

**IRS E-file Signature Authorization
for a Tax Exempt Entity**

For calendar year 2023, or fiscal year beginning 7/01, 2023, and ending 6/30, 2024

2023

Department of the Treasury
Internal Revenue Service
Name of filer

**Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.**

EIN or SSN

WORLDWIDE DISCIPLESHIP ASSOCIATION 58-1211155

Name and title of officer or person subject to tax **ROBERT DUKES
PRESIDENT/ CEO**

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	1,796,343
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b	
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	
8a Form 5227 check here <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize **RESJ P.C.** to enter my PIN **11221** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date **01/22/25**

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

58472932165

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature **STEVEN A. CARTER**

Date **01/22/25**

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

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

Department of the Treasury
Internal Revenue Service

A For the 2023 calendar year, or tax year beginning 07/01/23, and ending 06/30/24

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending
C Name of organization: WORLDWIDE DISCIPLESHIP ASSOCIATION
Doing business as
Number and street (or P.O. box if mail is not delivered to street address): 110 CARNEGIE PLACE, SUITE 100
Room/suite
City or town, state or province, country, and ZIP or foreign postal code: FAYETTEVILLE GA 30214
D Employer identification number: 58-1211155
E Telephone number: 770-460-1337
F Name and address of principal officer: ROBERT DUKES, 110 CARNEGIE PLACE, FAYETTEVILLE GA 30214
G Gross receipts: 1,796,343
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
H(c) Group exemption number

I Tax-exempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527
J Website: WWW.DISCIPLEBUILDING.ORG
K Form of organization: X Corporation Trust Association Other
L Year of formation: 1974
M State of legal domicile: GA

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O; 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets; 3-6 Governing body and employee/volunteer counts; 7a-b Revenue and taxable income; 8-12 Revenue breakdown; 13-19 Expenses breakdown; 20-22 Net assets or fund balances.

Part II Signature Block

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

Sign Here: Signature of officer ROBERT DUKES, PRESIDENT/ CEO, Date
Paid Preparer Use Only: Print/Type preparer's name STEVEN A. CARTER, Preparer's signature STEVEN A. CARTER, Date 01/22/25, Check self-employed, PTIN P00284550, Firm's name RESJ P.C., Firm's EIN 58-2647076, Firm's address 2330 PATRICK HENRY PARKWAY, STE 100, MCDONOUGH, GA 30253, Phone no. 770-474-7703

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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



1 Briefly describe the organization's mission:

SEE SCHEDULE O

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

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

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

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

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

4a (Code:) (Expenses \$ **1,603,611** including grants of\$) (Revenue \$ **1,723,943**)

DOMESTIC AND INTERNATIONAL FUNDS CARRYING OUT THE MINISTRY'S PURPOSE AND GOALS

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

N/A

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

N/A

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

(Expenses \$ including grants of\$) (Revenue \$)

4e Total program service expenses **1,603,611**

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	39		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			X
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			X
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17			

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	11	
1b	Enter the number of voting members included on line 1a, above, who are independent	9	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **GA**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records.
DAVID PARFITT **110 CARNEGIE PLACE**
FAYETTEVILLE **GA 30214** **770-460-1337**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROBERT DUKES	40.00									
PRESIDENT/ CEO	0.00	X		X			88,415	0	51,748	
(2) DAVID PARFITT	40.00									
COO/ CO-CHAIRMAN	0.00	X		X			37,909	0	42,880	
(3) JESSE DUKES	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(4) ROSS GREENE	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(5) WOODY JOHNSON	0.00									
BOARD CHAIRMAN	0.00	X					0	0	0	
(6) DR HUGH KIRBY	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(7) C. J. STANFORD	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(8) DR JOYCE WEBB	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(9) KEYAAN WILLIAMS	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(10) MIKE WOLF	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(11) DR MIKE YOUNKER	0.00									
BOARD MEMBER	0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal							126,324		94,628	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							126,324		94,628	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

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

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,718,819				
	g Noncash contributions included in lines 1a-1f	1g	\$ 72,879				
	h Total. Add lines 1a-1f		1,718,819				
	Program Service Revenue	2a	Business Code				
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		24,960	24,960			
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c					
d Net gain or (loss)							
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11a BOOKSTORE SALES	Business Code	35,124	35,124			
	b RELEASED FROM RESTRICTIONS		17,440	17,440			
	c						
	d All other revenue						
	e Total. Add lines 11a-11d		52,564				
12 Total revenue. See instructions		1,796,343	77,524	0	0		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	126,324	113,692	10,106	2,526
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,379,200	1,241,280	110,336	27,584
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	19,370	2,500	16,870	
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion				
13 Office expenses	57,351	30,547	26,804	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	89,788	87,075	2,713	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	2,987		2,987	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	7,373		7,373	
23 Insurance	28,890	2,249	26,641	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a GOOGLE ADVERTISING GRANT	69,434	69,434		
b SUPPLIES	21,970	14,828	7,142	
c ASSETS RELEASED FROM REST	17,440	17,440		
d REPAIRS AND MAINTENANCE	16,715		16,715	
e All other expenses	41,242	24,566	8,082	8,594
25 Total functional expenses. Add lines 1 through 24e	1,878,084	1,603,611	235,769	38,704
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	293,910	1	155,176
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	9,979	4	45,360
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	7,132	9	10,132
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 509,647		
	b Less: accumulated depreciation	10b 437,850	78,368	10c 71,797
	11 Investments—publicly traded securities	503,488	11	510,243
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)		892,877	16	792,708
Liabilities	17 Accounts payable and accrued expenses	17,475	17	12,380
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	66,667	25	53,334
	26 Total liabilities. Add lines 17 through 25	84,142	26	65,714
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	808,735	27	714,434
	28 Net assets with donor restrictions		28	12,560
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	808,735	32	726,994	
33 Total liabilities and net assets/fund balances	892,877	33	792,708	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,796,343
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,878,084
3	Revenue less expenses. Subtract line 2 from line 1	3	-81,741
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	808,735
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	726,994

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

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

2023

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public
Inspection

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

Name of the organization WORLDWIDE DISCIPLESHIP ASSOCIATION	Employer identification number 58-1211155
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990) 2023

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,496,057	1,331,297	1,570,598	1,671,417	1,718,819	7,788,188
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,496,057	1,331,297	1,570,598	1,671,417	1,718,819	7,788,188
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						111,068
6 Public support. Subtract line 5 from line 4						7,677,120

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	1,496,057	1,331,297	1,570,598	1,671,417	1,718,819	7,788,188
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	9,928	2,017	4,603	6,756	35,124	58,428
11 Total support. Add lines 7 through 10						7,846,616
12 Gross receipts from related activities, etc. (see instructions)					12	342,443
13 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) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))	14	97.84 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	99.44 %
16a 33 1/3% support test — 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test — 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test — 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test — 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests — 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests — 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
	a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a	
	b A family member of a person described on line 11a above?	11b	
	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 detail in Part VI.</i>	11c	

Section B. Type I Supporting Organizations

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	1	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>	2	

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	1	

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>	2a	
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b	
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b	

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

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

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

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

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

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

Section D – Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

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

PART II, LINE 10 - OTHER INCOME DETAIL

BOOKSTORE SALES \$ **58,428**

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization

Employer identification number

WORLDWIDE DISCIPLESHIP ASSOCIATION

58-1211155

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? (Yes/No), 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? (Yes/No)

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

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of a historically important land area, Preservation of a certified historic structure; 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year: a Total number of conservation easements, b Total acreage restricted by conservation easements, c Number of conservation easements on a certified historic structure included on line 2a, d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register; 3 Number of conservation easements modified, transferred, released, extinguished, or terminated 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, handling of violations, and enforcement of the conservation easements it holds? (Yes/No); 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year; 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year; 8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? (Yes/No); 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.; 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1; (ii) Assets included in Form 990, Part X; 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1; b Assets included in Form 990, Part X

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table.
- | | Amount |
|--|-----------------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

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

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment %
 - b** Permanent endowment %
 - c** Term endowment %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- (i)** Unrelated organizations? Yes No
 - (ii)** Related organizations? Yes No
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		35,042		35,042
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		474,605	437,850	36,755
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				71,797

Part VII Investments – Other Securities

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

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

Part VIII Investments – Program Related

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

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

Part IX Other Assets

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

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

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) NOTES PAYABLE	53,334
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	53,334

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

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

1	Total revenue, gains, and other support per audited financial statements			1	1,796,343
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
	a Net unrealized gains (losses) on investments	2a			
	b Donated services and use of facilities	2b			
	c Recoveries of prior year grants	2c			
	d Other (Describe in Part XIII.)	2d			
	e Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	1,796,343
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	b Other (Describe in Part XIII.)	4b			
	c Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			5	1,796,343

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

1	Total expenses and losses per audited financial statements			1	1,878,084
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
	a Donated services and use of facilities	2a			
	b Prior year adjustments	2b			
	c Other losses	2c			
	d Other (Describe in Part XIII.)	2d			
	e Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	1,878,084
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	b Other (Describe in Part XIII.)	4b			
	c Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			5	1,878,084

Part XIII Supplemental Information

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

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**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

WORLDWIDE DISCIPLESHIP ASSOCIATION

Employer identification number

58-1211155

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can 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
CENTRAL AFRICA					
(1)		2	PROGRAM SERVICE	MISSIONS	12,443
SOUTHEAST ASIA					
(2)		7	PROGRAM SERVICE	MISSIONS	11,091
SOUTHEASTERN AFRICA					
(3)		1	PROGRAM SERVICE	MISSIONS	946
WEST AFRICA					
(4)		2	PROGRAM SERVICE	MISSIONS	17,843
SOUTH AMERICA					
(5)		1	PROGRAM SERVICE	MISSIONS	8,635
SOUTH ASIA					
(6)		2	PROGRAM SERVICE	MISSIONS	25,523
NORTH AMERICA					
(7)			PROGRAM SERVICE	MISSIONS	
EUROPE					
(8)			PROGRAM SERVICE	MISSIONS	9,096
NORTHERN EUROPE					
(9)			PROGRAM SERVICE	MISSIONS	
EASTERN EUROPE					
(10)			PROGRAM SERVICE	MISSIONS	
EAST AFRICA					
(11)		8	PROGRAM SERVICE	MISSIONS	82,509
SOUTHERN AFRICA					
(12)		5	PROGRAM SERVICE	MISSIONS	34,201
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal		28			202,287
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)		28			202,287

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2023

Part II 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.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Part III 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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 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 the 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 the 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 the Instructions for Form 5471)* Yes 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 the 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 the 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 the Instructions for Form 5713; don't file with Form 990)* Yes No

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.

PART I, LINE 3 - ACTIVITIES PER REGION

REGION	EXPENDITURES	INVESTMENTS
CENTRAL AFRICA	\$ 12,443	\$ 0
SOUTHEAST ASIA	\$ 11,091	\$ 0
SOUTHEASTERN AFRICA	\$ 946	\$ 0
WEST AFRICA	\$ 17,843	\$ 0
SOUTH AMERICA	\$ 8,635	\$ 0
SOUTH ASIA	\$ 25,523	\$ 0
NORTH AMERICA	\$ 0	\$ 0
EUROPE	\$ 9,096	\$ 0
NORTHERN EUROPE	\$ 0	\$ 0
EASTERN EUROPE	\$ 0	\$ 0
EAST AFRICA	\$ 82,509	\$ 0
SOUTHERN AFRICA	\$ 34,201	\$ 0

PART V - ADDITIONAL INFORMATION

EXPENDITURES ARE ACCOUNTED FOR USING THE ACCRUAL METHOD OF ACCOUNTING

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2023

**Open To Public
Inspection**

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

WORLDWIDE DISCIPLESHIP ASSOCIATION

58-1211155

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded				
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()	X	1	72,879	
26 Other ()				
27 Other ()				
28 Other ()				

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

29	
-----------	--

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X
31		X
32a		X

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

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

2023

**Open to Public
Inspection**

WORLDWIDE DISCIPLESHIP ASSOCIATION

Employer identification number
58-1211155

FORM 990 - ORGANIZATION'S MISSION

WORLDWIDE DISCIPLESHIP ASSOCIATION, INC IS AT THE FOREFRONT OF PROVIDING
RESOURCES, TRAINING, COACHING, CONSULTING AND A PROVEN PROCESS THAT
DELIVERS CHRISTIAN MATURITY. FOR OVER 40 YEARS, IN MORE THAN 55 COUNTRIES
89 U.S. CITIES AND 8 COLLEGE CAMPUSES WDA HAS BEEN FOCUSED ON ONE THING:
DEVELOPING CHRIST-LIKE CHARACTER IN PEOPLE AND EQUIPPING THEM TO DISCIPLE
OTHERS.

**FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS
GOVERNING BOARD CAN ELECT MORE MEMBERS**

**FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
BUSINESS MANAGER REVIEWS THE FORM 990**

**FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
WRITTEN IN POLICY AND PROCEDURES MANUAL AND GOVERNING BOARD FOLLOWS THE
MANUAL**

**FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
AVAILABLE UPON REQUEST**

**FORM 990, PART VII - ADDITIONAL INFORMATION
OFFICERS OF THE ORGANIZATION WORK A MINIMUM OF 40 HOURS PER WEEK AND ARE
PAID A COMPENSATION THAT INCLUDES W2 WAGES AND HOUSING ALLOWANCES.**

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury Internal Revenue Service

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment Sequence No. 179

Name(s) shown on return

Identifying number

WORLDWIDE DISCIPLESHIP ASSOCIATION

58-1211155

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

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

Table with 5 columns: Line number, Description, Column (b) Cost, Column (c) Elected cost, and Amount. Includes rows for maximum amount, total cost, threshold cost, reduction in limitation, and dollar limitation.

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

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

Table with 3 columns: Line number, Description, and Amount. Includes rows for special depreciation allowance, property subject to section 168(f)(1) election, and other depreciation.

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

Section A

Table with 3 columns: Line number, Description, and Amount. Includes rows for MACRS deductions for assets placed in service in tax years beginning before 2023.

Section B—Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Includes rows for 3-year through 25-year property and residential/nonresidential real property.

Section C—Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

Table with 7 columns: (a) Class life, (b) 12-year, (c) 30-year, (d) 40-year, (e) 12 yrs., (f) 30 yrs., (g) 40 yrs., (h) MM, (i) S/L. Includes rows for class life and alternative depreciation system options.

Part IV Summary (See instructions.)

Table with 3 columns: Line number, Description, and Amount. Includes rows for listed property, total depreciation, and portion of basis attributable to section 263A costs.

For Paperwork Reduction Act Notice, see separate instructions.

58-1211155

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Other Depreciation:										
1	BUILDING - 110 CARNEGIE PLACE	2/16/89	314,975			314,975	31	MO S/L	314,975	0
2	TABLE - CONFERENCE ROOM - BASEM	11/18/74	237			237	7	MO S/L	237	0
3	CHAIRS-CONFERENCE ROOM - BASEM	11/18/74	361			361	7	MO S/L	361	0
6	DESK - LINDA DUKES OFFICE	12/15/75	70			70	7	MO S/L	70	0
7	TYPEWRITER - PAT KUEHN'S OFFICE	4/26/76	801			801	5	MO S/L	801	0
9	WDA DISPLAY	10/31/79	398			398	7	MO S/L	398	0
10	CONFERENCE CHAIR - KEN HEWETTS	12/31/79	126			126	7	MO S/L	126	0
11	HAND TRUCKS	2/19/80	51			51	5	MO S/L	51	0
12	BLACK CONFERENCE ROOM CHAIRS	7/29/80	252			252	7	MO S/L	252	0
13	DESK - BOB'S HOME OFFICE - BASEMI	8/22/80	250			250	7	MO S/L	250	0
14	CHAIRS - BOB'S HOME OFFICE - BASE	8/22/80	70			70	7	MO S/L	70	0
15	LAMP - BOB'S HOME OFFICE	8/22/80	30			30	7	MO S/L	30	0
16	BOOKCASE - BOB'S HOME OFFICE	8/22/80	25			25	7	MO S/L	25	0
17	FILE CABINET - BOB'S HOME OFFICE	8/22/80	75			75	7	MO S/L	75	0
18	DESK - ACCOUNTANTS OFFICE	6/11/81	100			100	7	MO S/L	100	0
20	DESK - BETTY HEWETTS OFFICE	6/11/81	40			40	7	MO S/L	40	0
21	CREDENZA - ACCOUNTANTS OFFICE	6/11/81	75			75	7	MO S/L	75	0
23	DESK - KEN HEWETTS OFFICE	12/08/81	100			100	7	MO S/L	100	0
24	FILE CABINET (5 DRAWER) - FILE ROC	12/08/81	50			50	7	MO S/L	50	0
25	SIDE CHAIR - BLACK W/ SILVER MET,	12/08/81	25			25	7	MO S/L	25	0
26	SIDE CHAIR - ACCOUNTANTS OFFICE	12/08/81	25			25	7	MO S/L	25	0
28	FILE CABINET (4 DRAWER) - FILE ROC	12/08/81	75			75	7	MO S/L	75	0
30	FILE CABINET (4 DRAWER) - ACCOUN	12/08/81	75			75	7	MO S/L	75	0
32	FOLDING TABLE (6 FT) - CONFERENCI	12/08/81	50			50	7	MO S/L	50	0
33	DESK - PAT KUEHN'S OFFICE	11/07/83	100			100	7	MO S/L	100	0
34	CHAIR - FRONT OFFICE	11/07/83	50			50	7	MO S/L	50	0
35	CHAIR - DAVID MIDDLETON'S OFFICE	5/08/84	24			24	7	MO S/L	24	0
36	CHAIR - BLK W/ SILVER TRIM - BREA	3/28/84	79			79	7	MO S/L	79	0
37	CHAIR -BLK W/ SILVER TRIM - JOHN I	3/28/84	79			79	7	MO S/L	79	0
38	DISPLAY CASE - FILE ROOM	10/09/86	198			198	7	MO S/L	198	0
39	CREDENZA - KEN HEWETTS OFFICE	10/01/87	150			150	7	MO S/L	150	0
40	DESK - BOB DUKES OFFICE	10/01/87	200			200	7	MO S/L	200	0
41	FILE CABINET (4 DRAWER) - ARCHIVE	10/01/87	100			100	7	MO S/L	100	0
42	CREDENZA - FRONT OFFICE	10/01/87	150			150	7	MO S/L	150	0
43	DESK - DOWNSTAIRS SUITE 300	10/01/87	200			200	7	MO S/L	200	0
44	DEST - FRONT OFFICE	10/01/87	200			200	7	MO S/L	200	0
45	FILE CABINET (5 DRAWER) - OVERSE	10/01/87	100			100	7	MO S/L	100	0
46	FILE CABINET (5 DRAWER) - KEN HEV	10/01/87	100			100	7	MO S/L	100	0
47	CREDENZA - KEN HEWETTS OFFICE	10/01/87	150			150	7	MO S/L	150	0
48	FILE CABINET (2 DRAWER)	10/01/87	100			100	7	MO S/L	100	0
49	DESK - BASEMENT CONFERENCE ROC	10/01/87	200			200	7	MO S/L	200	0
52	CHAIR - KEN HEWETTS OFFICE	2/01/92	105			105	7	MO S/L	105	0
53	REFRIGERATOR - BASEMENT BREAK	5/25/93	250			250	7	MO S/L	250	0
54	SOFTWARE - 4TH DIMENSION	7/06/93	195			195	3	MO S/L	195	0
55	CHAIR - SHIRLEY GIBSON'S OFFICE	1/25/94	104			104	7	MO S/L	104	0
56	CHAIR - BOB DUKES OFFICE	4/20/94	105			105	7	MO S/L	105	0
58	COMPUTER DESK - KEN HEWETTS OF	3/14/95	130			130	7	MO S/L	130	0
59	FAX/PHONE SWITCH BOX	10/31/96	126			126	15	MO S/L	126	0
60	CHAIR - JOHN LEE'S OFFICE	4/14/97	112			112	7	MO S/L	112	0
61	CREDENZA - FOYER	5/19/97	138			138	7	MO S/L	138	0
65	LCD VIDEO PROJECTOR - BOB DUKES	12/18/97	3,900			3,900	5	MO S/L	3,900	0
66	REFRIGERATOR - KITCHEN	8/27/98	626			626	7	MO S/L	626	0
71	IMPROVEMENTS - BASEMENT DOOR	12/10/98	1,200			1,200	15	MO S/L	1,200	0
72	IMPROVEMENTS - SECURITY SYSTEM	12/31/98	2,735			2,735	15	MO S/L	2,735	0
74	AC UNIT - FRONT-RIGHT UNIT	4/13/99	1,430			1,430	15	MO S/L	1,430	0
80	AC UNIT - BACK OF SUITE 100	8/31/00	1,953			1,953	15	MO S/L	1,953	0
81	AIR COMPRESSOR	1/31/01	500			500	5	MO S/L	500	0
82	AIR HOSES FOR COMPRESSOR	1/31/01	200			200	5	MO S/L	200	0
83	TABLE SAW	1/31/01	200			200	5	MO S/L	200	0
84	BENCH VISE	1/31/01	60			60	5	MO S/L	60	0
85	DRILL PRESS	1/31/01	280			280	5	MO S/L	280	0
86	WORK LIGHTS	1/31/01	50			50	5	MO S/L	50	0
87	CIRCULAR SAW	1/31/01	50			50	5	MO S/L	50	0
88	AIRLESS PAINT SPRAYER	1/31/01	500			500	5	MO S/L	500	0
89	NAIL GUN	1/31/01	146			146	5	MO S/L	146	0
91	FURNACE - SUITE 210	10/23/01	1,520			1,520	10	MO S/L	1,520	0
92	COMPUTER PROJECTOR	9/25/02	2,323			2,323	5	MO S/L	2,323	0
97	CARPET - SUITE 100	7/23/03	7,255			7,255	7	MO S/L	7,255	0

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
98	PAINTING - DOWNSTAIRS	9/03/03	3,700				3,700	7 MO S/L	3,700	0
100	GUTTERS	3/11/04	709				709	10 MO S/L	709	0
104	AC UNIT - SUITE 200	5/06/05	1,450				1,450	10 MO S/L	1,450	0
107	CAMCORDER	5/31/06	659				659	5 MO S/L	659	0
112	VINYL SIDING/SOFFIT/WINDOWS	2/02/00	13,816				13,816	15 MO S/L	13,816	0
113	PORCH/RAILINGS/STEPS	4/14/00	3,168				3,168	15 MO S/L	3,168	0
114	FURNACE & AC UNIT - SUITE 300	12/01/05	3,280				3,280	7 MO S/L	3,280	0
115	CARPET - CONFERENCE ROOM	5/18/06	1,114				1,114	7 MO S/L	1,114	0
116	DESK - LINDA DUKES HOME OFFICE	2/13/07	582				582	7 MO S/L	582	0
117	LCD PROJECTOR	7/01/07	915				915	5 MO S/L	915	0
118	SEPTIC TANK/CARPET	1/16/08	4,596				4,596	7 MO S/L	4,596	0
119	SOUND EQUIPMENT	12/31/07	3,350				3,350	5 MO S/L	3,350	0
122	CACAMERA - CANON EOS REBEL	7/25/09	800				800	5 MO S/L	800	0
125	IMAC - PAT'S OFFICE	8/31/09	1,229				1,229	5 MO S/L	1,229	0
129	COMPUTER - MACBOOK, WHITE	1/05/10	1,523				1,523	5 MO S/L	1,523	0
132	COMPUTER - KENYA	5/02/11	530				530	3 MO S/L	530	0
135	MACBOOK PRO - DAVID PARFITT	3/04/11	1,621				1,621	5 MO S/L	1,621	0
136	FURNITURE - STONE MTN HOUSE	12/31/11	1,700				1,700	5 MO S/L	1,700	0
137	AC UNIT	5/04/12	1,766				1,766	7 MO S/L	1,766	0
138	TRIMMER	5/24/12	690				690	5 MO S/L	690	-0
139	MACBOOK PRO - BUDDY	8/08/12	1,358				1,358	5 MO S/L	1,358	0
142	NEW ROOF - FRONT HALF	9/06/12	4,585				4,585	15 MO S/L	3,362	306
143	PROJECTOR - BOARD ROOM	3/10/14	1,299				1,299	5 MO S/L	1,299	0
144	TV - BOB'S OFFICE	3/10/14	658				658	5 MO S/L	658	0
145	MACBOOK PRO - TOM	3/09/15	1,000				1,000	5 MO S/L	1,000	0
146	AC UNIT	6/23/15	2,500				2,500	7 MO S/L	2,500	0
147	LAND - 110 CARNEGIE PLACE	2/16/89	35,042				35,042	0 -- Land	0	0
149	MACBOOK PRO (2)	1/20/16	2,086				2,086	5 MO S/L	2,086	0
150	MACBOOK PRO	8/20/15	953				953	5 MO S/L	953	0
151	MACBOOK PRO	9/09/15	869				869	5 MO S/L	869	0
152	FURNACE	10/05/15	2,166				2,166	7 MO S/L	2,166	0
153	LIBRARY REMODEL	9/16/16	8,298				8,298	15 MO S/L	3,734	553
155	FLOORING FOR BASEMENT	5/22/19	3,197				3,197	15 MO S/L	870	213
156	GLASS BOARDS	5/31/19	1,795				1,795	7 MO S/L	1,047	257
157	COMPUTER-ACCOUNTANT	12/13/18	511				511	5 MO S/L	468	43
158	COMPUTER-BOB DUKES	6/01/19	2,445				2,445	5 MO S/L	1,997	448
159	WOODEN CONFERENCE TABLE-A BE1	9/12/19	3,000				3,000	7 MO S/L	1,643	428
160	BASEMENT FLOOR	8/14/19	2,155				2,155	15 MO S/L	563	143
161	MACBOOK PRO - HARKNESS	12/09/19	1,299				1,299	3 MO S/L	1,299	0
162	MACBOOK PRO - BOB DUKES	6/15/20	2,026				2,026	3 MO S/L	2,026	0
163	MACBOOK PRO-13.3IN-LARSON	5/07/20	963				963	3 MO S/L	963	0
164	WATER HEATER	2/05/21	1,210				1,210	7 MO S/L	418	173
165	KITCHEN/BATH REMODEL	2/11/21	4,547				4,547	15 MO S/L	733	303
166	LIBRARY REMODEL	2/22/21	3,490				3,490	15 MO S/L	543	233
167	PRINTING EQUIPMENT	5/05/21	4,000				4,000	5 MO S/L	1,733	800
168	2020 IPAD PRO 12.9 INCH (BOB)	6/17/21	1,550				1,550	5 MO S/L	620	310
169	MACBOOK AIR - TOM	12/13/21	1,315				1,315	3 MO S/L	694	438
170	BUILDING SIGNAGE	2/28/22	2,568				2,568	10 MO S/L	342	257
171	DOWNSTAIRS REMODEL	2/01/23	12,812				12,812	15 MO S/L	356	854
172	PANINI SCANNER (DIRECT DEPOSITS)	3/02/23	650				650	3 MO S/L	72	217
173	ASUS VIVOBOK-JORDAN	5/04/23	962				962	3 MO S/L	53	321
174	MACBOOK-DAVID PARFITT	5/09/23	2,130				2,130	3 MO S/L	118	710
175	CANON EOS R8 CAMERA	6/01/23	1,499				1,499	5 MO S/L	25	300
176	MacBook Air 2022	2/02/24	802				802	5 MO S/L	0	67
Total Other Depreciation			<u>509,647</u>				<u>509,647</u>		<u>430,475</u>	<u>7,374</u>
Total ACRS and Other Depreciation			<u>509,647</u>				<u>509,647</u>		<u>430,475</u>	<u>7,374</u>
Grand Totals			509,647				509,647		430,475	7,374
Less: Dispositions and Transfers			0				0		0	0
Less: Start-up/Org Expense			0				0		0	0
Net Grand Totals			<u>509,647</u>				<u>509,647</u>		<u>430,475</u>	<u>7,374</u>

58-1211155

AMT Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Other Depreciation:											
1	BUILDING - 110 CARNEGIE PLACE	2/16/89	0				0	0	HY	0	0
2	TABLE - CONFERENCE ROOM - BASEM	11/18/74	0				0	0	HY	0	0
3	CHAIRS-CONFERENCE ROOM - BASEM	11/18/74	0				0	0	HY	0	0
6	DESK - LINDA DUKES OFFICE	12/15/75	0				0	0	HY	0	0
7	TYPEWRITER - PAT KUEHN'S OFFICE	4/26/76	0				0	0	HY	0	0
9	WDA DISPLAY	10/31/79	0				0	0	HY	0	0
10	CONFERENCE CHAIR - KEN HEWETTS	12/31/79	0				0	0	HY	0	0
11	HAND TRUCKS	2/19/80	0				0	0	HY	0	0
12	BLACK CONFERENCE ROOM CHAIRS	7/29/80	0				0	0	HY	0	0
13	DESK - BOB'S HOME OFFICE - BASEM	8/22/80	0				0	0	HY	0	0
14	CHAIRS - BOB'S HOME OFFICE - BASE	8/22/80	0				0	0	HY	0	0
15	LAMP - BOB'S HOME OFFICE	8/22/80	0				0	0	HY	0	0
16	BOOKCASE - BOB'S HOME OFFICE	8/22/80	0				0	0	HY	0	0
17	FILE CABINET - BOB'S HOME OFFICE	8/22/80	0				0	0	HY	0	0
18	DESK - ACCOUNTANTS OFFICE	6/11/81	0				0	0	HY	0	0
20	DESK - BETTY HEWETTS OFFICE	6/11/81	0				0	0	HY	0	0
21	CREDENZA - ACCOUNTANTS OFFICE	6/11/81	0				0	0	HY	0	0
23	DESK - KEN HEWETTS OFFICE	12/08/81	0				0	0	HY	0	0
24	FILE CABINET (5 DRAWER) - FILE ROC	12/08/81	0				0	0	HY	0	0
25	SIDE CHAIR - BLACK W/ SILVER MET.	12/08/81	0				0	0	HY	0	0
26	SIDE CHAIR - ACCOUNTANTS OFFICE	12/08/81	0				0	0	HY	0	0
28	FILE CABINET (4 DRAWER) - FILE ROC	12/08/81	0				0	0	HY	0	0
30	FILE CABINET (4 DRAWER) - ACCOUN	12/08/81	0				0	0	HY	0	0
32	FOLDING TABLE (6 FT) - CONFERENC	12/08/81	0				0	0	HY	0	0
33	DESK - PAT KUEHN'S OFFICE	11/07/83	0				0	0	HY	0	0
34	CHAIR - FRONT OFFICE	11/07/83	0				0	0	HY	0	0
35	CHAIR - DAVID MIDDLETON'S OFFICE	5/08/84	0				0	0	HY	0	0
36	CHAIR - BLK W/ SILVER TRIM - BREA	3/28/84	0				0	0	HY	0	0
37	CHAIR -BLK W/ SILVER TRIM - JOHN I	3/28/84	0				0	0	HY	0	0
38	DISPLAY CASE - FILE ROOM	10/09/86	0				0	0	HY	0	0
39	CREDENZA - KEN HEWETTS OFFICE	10/01/87	0				0	0	HY	0	0
40	DESK - BOB DUKES OFFICE	10/01/87	0				0	0	HY	0	0
41	FILE CABINET (4 DRAWER) - ARCHIVI	10/01/87	0				0	0	HY	0	0
42	CREDENZA - FRONT OFFICE	10/01/87	0				0	0	HY	0	0
43	DESK - DOWNSTAIRS SUITE 300	10/01/87	0				0	0	HY	0	0
44	DESK - FRONT OFFICE	10/01/87	0				0	0	HY	0	0
45	FILE CABINET (5 DRAWER) - OVERSE	10/01/87	0				0	0	HY	0	0
46	FILE CABINET (5 DRAWER) - KEN HEV	10/01/87	0				0	0	HY	0	0
47	CREDENZA - KEN HEWETTS OFFICE	10/01/87	0				0	0	HY	0	0
48	FILE CABINET (2 DRAWER)	10/01/87	0				0	0	HY	0	0
49	DESK - BASEMENT CONFERENCE ROC	10/01/87	0				0	0	HY	0	0
52	CHAIR - KEN HEWETTS OFFICE	2/01/92	0				0	0	HY	0	0
53	REFRIGERATOR - BASEMENT BREAK	5/25/93	0				0	0	HY	0	0
54	SOFTWARE - 4TH DIMENSION	7/06/93	0				0	0	HY	0	0
55	CHAIR - SHIRLEY GIBSON'S OFFICE	1/25/94	0				0	0	HY	0	0
56	CHAIR - BOB DUKES OFFICE	4/20/94	0				0	0	HY	0	0
58	COMPUTER DESK - KEN HEWETTS OF	3/14/95	0				0	0	HY	0	0
59	FAX/PHONE SWITCH BOX	10/31/96	0				0	0	HY	0	0
60	CHAIR - JOHN LEE'S OFFICE	4/14/97	0				0	0	HY	0	0
61	CREDENZA - FOYER	5/19/97	0				0	0	HY	0	0
65	LCD VIDEO PROJECTOR - BOB DUKES	12/18/97	0				0	0	HY	0	0
66	REFRIGERATOR - KITCHEN	8/27/98	0				0	0	HY	0	0
71	IMPROVEMENTS - BASEMENT DOOR	12/10/98	0				0	0	HY	0	0
72	IMPROVEMENTS - SECURITY SYSTEM	12/31/98	0				0	0	HY	0	0
74	AC UNIT - FRONT-RIGHT UNIT	4/13/99	0				0	0	HY	0	0
80	AC UNIT - BACK OF SUITE 100	8/31/00	0				0	0	HY	0	0
81	AIR COMPRESSOR	1/31/01	0				0	0	HY	0	0
82	AIR HOSES FOR COMPRESSOR	1/31/01	0				0	0	HY	0	0
83	TABLE SAW	1/31/01	0				0	0	HY	0	0
84	BENCH VISE	1/31/01	0				0	0	HY	0	0
85	DRILL PRESS	1/31/01	0				0	0	HY	0	0
86	WORK LIGHTS	1/31/01	0				0	0	HY	0	0
87	CIRCULAR SAW	1/31/01	0				0	0	HY	0	0
88	AIRLESS PAINT SPRAYER	1/31/01	0				0	0	HY	0	0
89	NAIL GUN	1/31/01	0				0	0	HY	0	0
91	FURNACE - SUITE 210	10/23/01	0				0	0	HY	0	0
92	COMPUTER PROJECTOR	9/25/02	0				0	0	HY	0	0
97	CARPET - SUITE 100	7/23/03	0				0	0	HY	0	0

AMT Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179B	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
98	PAINTING - DOWNSTAIRS	9/03/03	0				0	0	HY	0	0
100	GUTTERS	3/11/04	0				0	0	HY	0	0
104	AC UNIT - SUITE 200	5/06/05	0				0	0	HY	0	0
107	CAMCORDER	5/31/06	0				0	0	HY	0	0
112	VINYL SIDING/SOFFIT/WINDOWS	2/02/00	0				0	0	HY	0	0
113	PORCH/RAILINGS/STEPS	4/14/00	0				0	0	HY	0	0
114	FURNACE & AC UNIT - SUITE 300	12/01/05	0				0	0	HY	0	0
115	CARPET - CONFERENCE ROOM	5/18/06	0				0	0	HY	0	0
116	DESK - LINDA DUKES HOME OFFICE	2/13/07	0				0	0	HY	0	0
117	LCD PROJECTOR	7/01/07	0				0	0	HY	0	0
118	SEPTIC TANK/CARPET	1/16/08	0				0	0	HY	0	0
119	SOUND EQUIPMENT	12/31/07	0				0	0	HY	0	0
122	CACAMERA - CANON EOS REBEL	7/25/09	0				0	0	HY	0	0
125	IMAC - PAT'S OFFICE	8/31/09	0				0	0	HY	0	0
129	COMPUTER - MACBOOK, WHITE	1/05/10	0				0	0	HY	0	0
132	COMPUTER - KENYA	5/02/11	0				0	0	HY	0	0
135	MACBOOK PRO - DAVID PARFITT	3/04/11	0				0	0	HY	0	0
136	FURNITURE - STONE MTN HOUSE	12/31/11	0				0	0	HY	0	0
137	AC UNIT	5/04/12	0				0	0	HY	0	0
138	TRIMMER	5/24/12	0				0	0	HY	0	0
139	MACBOOK PRO - BUDDY	8/08/12	0				0	0	HY	0	0
142	NEW ROOF - FRONT HALF	9/06/12	0				0	0	HY	0	0
143	PROJECTOR - BOARD ROOM	3/10/14	0				0	0	HY	0	0
144	TV - BOB'S OFFICE	3/10/14	0				0	0	HY	0	0
145	MACBOOK PRO - TOM	3/09/15	0				0	0	HY	0	0
146	AC UNIT	6/23/15	0				0	0	HY	0	0
147	LAND - 110 CARNEGIE PLACE	2/16/89	0				0	0	HY	0	0
149	MACBOOK PRO (2)	1/20/16	0				0	0	HY	0	0
150	MACBOOK PRO	8/20/15	0				0	0	HY	0	0
151	MACBOOK PRO	9/09/15	0				0	0	HY	0	0
152	FURNACE	10/05/15	0				0	0	HY	0	0
153	LIBRARY REMODEL	9/16/16	0				0	0	HY	0	0
155	FLOORING FOR BASEMENT	5/22/19	0				0	0	HY	0	0
156	GLASS BOARDS	5/31/19	0				0	0	HY	0	0
157	COMPUTER-ACCOUNTANT	12/13/18	0				0	0	HY	0	0
158	COMPUTER-BOB DUKES	6/01/19	0				0	0	HY	0	0
159	WOODEN CONFERENCE TABLE-A BEJ	9/12/19	0				0	0	HY	0	0
160	BASEMENT FLOOR	8/14/19	0				0	0	HY	0	0
161	MACBOOK PRO - HARKNESS	12/09/19	0				0	0	HY	0	0
162	MACBOOK PRO - BOB DUKES	6/15/20	0				0	0	HY	0	0
163	MACBOOK PRO-13.3IN-LARSON	5/07/20	0				0	0	HY	0	0
164	WATER HEATER	2/05/21	0				0	0	HY	0	0
165	KITCHEN/BATH REMODEL	2/11/21	0				0	0	HY	0	0
166	LIBRARY REMODEL	2/22/21	0				0	0	HY	0	0
167	PRINTING EQUIPMENT	5/05/21	0				0	0	HY	0	0
168	2020 IPAD PRO 12.9 INCH (BOB)	6/17/21	0				0	0	HY	0	0
169	MACBOOK AIR - TOM	12/13/21	0				0	0	HY	0	0
170	BUILDING SIGNAGE	2/28/22	0				0	0	HY	0	0
171	DOWNSTAIRS REMODEL	2/01/23	0				0	0	HY	0	0
172	PANINI SCANNER (DIRECT DEPOSITS)	3/02/23	0				0	0	HY	0	0
173	ASUS VIVOBOOK-JORDAN	5/04/23	0				0	0	HY	0	0
174	MACBOOK-DAVID PARFITT	5/09/23	0				0	0	HY	0	0
175	CANON EOS R8 CAMERA	6/01/23	0				0	0	HY	0	0
176	MacBook Air 2022	2/02/24	0				0	0	HY	0	0
	Total Other Depreciation		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Grand Totals		0				0			0	0
	Less: Dispositions and Transfers		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Net Grand Totals		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>

Depreciation Adjustment Report

All Business Activities

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

58-1211155

Future Depreciation Report FYE: 6/30/25

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
1	BUILDING - 110 CARNEGIE PLACE	2/16/89	314,975	0	0
2	TABLE - CONFERENCE ROOM - BASEMENT	11/18/74	237	0	0
3	CHAIRS-CONFERENCE ROOM - BASEMENT	11/18/74	361	0	0
6	DESK - LINDA DUKES OFFICE	12/15/75	70	0	0
7	TYPEWRITER - PAT KUEHN'S OFFICE	4/26/76	801	0	0
9	WDA DISPLAY	10/31/79	398	0	0
10	CONFERENCE CHAIR - KEN HEWETTS OFFICE	12/31/79	126	0	0
11	HAND TRUCKS	2/19/80	51	0	0
12	BLACK CONFERENCE ROOM CHAIRS (2) -	7/29/80	252	0	0
13	DESK - BOB'S HOME OFFICE - BASEMENT	8/22/80	250	0	0
14	CHAIRS - BOB'S HOME OFFICE - BASEMENT	8/22/80	70	0	0
15	LAMP - BOB'S HOME OFFICE	8/22/80	30	0	0
16	BOOKCASE - BOB'S HOME OFFICE	8/22/80	25	0	0
17	FILE CABINET - BOB'S HOME OFFICE	8/22/80	75	0	0
18	DESK - ACCOUNTANTS OFFICE	6/11/81	100	0	0
20	DESK - BETTY HEWETTS OFFICE	6/11/81	40	0	0
21	CREDENZA - ACCOUNTANTS OFFICE	6/11/81	75	0	0
23	DESK - KEN HEWETTS OFFICE	12/08/81	100	0	0
24	FILE CABINET (5 DRAWER) - FILE ROOM	12/08/81	50	0	0
25	SIDE CHAIR - BLACK W/ SILVER METAL	12/08/81	25	0	0
26	SIDE CHAIR - ACCOUNTANTS OFFICE	12/08/81	25	0	0
28	FILE CABINET (4 DRAWER) - FILE ROOM	12/08/81	75	0	0
30	FILE CABINET (4 DRAWER) - ACCOUNTANTS OFFICE	12/08/81	75	0	0
32	FOLDING TABLE (6 FT) - CONFERENCE ROOM	12/08/81	50	0	0
33	DESK - PAT KUEHN'S OFFICE	11/07/83	100	0	0
34	CHAIR - FRONT OFFICE	11/07/83	50	0	0
35	CHAIR - DAVID MIDDLETON'S OFFICE	5/08/84	24	0	0
36	CHAIR - BLK W/ SILVER TRIM - BREAK ROOM	3/28/84	79	0	0
37	CHAIR - BLK W/ SILVER TRIM - JOHN LEE'S OFFICE	3/28/84	79	0	0
38	DISPLAY CASE - FILE ROOM	10/09/86	198	0	0
39	CREDENZA - KEN HEWETTS OFFICE	10/01/87	150	0	0
40	DESK - BOB DUKES OFFICE	10/01/87	200	0	0
41	FILE CABINET (4 DRAWER) - ARCHIVES	10/01/87	100	0	0
42	CREDENZA - FRONT OFFICE	10/01/87	150	0	0
43	DESK - DOWNSTAIRS SUITE 300	10/01/87	200	0	0
44	DESK - FRONT OFFICE	10/01/87	200	0	0
45	FILE CABINET (5 DRAWER) - OVERSEAS	10/01/87	100	0	0
46	FILE CABINET (5 DRAWER) - KEN HEWETTS OFFICE	10/01/87	100	0	0
47	CREDENZA - KEN HEWETTS OFFICE	10/01/87	150	0	0
48	FILE CABINET (2 DRAWER)	10/01/87	100	0	0
49	DESK - BASEMENT CONFERENCE ROOM	10/01/87	200	0	0
52	CHAIR - KEN HEWETTS OFFICE	2/01/92	105	0	0
53	REFRIGERATOR - BASEMENT BREAK ROOM	5/25/93	250	0	0
54	SOFTWARE - 4TH DIMENSION	7/06/93	195	0	0
55	CHAIR - SHIRLEY GIBSON'S OFFICE	1/25/94	104	0	0
56	CHAIR - BOB DUKES OFFICE	4/20/94	105	0	0
58	COMPUTER DESK - KEN HEWETTS OFFICE	3/14/95	130	0	0
59	FAX/PHONE SWITCH BOX	10/31/96	126	0	0
60	CHAIR - JOHN LEE'S OFFICE	4/14/97	112	0	0
61	CREDENZA - FOYER	5/19/97	138	0	0
65	LCD VIDEO PROJECTOR - BOB DUKES OFFICE	12/18/97	3,900	0	0
66	REFRIGERATOR - KITCHEN	8/27/98	626	0	0
71	IMPROVEMENTS - BASEMENT DOOR	12/10/98	1,200	0	0
72	IMPROVEMENTS - SECURITY SYSTEM	12/31/98	2,735	0	0
74	AC UNIT - FRONT-RIGHT UNIT	4/13/99	1,430	0	0
80	AC UNIT - BACK OF SUITE 100	8/31/00	1,953	0	0
81	AIR COMPRESSOR	1/31/01	500	0	0
82	AIR HOSES FOR COMPRESSOR	1/31/01	200	0	0
83	TABLE SAW	1/31/01	200	0	0
84	BENCH VISE	1/31/01	60	0	0
85	DRILL PRESS	1/31/01	280	0	0
86	WORK LIGHTS	1/31/01	50	0	0
87	CIRCULAR SAW	1/31/01	50	0	0
88	AIRLESS PAINT SPRAYER	1/31/01	500	0	0
89	NAIL GUN	1/31/01	146	0	0
91	FURNACE - SUITE 210	10/23/01	1,520	0	0
92	COMPUTER PROJECTOR	9/25/02	2,323	0	0

Future Depreciation Report

FYE: 6/30/25

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
97	CARPET - SUITE 100	7/23/03	7,255	0	0
98	PAINTING - DOWNSTAIRS	9/03/03	3,700	0	0
100	GUTTERS	3/11/04	709	0	0
104	AC UNIT - SUITE 200	5/06/05	1,450	0	0
107	CAMCORDER	5/31/06	659	0	0
112	VINYL SIDING/SOFFIT/WINDOWS	2/02/00	13,816	0	0
113	PORCH/RAILINGS/STEPS	4/14/00	3,168	0	0
114	FURNACE & AC UNIT - SUITE 300	12/01/05	3,280	0	0
115	CARPET - CONFERENCE ROOM	5/18/06	1,114	0	0
116	DESK - LINDA DUKES HOME OFFICE	2/13/07	582	0	0
117	LCD PROJECTOR	7/01/07	915	0	0
118	SEPTIC TANK/CARPET	1/16/08	4,596	0	0
119	SOUND EQUIPMENT	12/31/07	3,350	0	0
122	CACAMERA - CANON EOS REBEL	7/25/09	800	0	0
125	IMAC - PAT'S OFFICE	8/31/09	1,229	0	0
129	COMPUTER - MACBOOK, WHITE	1/05/10	1,523	0	0
132	COMPUTER - KENYA	5/02/11	530	0	0
135	MACBOOK PRO - DAVID PARFITT	3/04/11	1,621	0	0
136	FURNITURE - STONE MTN HOUSE	12/31/11	1,700	0	0
137	AC UNIT	5/04/12	1,766	0	0
138	TRIMMER	5/24/12	690	0	0
139	MACBOOK PRO - BUDDY	8/08/12	1,358	0	0
142	NEW ROOF - FRONT HALF	9/06/12	4,585	306	0
143	PROJECTOR - BOARD ROOM	3/10/14	1,299	0	0
144	TV - BOB'S OFFICE	3/10/14	658	0	0
145	MACBOOK PRO - TOM	3/09/15	1,000	0	0
146	AC UNIT	6/23/15	2,500	0	0
147	LAND - 110 CARNEGIE PLACE	2/16/89	35,042	0	0
149	MACBOOK PRO (2)	1/20/16	2,086	0	0
150	MACBOOK PRO	8/20/15	953	0	0
151	MACBOOK PRO	9/09/15	869	0	0
152	FURNACE	10/05/15	2,166	0	0
153	LIBRARY REMODEL	9/16/16	8,298	554	0
155	FLOORING FOR BASEMENT	5/22/19	3,197	214	0
156	GLASS BOARDS	5/31/19	1,795	256	0
157	COMPUTER-ACCOUNTANT	12/13/18	511	0	0
158	COMPUTER-BOB DUKES	6/01/19	2,445	0	0
159	WOODEN CONFERENCE TABLE-A BETTEF	9/12/19	3,000	429	0
160	BASEMENT FLOOR	8/14/19	2,155	144	0
161	MACBOOK PRO - HARKNESS	12/09/19	1,299	0	0
162	MACBOOK PRO - BOB DUKES	6/15/20	2,026	0	0
163	MACBOOK PRO-13.3IN-LARSON	5/07/20	963	0	0
164	WATER HEATER	2/05/21	1,210	172	0
165	KITCHEN/BATH REMODEL	2/11/21	4,547	303	0
166	LIBRARY REMODEL	2/22/21	3,490	232	0
167	PRINTING EQUIPMENT	5/05/21	4,000	800	0
168	2020 IPAD PRO 12.9 INCH (BOB)	6/17/21	1,550	310	0
169	MACBOOK AIR - TOM	12/13/21	1,315	183	0
170	BUILDING SIGNAGE	2/28/22	2,568	257	0
171	DOWNSTAIRS REMODEL	2/01/23	12,812	854	0
172	PANINI SCANNER (DIRECT DEPOSITS)	3/02/23	650	217	0
173	ASUS VIVOBOOK-JORDAN	5/04/23	962	321	0
174	MACBOOK-DAVID PARFITT	5/09/23	2,130	710	0
175	CANON EOS R8 CAMERA	6/01/23	1,499	300	0
176	MacBook Air 2022	2/02/24	802	160	0
Total Other Depreciation			<u>509,647</u>	<u>6,722</u>	<u>0</u>
Total ACRS and Other Depreciation			<u>509,647</u>	<u>6,722</u>	<u>0</u>
Grand Totals			<u>509,647</u>	<u>6,722</u>	<u>0</u>

Form **990****Two Year Comparison Report****2022 & 2023**For calendar year 2023, or tax year beginning **07/01/23**, ending **06/30/24**

Name

Taxpayer Identification Number

WORLDWIDE DISCIPLESHIP ASSOCIATION**58-1211155**

		2022	2023	Differences
Revenue	1. Contributions, gifts, grants	1. 1,671,417	1,718,819	47,402
	2. Membership dues and assessments	2.		
	3. Government contributions and grants	3.		
	4. Program service revenue	4.		
	5. Investment income	5. 3,488	24,960	21,472
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7.		
	8. Net income or (loss) from fundraising events	8.		
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10.		
	11. Other revenue	11. 6,756	52,564	45,808
	12. Total revenue. Add lines 1 through 11	12. 1,681,661	1,796,343	114,682
Expenses	13. Grants and similar amounts paid	13.		
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15. 122,192	126,324	4,132
	16. Salaries, other compensation, and employee benefits	16. 1,247,385	1,379,200	131,815
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 13,850	19,370	5,520
	19. Occupancy, rent, utilities, and maintenance	19.		
	20. Depreciation and Depletion	20. 6,775	7,373	598
	21. Other expenses	21. 294,729	345,817	51,088
	22. Total expenses. Add lines 13 through 21	22. 1,684,931	1,878,084	193,153
	23. Excess or (Deficit). Subtract line 22 from line 12	23. -3,270	-81,741	-78,471
Other Information	24. Total exempt revenue	24. 1,681,661	1,796,343	114,682
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 10,244	77,524	67,280
	27. Total assets	27. 892,877	792,708	-100,169
	28. Total liabilities	28. 84,142	65,714	-18,428
	29. Retained earnings	29. 808,735	726,994	-81,741
	30. Number of voting members of governing body	30. 12	11	
	31. Number of independent voting members of governing body	31. 10	9	
	32. Number of employees	32. 31	39	
	33. Number of volunteers	33. 0	0	

Form 990

Tax Return History

2023

Name

WORLDWIDE DISCIPLESHIP ASSOCIATION

Employer Identification Number
58-1211155

	2019	2020	2021	2022	2023	2024
Contributions, gifts, grants	1,479,216	1,331,297	1,570,598	1,671,417	1,718,819	
Membership dues						
Program service revenue						
Capital gain or loss				3,488	24,960	
Investment income						
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	26,769	284,124	6,511	6,756	52,564	
Total revenue	1,505,985	1,615,421	1,577,109	1,681,661	1,796,343	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.	120,712	143,987	111,311	122,192	126,324	
Other compensation	972,252	1,081,105	1,185,162	1,247,385	1,379,200	
Professional fees	17,818	17,727	17,677	13,850	19,370	
Occupancy costs						
Depreciation and depletion	15,302	6,338	6,391	6,775	7,373	
Other expenses	204,764	192,922	173,118	294,729	345,817	
Total expenses	1,330,848	1,442,079	1,493,659	1,684,931	1,878,084	
Excess or (Deficit)	175,137	173,342	83,450	-3,270	-81,741	
Total exempt revenue	1,505,985	1,615,421	1,577,109	1,681,661	1,796,343	
Total unrelated revenue						
Total excludable revenue	26,769	284,124	6,511	10,244	77,524	
Total Assets	919,822	832,985	901,898	892,877	792,708	
Total Liabilities	364,610	104,431	89,894	84,142	65,714	
Net Fund Balances	555,212	728,554	812,004	808,735	726,994	

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
MISCELLANEOUS	\$ 14,991	14,991		
FUNDRAISING	8,594			8,594
RETIREMENT	5,414		5,414	
TELEPHONE	4,907	2,239	2,668	
CONFERENCES	3,322	3,322		
MATERIALS DEVELOPMENT	2,450	2,450		
REIMBURSEMENTS	1,564	1,564		
TOTAL	\$ 41,242	\$ 24,566	\$ 8,082	\$ 8,594

Schedule A, Part II, Line 1(e)

Description	Amount
UNRESTRICTED	\$ 1,688,819
RESTRICTED	30,000
TOTAL	\$ 1,718,819

Schedule A, Part II, Line 5 - Excess Gifts

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
RAYMOND JAMES CHARITABLE	\$ 44,042	\$
NATIONAL CHRISTIAN FOUNDATION TAMPA	268,000	111,068
CAWOOD FAMILY SO INC.	35,000	
MICHAEL WOLF	87,417	
NATIONAL CHRISTIAN FOUNDATION GA	106,444	
FIDELITY CHARITABLE GIFT FUND	48,900	
TOTAL	<u>\$ 589,803</u>	<u>\$ 111,068</u>