# Form **990**

**Return of Organization Exempt From Income Tax** 

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

OMB No. 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

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

A	For th	ne 2005 c	calendar year, or tax year beginning 1/1/2005 , 2005, and ending 12/31/	2005	, 20		
В	Check if	applicable:	Flease O Name of organization	Emplo	yer identification number		
		s change	USE IRS WIND AND FIDE MINISTRIES INC				
=		print or Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number					
=	Initial re		type. See 3243 Wind and Fire Dr	( 319	) <b>294-5307</b>		
=	Final ret	-	Specific Instruc- City or town, state or country, and ZIP + 4	Accounti	ng method: Cash Accrual		
=		ed return	tions. Marion, IA 52302		ther (specify)		
=		ion pending			e to section 527 organizations.		
			trusts must attach a completed Schedule A (Form 990 or 990-EZ).  H(a) Is this a gro		n for affiliates? Yes No		
G	Websit	e: ► wwv	w.windandine.org		per of affiliates ▶		
J.	Organi:	zation tyne	e (check only one) ► ✓ 501(c) ( 3 ) ◄ (insert no.) ☐ 4947(a)(1) or ☐ 527 H(c) Are all affilia		uded? Yes No t. See instructions.)		
		_	H(d) is this a cona				
			if the organization's gross receipts are normally not more than \$25,000. The not file a return with the IRS; but if the organization chooses to file a return, be	covered	by a group ruling? Ves No		
			olete return. Some states require a complete return.	nption N	umber ▶ 1894		
	_				the organization is not required		
					Form 990, 990-EZ, or 990-PF).		
P	art I		nue, Expenses, and Changes in Net Assets or Fund Balances (See the	instru	ctions.)		
	1		utions, gifts, grants, and similar amounts received:				
			oublic support				
	1		public support	_			
			ment contributions (grants)		040.450		
			dd lines 1a through 1c) (cash \$ 235,248 noncash \$ 10,908 ) .	1d	246,156		
	2	_	n service revenue including government fees and contracts (from Part VII, line 93)	2	24,594		
	3		ership dues and assessments	4	0		
	4		on savings and temporary cash investments	5	0		
	5		ds and interest from securities	_	0		
	6a		ens	_			
	1		erital expenses	6c	0		
	7		tal income or (loss) (subtract line 6b from line 6a)	7	0		
Revenue			(A) Sequentias (B) Other				
eve	ва	than inv	amount from sales of assets other ventory	<u></u>			
æ	h		ost or other basis and sales expenses, 0 8b 0				
			(loss) (attach schedule) 0 8c 0	7			
			n or (loss) (combine line 8c, columns (A) and (B))	8d	0		
	9	_	events and activities (attach schedule). If any amount is from <b>gaming</b> , check here				
	1		revenue (not including \$ of				
	"		utions reported on line 1a) 9a 0				
	b		lirect expenses other than fundraising expenses . 9b 0				
	С	Net inco	ome or (loss) from special events (subtract line 9b from line 9a)	9с	0		
	10a	Gross s	sales of inventory, less returns and allowances				
	b	Less: c	ost of goods sold				
	С		rofit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a).	10c	0		
	11	Other re	evenue (from Part VII, line 103)	11	0		
	12			12	270,750		
s	13	_	m services (from line 44, column (B))	13	20,456		
Expenses	14	_	ement and general (from line 44, column (C))	14	229,426		
xpe	15		ising (from line 44, column (D))	15	0		
ш	16   17	Paymer	nts to affiliates (attach schedule)	16	240.992		
			xpenses (add lines 16 and 44, column (A))	17	249,882		
Net Assets	18		or (deficit) for the year (subtract line 17 from line 12)	18	20,868 553,447		
As	19		sets or fund balances at beginning of year (from line 73, column (A))	19 20	0		
Net	20 21		changes in net assets or fund balances (attach explanation) sets or fund balances at end of year (combine lines 18, 19, and 20)	21	574,315		
	1	, 101 a00	to the salarious at one or year (combine into 10, 10, and 20)	121	017,010		

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	<b>(B)</b> Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ noncash \$) If this amount includes foreign grants, check here ▶ □	22	0	0		
23	Specific assistance to individuals (attach schedule)	23	0	0		
24	Benefits paid to or for members (attach schedule)	24	0	0		
25	Compensation of officers, directors, etc	25	0	0	0	0
26	Other salaries and wages	26	0	0	0	0
27	Pension plan contributions	27	0	0	0	0
28	Other employee benefits	28	0	0	0	0
29	Payroll taxes	29	0	0	0	0
30	Professional fundraising fees	30	0	0	0	0
31	Accounting fees	31	0	0	0	0
32	Legal fees	32	2,627	0	2,627	0
33	Supplies	33	9,102	680	8,422	0
34	Telephone	34	3,878	0	3,878	0
35	Postage and shipping	35	373	0	373	0
36	Occupancy	36	125,370	0	125,370	0
37	Equipment rental and maintenance	37	22,641	0	22,641	0
38	Printing and publications	38	5,784	2,023	3,761	0
39	Travel	39	2,429	0	2,429	0
40	Conferences, conventions, and meetings	40	17,753	17,753	0	0
41	Interest	41	2,733	0	2,733	0
42	Depreciation, depletion, etc. (attach schedule)	42	0	0	0	0
43 a	Other expenses not covered above (itemize): See Statement 1	43a	57,192		57,192	
b		43b				
С		43c				
d		43d				
е		43e				
f		43f				
g		43g				
44	<b>Total functional expenses.</b> Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines					
	13–15)	44	249,882	20,456	229,426	0
Are a	t Costs. Check ▶ ☐ if you are following SOP any joint costs from a combined educational campaign	and fu				
	es," enter (i) the aggregate amount of these joint costs	s \$				; \$;
(iii) tl	he amount allocated to Management and general \$		; and (iv) the	e amount allocated	to Fundraising \$	

#### Part III Statement of Program Service Accomplishments (See the instructions.)

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

Wł	hat is the organization's primary exempt purpose?   Religious church-based prayer ministry	Program Service
All of	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) ganizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
а	See Statement 2	
	(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □	
<b>L</b>	, , , , , , , , , , , , , , , , , , , ,	
b	<sup>1</sup>	
	(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □	
С	;	
	(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □	
d		
u		
	<u></u>	
	(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □	
е	Other program services (attach schedule)	
	(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □	
Ť	Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	20,456

Form **990** (2005)

Pa	art IV	Balance Sheets (See the instructions.	)				
N	lote:	Where required, attached schedules and amounts column should be for end-of-year amounts only.		he description	(A) Beginning of year		<b>(B)</b> End of year
	45	Cash—non-interest-bearing			5,620	45	0
	46	Savings and temporary cash investments .			0	46	0
		Accounts receivable	47a	0	0	47-	0
	b	Less: allowance for doubtful accounts .	47b	U	0	47c	
	40-	Diadesa wasai salala	48a	0			
		Pledges receivable	48b	0	0	48c	0
	49	Grants receivable			0		0
	50	Receivables from officers, directors, trustee					-
	30	(attach schedule)			0	50	0
	51a	Other notes and loans receivable (attach					
ets		schedule)	51a	0			
Assets	b	Loos: anowarios for adaptial accounts :	51b	0	0		0
Q	52	Inventories for sale or use			0		0
	53	Prepaid expenses and deferred charges .			0		0
	54	Investments—securities (attach schedule) .		· ☐ Cost ☐ FMV	0	54	
	55a	Investments—land, buildings, and equipment: basis	55a	0			
	h	Less: accumulated depreciation (attach	1000				
		schedule)	55b	0	0	55c	0
	56	Investments—other (attach schedule)			0	56	0
	57a	Land, buildings, and equipment: basis .	57a	574,315			
	b	Less: accumulated depreciation (attach schedule) .Stmt 3	57b	0	550,787	57c	574,315
	58	Other assets (describe >		)	0	58	0
		<b>7</b>	45 11	1 50			
	59	Total assets (must equal line 74). Add lines	556,407		574,315		
	60	Accounts payable and accrued expenses .			2,960		0
	61	Grants payable			0		0
S	62	Deferred revenue				UZ.	
Liabilities	63	Loans from officers, directors, trustees, and schedule)			0	63	0
abil	64a	Tax-exempt bond liabilities (attach schedule)				64a	0
Ë	1	Mortgages and other notes payable (attach s			0	64b	0
	65	Other liabilities (describe ▶			0	65	0
	66		_		2,960	66	0
	Orga	anizations that follow SFAS 117, check here ▶	· ∐ a	nd complete lines			
es	07	67 through 69 and lines 73 and 74.				67	
anc	67	Unrestricted				68	
3ale	68 69	Permanently restricted				69	
D E		anizations that do not follow SFAS 117, check					
Fund Balances	Juga	complete lines 70 through 74.	11616	ailu			
or	70	Capital stock, trust principal, or current funds	S		0	70	0
ts	71	Paid-in or capital surplus, or land, building, a			539,136	71	553,447
SSE	72	Retained earnings, endowment, accumulated	-	-	14,311	72	20,868
Net Assets or	73	<b>Total net assets or fund balances</b> (add line 70 through 72;	s 67 tl	nrough 69 <b>or</b> lines			
_		column (A) must equal line 19; column (B) m			553,447	73	574,315
	74	Total liabilities and net assets/fund balance	<b>s.</b> Add	lines 66 and 73.	556,407	74	574,315

Pa		conciliation of Revenue per Aud tructions.)	ited Financial Statem	ents With Rev	enue pe	r Return	(See the
а	Total revenue	, gains, and other support per audit	ed financial statements			а	270,750
b		uded on line <b>a</b> but not on Part I, line					<u> </u>
1		d gains on investments		b1	0		
2		ces and use of facilities		b2	0		
3		prior year grants		b3	0		
_							
4		/):		b4	0		
		University In A		DT		b	0
		through <b>b4</b>					270,750
С		b from line a				С	210,130
d		uded on Part I, line 12, but not on lin		ايما	•		
1		penses not included on Part I, line		d1	0		
2	Other (specify	'):			_		
				d2	0		_
	Add lines <b>d1</b>					d	0
е	Total revenue	e (Part I, line 12). Add lines c and d	<u> </u>		<u> ▶ </u>	e	270,750
Pa	rt IV-B Re	conciliation of Expenses per Au	dited Financial Stater	nents With Exp	penses p	er Retur	
а	Total expense	es and losses per audited financial s	tatements			а	249,882
b	Amounts inclu	uded on line a but not on Part I, line	17:				
1	Donated servi	ces and use of facilities		b1	0		
2		ustments reported on Part I, line 20		b2	0		
3		ed on Part I, line 20		b3	0		
4		):					
•				b4	0		
		through <b>b4</b>				b	0
_						c	249,882
C		b from line a					2.0,002
d		uded on Part I, line 17, but not on lin		41	0		
1		penses not included on Part I, line		d1	<u> </u>		
2	Other (specify	r):		-10	0		
				d2	U		•
_	Add lines <b>d1</b>					d	0
е		es (Part I, line 17). Add lines c and				е	249,882
Pa		ent Officers, Directors, Trustees					
	or ke	y employee at any time during the year	ar even if they were not o				
		(A) Name and address	(B) Title and average hours per	(C) Compensation (If not paid, enter	(D) Contributi benefit pla	ons to employee ns & deferred	(E) Expense account and other allowances
			week devoted to position	-0)	compens	ation plans	
See	Statement 4						
_							
					1		

81a Enter direct and indirect political expenditures. (See line 81 instructions.) . . . 81a

**b** Did the organization file **Form 1120-POL** for this year? . . . . . .

0

81b

Pai	t VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	~	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II.  (See instructions in Part III.)  82b   36,000			
83a	(See instructions in Part III.)	83a	~	
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	~	
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	501(c)(4), (5), or (6) organizations. <b>a</b> Were substantially all dues nondeductible by members?	85a		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
С	Dues, assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the			
	following tax year?	85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12			
b	Gross receipts, included on line 12, for public use of club facilities 86b			
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or			
	partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		<b>v</b>
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		~
С	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			0
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0
90a	List the states with which a copy of this return is filed ▶ None			
b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	(	)	
91a	The books are in care of ► Ric Lumbard  Located at ► 2976 County Home Rd, Marion, IA  Telephone no. ► 319-294-5  ZIP + 4 ► 523			
b	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)?	91b	Yes	No 🗸
	If "Yes," enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country	91c		<u> </u>
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶   92		. )	<b></b>

Part '	VII	<b>Analysis of Income-Producing</b>	Activities (See	the ii	nstructions.	.)			
Note:	Enter o	gross amounts unless otherwise	Unrelated b	ousine	ess income	Excluded	by sect	ion 512, 513, or 514	(E)
indicate	ed.	am service revenue:	(A) Business code		<b>(B)</b> Amount	(C) Exclusion	code	<b>(D)</b> Amount	Related or exempt function income
а		ield Spiritual Equipping Center				03		24,594	
b		The second secon						,	
C									
d									
e									
	Medic	are/Medicaid payments							
		and contracts from government agenci	I						
94		ership dues and assessments							
95		t on savings and temporary cash investmen							
96		nds and interest from securities							
97		ntal income or (loss) from real estate:							
		inanced property							
		ebt-financed property							
98		ntal income or (loss) from personal proper							
99		investment income							
100	Gain or	(loss) from sales of assets other than inventor	ory						
101	Net in	come or (loss) from special events .							
102		profit or (loss) from sales of inventory							
103		revenue: a	I						
b									
С									
d									
е									
104		tal (add columns (B), (D), and (E)) .			0			24,594	\$0
105		(add line 104, columns (B), (D), and (E						.▶	24,594
_		05 plus line 1d, Part I, should equal th				(C	) 4l-	- itt	
Part \		Relationship of Activities to the A							
Line I	No.	Explain how each activity for which inco of the organization's exempt purposes (						nportantly to the	accomplishment
		the first term of the first te				1 1	-,		
Part	IX	Information Regarding Taxable Su	bsidiaries and D	isreg	arded Entit	ies (See	the i	nstructions.)	
		(A) address, and EIN of corporation,	(B) Percentage of		(C)	,		(D)	(E)
			ownership interest		Nature of ac	tivities		Total income	End-of-year assets
			%						
			%						
			%						
			%						
Part :	X	Information Regarding Transfers As	sociated with Per	sonal	Benefit Cor	ntracts	See tl	ne instructions.)	
(a)	Did the	organization, during the year, receive any funds	, directly or indirectly,	to pay	premiums on a	personal	benefit	contract? .	☐ Yes 🗹 No
		e organization, during the year, pay p							☐ Yes 🗹 No
Note	: If "Y	es" to <b>(b),</b> file Form 8870 <b>and</b> Form 4	1720 (see instruct	ions).					
		der penalties of perjury, I declare that I have exar I belief, it is true, correct, and complete. Declara							
Please	- 1	beller, it is true, correct, and complete. Declara	ation of preparer (other	manc	officer) is based	on all line	Jiiialio	ii oi wilicii preparer	rias ariy kriowieuge.
Sign									
Here		Signature of officer					Da	ate	
		Ric Lumbard, Board Secretary / Pa	astor						
		Type or print name and title.							
Paid		parer's			Date	Check if self-	_	Preparer's SSN or	PTIN (See Gen. Inst. W
Prepare	r's	nature				employe	d►	<u> </u>	
Use Only	ı Firr	n's name (or yours elf-employed),					EIN	<b>&gt;</b>	
		dress, and ZIP + 4					Phone	no. ▶ ( )	

### **SCHEDULE A**

(Form 990 or 990-EZ)

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

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

Supplementary Information—(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

WIND AND FIRE MINISTRIES INC			42 1526622	
Part I Compensation of the Five High (See page 1 of the instructions. I				nd Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000 .	0			
Part II-A Compensation of the Five Higher (See page 2 of the instructions. List				
(a) Name and address of each independent contractor	r paid more than \$50,000	<b>(b)</b> Type	of service	(c) Compensation
None				
Total number of others receiving over \$50,000 for professional services	0			
Part II-B Compensation of the Five Highe (List each contractor who perform firms. If there are none, enter "No	ned services other than p	professional serv	Other Services rices, whether inc	lividuals or
(a) Name and address of each independent contractor	r paid more than \$50,000	<b>(b)</b> Type	of service	(c) Compensation
None				
Total number of other contractors receiving over \$50,000 for other services	0			

Pai	rt III	Statements About Activities (See page 2 of the instructions.)	Yes	No		
1	atte or i	ring the year, has the organization attempted to influence national, state, or local legislation, including any empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities   \$\bigsim \frac{1}{2}  \text{(Must equal amounts on line 38, to VI-A, or line i of Part VI-B.)}	1	~		
	org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other panizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of lobbying activities.				
2	sub wit	ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any ostantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or h any taxable organization with which any such person is affiliated as an officer, director, trustee, majority ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the insactions.)				
а	Sal	e, exchange, or leasing of property?	a	~		
b			b	~		
С		rnishing of goods, services, or facilities?	c	<b>/</b>		
d		ymont of compensation (or paymont of formbardement of expenses if more than \$1,000).	d	<b>/</b>		
е		insier of any part of its income of assets:	e	<b>/</b>		
3a	you	determine that recipionts qualify to receive payments.	a			
b		you have a dodion 400(b) annuty plan for your omproyects.	b	<b>/</b>		
С		ing the year, and the eigenization receive a contribution of qualified real property interest and section 17 o(n).	С	<b>/</b>		
4a		I you maintain any separate account for participating donors where donors have the right to provide advice on		<b>/</b>		
b			a b	\ <u>\</u>		
			<u> </u>			
	rt I\					
The	orga	inization is not a private foundation because it is: (Please check only <b>ONE</b> applicable box.)				
5		A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).				
6	Н	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)				
7	Н	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).				
8 9		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital and state ▶	's nam	∍, city,		
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section (Also complete the <b>Support Schedule</b> in Part IV-A.)	170(b)(1	)(A)(iv).		
11a		An organization that normally receives a substantial part of its support from a governmental unit or from the general part of its support from a governmental unit or from the general part 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)	ublic. S	ection		
11b		A community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)				
12		An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 331/3% from gross investment income and unrelated business taxable income (less section 511 tax) from businesses accorganization after June 30, 1975. See section 509(a)(2). (Also complete the <b>Support Schedule</b> in Part IV-A.)	of its s	upport		
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and support described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section the box that describes the type of supporting organization: ► ☐ Type 1 ☐ Type 2 ☐ ☐				
		Provide the following information about the supported organizations. (See page 6 of the instructions.)  (b) Line nu	mber			
		(a) Name(s) of supported organization(s) from ab				
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions	s.)			

ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2003	(c) 2002	(d) 200	01 (	e) Total
Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.).						
Membership fees received						
Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose						
Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975.						
Net income from unrelated business activities not included in line 18						
Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						
The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets						
	a Enter 2% of	amount in colur	mn (e) line 24	•	26a	
Prepare a list for your records to show the nan governmental unit or publicly supported organiz amount shown in line 26a. <b>Do not file this list wi</b>	ne of and amoun zation) whose tota ith your return. E	t contributed by al gifts for 2001 t inter the total of a	each person (other through 2004 exce all these excess am	er than a eeded the nounts	26b	
				▶	26c	
22		26b			26d	
Public support (line 26c minus line 26d total)				•	26e	
Public support percentage (line 26e (numera	itor) divided by	line 26c (denom	ninator))	•	26f	%
person," prepare a list for your records to show <b>Do not file this list with your return.</b> Enter the (2004)	the name of, and e sum of such ar ved from each per year, that was mo 5 through 11b, as the larger amoun	total amounts remounts for each (2002)rson (other than "ore than the larger well as individuals at described in (1)	disqualified persons r of (1) the amount b) Do not file this li ) or (2), enter the s	ar from, each (2001) (2001) s"), prepare on line 25 fo st with you um of these	a list for you or the year o r return. Afte e differences	ur records to r (2) \$5,000. er computing (the excess
(2004)				(2001)		
Add: Amounts from column (e) for lines: 15					27c	
17 20		21			27c	
17 20 Add: Line 27a total,	and line 27b tota	21 al		▶	27d	
Add: Line 27a total 20 Public support (line 27c total minus line 27d to	and line 27b tota	21 al 	· · · · · · · · · · · · · · · · · ·	▶		
17 20 Add: Line 27a total,	and line 27b tota  tal)  mount from line	21al 23, column (e) .			27d	%
	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose.  Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975  Net income from unrelated business activities not included in line 18.  Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.  The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.  Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets  Total of lines 15 through 22.  Line 23 minus line 17.  Enter 1% of line 23  Organizations described on lines 10 or 11:  Prepare a list for your records to show the nan governmental unit or publicly supported organizations thown in line 26a. Do not file this list with Total support for section 509(a)(1) test: Enter lines Add: Amounts from column (e) for lines: 18  Public support percentage (line 26e (numeration) or any amount included in line 17 that was received for each show the name of, and amount received for each show the name of, and amount received for each show the name of, and amount received for each show the name of, and amount received for each show the name of, and amount received for each show the name of, and amount received for each show the name of, and amount received for each show the name of, and amount received for each show the name of, and amount received for each show the name of, and amount received for each show the name of, and amount received for each show the name of, and amount received for each show the name of, and amount received for each show the name of, and amount received for each	Membership fees received	Membership fees received	Membership fees received	Membership fees received  Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose  Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975  Net income from unrelated business acquired by the organization after June 30, 1975  Net income from unrelated business acquired by the organization after June 30, 1975  Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf  Tax revenues levied for the organization's benefit and either paid to it or expended to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge. On the include gain or (loss) from sale of capital assets  Total of lines 15 through 22  Cine 23 minus line 17.  Enter 1% of line 23  Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶  Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶  Total support for section 509(a)(1) test: Enter line 24, column (e) ▶  Public support gline 26c minus line 26d total) ▶  Public support gline 26c minus line 26d total) ▶  Public support gline 26c minus line 26d total) ▶  Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶  Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶  Programizations described on line 12: a For amounts included in	Membership fees received

prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief

description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

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

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

	( · · · · · · · · · · · · · · · · · · ·			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,	29	Yes	No
	other governing instrument, or in a resolution of its governing body?	23		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions,	00		
	programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way			
	that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
-	with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
С	Employment of faculty or administrative staff?	33c		
·	Employment of labalty of administrative staff:			
d	Scholarships or other financial assistance?	33d		
u	ocholarships of other infaholar assistance: , , , , , , , , , , , , , , , , , , ,			
е	Educational policies?	33e		
C	Educational policies:			
f	Use of facilities?	33f		
g	Athletic programs?	33g		
		33h		
h	Other extracurricular activities?	3311		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05			
00	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Pa	rt VI-A Lobbying Expenditures by EI  (To be completed ONLY by an					instruc	tions.)	
Che	ck $ ightharpoonup$ a if the organization belongs to an affilia	ated group. Che	eck ▶ b 🗌 if	you checked	<b>"a"</b> ar	d "limited	d control"	provisions apply.
	Limits on Lobbyi (The term "expenditures" mea					Affiliate	a) d group tals	(b) To be completed for ALL electing organizations
					36			organizations
36	Total lobbying expenditures to influence public		,		37			
37 38	Total lobbying expenditures to influence a legis Total lobbying expenditures (add lines 36 and	• '			38			
39	Other exempt purpose expenditures	,			39			
40	Total exempt purpose expenditures (add lines				40			
41	Lobbying nontaxable amount. Enter the amour	,			-			
••		obbying nontaxa	•	.				
	Not over \$500,000 20%							
	Over \$500,000 but not over \$1,000,000 . \$100,000							
	Over \$1,000,000 but not over \$1,500,000 . \$175,	000 plus 10% of th	e excess over \$1,0	000,000	41			
	Over \$1,500,000 but not over \$17,000,000. \$225,	000 plus 5% of the	e excess over \$1,5	500,000				
		0,000						
42	Grassroots nontaxable amount (enter 25% of I	ine 41)			42			
43	Subtract line 42 from line 36. Enter -0- if line 4				43			
44	Subtract line 41 from line 38. Enter -0- if line 4	1 is more than lir	ne 38		44			
	Caution: If there is an amount on either line 43	3 or line 44, you n	nust file Form 47	20.				
		eraging Period						
	(Some organizations that made a section See the instructions f						lumns be	elow.
		Lob	bying Expenditu	ıres During	4-Ye	ar Avera	aging Pe	riod
	Calendar year (or	(a)	(b)	(c)		(0	d)	(e)
	fiscal year beginning in) ▶	2005	2004	2003		20	002	Total
45	Lobbying nontaxable amount							
46	Lobbying ceiling amount (150% of line 45(e))							
47	Total lobbying expenditures							
48	Grassroots nontaxable amount							
49	Grassroots ceiling amount (150% of line 48(e))							
50	Grassroots lobbying expenditures	tion or Dealetin O	L					
Pa	t VI-B Lobbying Activity by Nonelectivity (For reporting only by organization)			Part VI-A) (	See	page 1	1 of the	e instructions.)
Duri	ng the year, did the organization attempt to influ	uence national, st	ate or local legis	lation, includ	ding a	ny γ	es No	Amount
atte	mpt to influence public opinion on a legislative n	natter or referend	um, through the	use of:				7 anount
а	Volunteers						<u> </u>	
b	Paid staff or management (Include compensation			_		I	<i>V</i>	
С	Media advertisements					I	V V	
d	Mailings to members, legislators, or the public					I	V	
е	Publications, or published or broadcast statem					I	- V	
f	Grants to other organizations for lobbying purp						V	
g	Direct contact with legislators, their staffs, gov						- V	
h i	Rallies, demonstrations, seminars, conventions Total lobbying expenditures (Add lines <b>c</b> through							0
'	If "Yes" to any of the above, also attach a stat		etailed descriptio	n of the lob	 bvina	activitie	S.	•

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Part VII	Information	Regarding	Transfers	То	and	Transactions	and	Relationships	With	Noncharitable
	<b>Exempt Orga</b>	anizations (S	See page 1	2 of '	the in	nstructions.)				

51					following with any other organization de on 527, relating to political organizations		d in se	ection
а				to a noncharitable exempt orga			Yes	No
а		Cash	0 0	to a nonchantable exempt orga	mization of.	51a(i)		~
		Other assets				a(ii)		~
b	٠,	er transactions:				- ( )		
b			oe of accote with a	noncharitable exempt organizat	ion	b(i)		<b>'</b>
				itable exempt organization		b(ii)		~
						b(iii)		~
				ner assets		b(iv)		~
						b(v)		~
		ŭ						~
				ship or fundraising solicitations		b(vi)		~
		_		sts, other assets, or paid employ		С		
d	goo	ds, other assets, o	r services given by	the reporting organization. If the	<ul> <li>Column (b) should always show the fair ne organization received less than fair ms, other assets, or services received:</li> </ul>			
(;	a)	(b)		(c)	(d)			
Line	no.	Amount involved	Name of none	charitable exempt organization	Description of transfers, transactions, and sha	aring arra	angeme	ents
	des	cribed in section 50 (es," complete the	01(c) of the Code (	other than section 501(c)(3)) or i		Yes		No
		(a) Name of organiz	ation	(b) Type of organization	(c) Description of relationship			

Question: 43

Form: 990 Page: 2 Part: II

WIND AND FIRE MINISTRIES INC 42-1526622

### Attachment listing other expenses for Part II

Description	Total:	Pgm Services	Mgt and General	Fundrasing
Vehicle maintenance	\$15,052.00	\$0.00	\$15,052.00	\$0.00
Ministry dues and tithes	\$1,271.00	\$0.00	\$1,271.00	\$0.00
Benevolence	\$1,944.00	\$0.00	\$1,944.00	\$0.00
Media subscriptions	\$60.00	\$0.00	\$60.00	\$0.00
Meetings/entertainment	\$1,213.00	\$0.00	\$1,213.00	\$0.00
Missions ministry support	\$23,791.00	\$0.00	\$23,791.00	\$0.00
Domestic ministry support	\$4,593.00	\$0.00	\$4,593.00	\$0.00
Product media	\$1,516.00	\$0.00	\$1,516.00	\$0.00
Farm operations	\$7,752.00	\$0.00	\$7,752.00	\$0.00
Total:	\$57,192.00	\$0.00	\$57,192.00	\$0.00

WIND AND FIRE MINISTRIES INC 42-1526622

Form: 990 Page: 3 Part: III Question:

### **Program Services**

Achievement		Pgm. Svc. Exp.
various regional churches ministrie programs have provided within regi	ment: WFM was able to assist and train several hundred individuals from s and individuals. Our 90-day intensive programs and the benefit these onal ministry community. (175 Regional Staff Ministry Positions)	
Grants and Allocations:	\$0.00	
support in the form of over 8500 ho	nent: WFMs prayer ministry provided regional prayer and ministry urs of staff ministry during the 2005 Calendar year through WFM o clergy and lay people within the faith community of our region. (8500	\$0.00
Grants and Allocations:	\$0.00	

Total: \$20,456.00

WIND AND FIRE MINISTRIES INC 42-1526622

Form: 990 Page: 4 Part: IV Question: 57

### Schedule of Land, Buildings and Equipment

Description	Cost	Depreciation	Book Value
Buildings, Vehicles, Eq.	\$574,315.00	\$0.00	\$574,315.00
Total:	\$574,315.00	\$0.00	\$574,315.00

Form: 990 Page: 5 Part: V Question:

## WIND AND FIRE MINISTRIES INC 42-1526622

### Officers, Directors, Trustees, and Key Employees

Name and Address	Title	Hrs	Comp.	Benefits	Expenses
Gregory Wildebour 25 Thompson Dr Palo, IA 52324 United States	President	6	\$0.00	\$0.00	\$0.00
Ric Lumbard 3243 Wind and Fire Dr Marion, IA 52302 United States	Secretary / Pastor	60	\$0.00	\$0.00	\$0.00
John Long 2530 24th Ave Marion, IA 52302 United States	Treasurer	2	\$0.00	\$0.00	\$0.00
Marvin Pospisil 112 19th Ave Ct Hiawatha, IA 52233 United States	Board Member	2	\$0.00	\$0.00	\$0.00
Duane Modracek 920 Grey Wolf Ct Hiawatha, IA 52233 United States	Board Member	2	\$0.00	\$0.00	\$0.00
TOTALS			\$0.00	\$0.00	\$0.00

Statement 5
Form: Schedule A

WIND AND FIRE MINISTRIES INC 42-1526622

Page: 2 Part: III Question: 3

#### **Explanation of Grant Determination**

#### **Explanation of grant qualifications**

WFM has offered partial tuition scholarships for benevolent cases where anyone who applies and can demonstrate hardship, but an ability to self-fund at least 1 (one) tution credit hour (\$20.00). They may receive scholarship funding for the remainder of the tuition credits. The selection process is not discriminatory, but is based on an ability to participate with a single credit hour payment and demonstrate a current financial hardship.