	
(6)	*****	
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin		
2. Liability for uncertain tax positions. In Part XIII, provide the tex	t of the footnote to the or	organization's financial statements that reports the
organization's liability for uncertain tax positions under FASB ASC	C 740. Check here if the	text of the footnote has been provided in Part XIII

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F	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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	Comment of the commen	
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
þ	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	N I I	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	<u> </u>	
b	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	. d4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	0
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses pe	r Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
e	Other losses . Other (Describe in Part XIII.) . Add lines 2a through 2d . Subtract line 2e from line 1 . Amounts included on Form 990, Part IX, line 25, but not on line 1 . Investment expenses not included on Form 990. Part VIII. line 7b .	2e	0
3	Subtract line 2e from line 1 . Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, light 7b. 4a	3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	Million and Company of the Company o	
a b		20 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A	
-	Other (Describe in Part XIII.)		•
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4c 5	0
	XIII Supplemental Information.	5	0
	de the descriptions required for Part II, lines 3, 5, and 9. Part III, lines 1a and 4; Part IV, lines 1b and 2b; P	- white Live - 4- D	4 37 . P
2: Pai	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	art V, line 4; Par	t X, line
2, I U	TAI, intes 20 and 4b, and 1 art An, lines 20 and 4b. Also complete this part to provide any additional information	iation.	
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Schedule D (Fo	orm 990) 2021	SUMMIT MISSIONS, INC.	34-1785031	Page 5
Part XIII	Suppleme	SUMMIT MISSIONS, INC. ental Information (continued)		

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SCHEDULE F (Form 990)

Statement of Activities Outside the United States

2021

2021

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

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

Inspection
Employer identification number

	e of the organization				E	mployer identification number
	MMIT MISSIONS, INC.					34-1785031
Pa	General Infor Form 990, Part I	mation on Acti V, line 14b.	ivities Outsid	e the United States. Com	plete if the organization ar	swered "Yes" on
1		rantees' eligibility	for the grants of	ds to substantiate the amoun r assistance, and the selectio		Yes No
2	For grantmakers. Des outside the United Stat		e organization's	procedures for monitoring the	e use of its grants and other	assistance
3	Activities per Region. (The following Par	t I, line 3 table c	an be duplicated if additional	space is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	I					
(2)						
(3)						
(4)						
(5)						
(6)			4			
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)	COMMON AND A SECOND					
(17)						
	Subtotal	0	0			0
	Total from continuation sheets to Part I ,	_				
^	Totals (add lines 2s and 2h)	0	0			0

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

	(h) Description (i) Method of of noncash assistance (book, FMV, appraisal, other)							:						
additioned is additional space is needed.	(g) Amount of noncash of no assistance											1		
	(f) Manner of cash disbursement	5												
מנו מנו מנו	(e) Amount of cash grant					A			*					
sea mole man per	(d) Purpose of grant													
	(c) Region				>									
	(b) IRS code section and EIN (if applicable)													
	(a) Name of organization	(2)	(8)	(4)	(6)	σ	(8)	(10)		(12)	(15)		(12)	

exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

Enter total number of other organizations or entities

m

34-1785031

SUMMIT MISSIONS, INC.

n 990) 2021 SUMMIT

Schedule F (Form 990) 2021

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

		recipients	cash grant	cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)					, i		:
(3)							
(4)							
(5)							
(9))						
(1)							
(8)							
(6)							
(10)							ļ
(11)							77
(12)							
(13)							
(14)						1 1	
(15)							
(16)							
(17)							
(18)		•					

Part	IV Foreign Forms	3. 1100	JOT Tugo
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	☐ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes." the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	No No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	☐ No

Schedule F (Form 990) 2021

	34-1/85031 34-1/85031	Page 5
Part V	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.	
		
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

SUMMIT MISSIONS, INC.

Employer identification number 34-1785031

Pai	t 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
	Art—Works of art				
2	Art—Historical treasures			4	
3	Art—Fractional interests			***	
4	Books and publications				
5	Clothing and household				
	goods				
6	Cars and other vehicles				
7	Boats and planes	·	· · · · · · · · · · · · · · · · ·		
8	Intellectual property			A.	
9 10	Securities—Publicly traded				
	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation			<u> </u>	
	contribution—Historic				
	structures			•	
14	Qualified conservation				
•	contribution—Other				
15	Real estate—Residential			, <u></u>	
16	Real estate—Commercial			. 100	
17	Real estate—Other			······	
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies			···········	
21	Taxidermy				
22	Historical artifacts			- 1180	
23	Scientific specimens	.43.			
24	Archeological artifacts				
25	Other ► ()		#100//-		
26	Other ► ()	9			
27	Other ► (
28	Other ▶ (****	***************************************
29	Number of Forms 8283 received by	the organi	zation during the tax year fo	or contributions for	
	which the organization completed F	Form 8283,	Part V, Donee Acknowledge	ement [29
					Yes No
30a	During the year, did the organizatio	n receive b	y contribution any property i	reported in Part I, lines 1 thro	ough L. C. L.
	28, that it must hold for at least thre	e years fro	m the date of the initial cont	ribution, and which isn't requ	uired a land
_	to be used for exempt purposes for	the entire i	nolding period?		30a
b	If "Yes," describe the arrangement i				
31	Does the organization have a gift a	cceptance	policy that requires the revie	w of any nonstandard	
00-	contributions?				31 X
32a	Does the organization hire or use the				
p_			• • • • • • • • • • • •		32a X
b	If "Yes," describe in Part II.		- I		
33	If the organization didn't report an a	mount in co	plumn (c) for a type of prope	erty for which column (a) is	
	checked, describe in Part II.				

	Form 990) 2021 SUMMIT MISSIONS, INC.	34-1785031 Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 3	2b, and 33, and whether
	the organization is reporting in Part I, column (b), the number of contributions, the n	umber of items received,
	or a combination of both. Also complete this part for any additional information.	
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·	A.	

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SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization
SUMMIT MISSIONS, INC.

Employer Identification number 34-1785031

Form 990, Part III, Line 4A: MOBILIZED PEOPLE AND RESOURCES TO ASSIST NATIONAL MISSION
PARTNERS SERVING AS FIELD REPRESENTATIVES FOR SUMMIT MISSION INTERNATIONAL (SMI). The
following are some of the accomplishments in 2021: 4255 youth presented with the Gospel, 877
pastors and leaders trained, 14 new churches planted, 12,600 meals served, 216,269 pounds of
products shipped. Explanation of 2021 Project Accomplishments: 1. SMI sponsored summer Bible
clubs which included training leaders in the spring, providing crafts, meals and snacks for
the weeklong programs hosted by local churches. SMI distributed \$28,399 to support the
program, 1737 children attended, and 8686 meals were served. 2. SMI provided \$8,067 to support
the Children of the Street feeding and tutoring program in Grigoriopol, Transpistria, Here,
children receive a hot meal, help with schoolwork, a Bible lesson and are shown the love of
Christ from the staff. 3. Continued funding of Adventure Camp for \$10,250. This program offers
teens an intense rafting, camping, extreme sports, discipleship, and leadership development
program centered on Christ. 4. \$5,000 was given to Parcan Orphanage in Transnistria to help
renovate their auditorium. MULTIPLIED CHURCHES THAT ROSITIVELY INFLUENCE THEIR COMMUNITITIES.
5. SMI partners with Generation Mission Association, a shurch planting group based in Kiev
Ukraine. Summit Missions supplied \$29,138 to assist with the training of 742 pastors and the
planting of 12 churches. 6. Additionally \$1,75 was given to Church Without Walls to support
their outreaches where 870 youth were presented with the Gospel, 75 pastors were trained, and
two home churches were planted.
Form 990, Part III, Line 4B; MOTIVATED YOUTH TO EXPERIENCE GOD'S LOVE AND RECOGNIZE THEIR
PERSONAL WORTH Secause we believe that every man, woman, and child should have the opportunity
to hear the Gospel at least one time and that children are the future of any country, SMI
places a large focus on supporting Children's ministries as indicated above. Additionally, we
partner with sports ministry outreaches where 798 youth were presented with the Gospel. SMI
supported this ministry with \$5,250. Also assisted Help the Children program with \$8,675 to
provide food, clothing, children's activities, home renovation, and other services to needy

Schedule O (Form 990) 2021	Page 2
Name of the organization	Employer identification number
SUMMIT MISSIONS, INC.	34-1785031
families.	
Form 990, Part III, Line 4C: MET NEEDS THROUGH PRODUCT SHIPMENTS AND PROMOTED) BUSINESS AS
MISSIONS Locally, SMI operates with a staff of one full-time and four part-time employees. We	
are responsible for maintaining accurate records, local and international communications,	
public relations, and publication of 3500 quarterly newsletters. All financial records,	
receipts and expenditures are accurately processed, board approved, reviewed by a CPA and by	
an independent accounting firm each year. Additionally -70 volunteers served a combined total	
of 4,447 hours valued at \$113,087.21 to sort, package and ship 9 sea containers with a total)
weight of 216,269 pounds. The mission received and processed gift-in-kind donations in the	<i>y</i>
amount of 116,216 pounds valued at \$506,631 for distributions to the needy and for our Thrift	
Store partner in Eastern Europe. The Thrift Store Project (Business as Missions) was started	
in 2009 and continues to expand in Moldova and Ukraine now operating more than 30 stores.	
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