Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.

<u>A</u>	ror	ne 2022 calendar year, or tax year beginning and	ending			
В	Check applic	C Name of organization D Employer identification		fication number		
	lcha	THE GOSPEL MISSION				
		Doing business as		42-0819319		
		n Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	suite E Telephone number		
		M SOU BLOFF SIREEI, PO BOX 3745		712-255-1769		
_	ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	G Gross receipts \$ 3,883,056.	
lre				H(a) Is this a group return		
tion per		nding FOO DIVIDE CONTROL OF A		for subordinate		
	Tayo			H(b) Are all subordinates		
. W WIN THE COCDET MICCION ODG					a list. See instructions	
		of organization: X Corporation Trust Association Other	I Voor	H(c) Group exemption 19/17		
-	art I		IL real (oriorination, 1947	M State of legal domicile; IA	
<u></u>	1	Briefly describe the organization's mission or most significant activities: PROVI	IDE CL	OTHING SHE	TITER	
ŭ		NUTRITION, AND PASTORAL SERVICES FOR THE HOMELESS AND THE NEEDY				
rus	2					
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)			9	
	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	9	
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		5	95	
	6	Total number of volunteers (estimate if necessary)		6	132	
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	A	7a	0.	
	t	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.	
				Prior Year	Current Year	
Revenue	8	Contributions and grants (Part VIII, line 1h)		3,671,574.	3,826,256.	
	9	Program service revenue (Part VIII, line 2g)		0.	0.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-20,360.		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		30,332.		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII) column (A) cline 12)		3,681,546.	3,856,890.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		6,775.	4,934.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.	
Net Assets or Expenses	ł	Salaries, other compensation, employee benefits (Part IX; column A), lines 5-10) Professional fundraising fees (Part IX, column (A), line (1e)		1,045,355.	1,178,881.	
		Total fundraising expenses (Part IX, column (D), line 25) 242, 25	·····	0.	0.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,469,245.	2 222 007	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,521,375.	2,223,907. 3,407,722.	
	19	Revenue less expenses. Subtract line 18 from line 12		160,171.	449,168.	
		The state of the s		inning of Current Year	End of Year	
	20	Total assets (Part X, line 16)		5,110,679.	6,119,900.	
	21	Total liabilities (Part X, line 26)		91,051.	708,640.	
캺	22	Net assets or fund balances. Subtract line 21 from line 20		5,019,628.	5,411,260.	
	rt II	Signature Block				
Unde	r pena	lties of perjury, I declare that I have examined this return, including accompanying schedules a	and statemer	nts, and to the best of m	y knowledge and belief, it is	
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of whic	h preparer h	as any knowledge.	,	
Sign Here		Signature of officer Date				
		RANDY EHLERS, EXECUTIVE DIRECTOR Type or print name and title				
Paid Preparer Use Only		Print/Type preparer's name Preparer's signature	Da	i oncou	PTIN	
		MICHAEL T TRAMP	J0 6	102/23 sell-employe	P00121903	
		Firm's name HENJES CONNER & WILLIAMS PC Firm's address PO BOX 1937		Firm's EIN 4	8-1292483	
(····y	DAKOTA DUNES, SD 57049			05/040 2000	
May	the I	S discuss this return with the preparer shown above? See instructions		Phone no. (6)	05)242-3900	
ridy	nie it	o discuss this return with the preparer shown above? See instructions			X Yes No	