

Return of Organization Exempt From Income Tax

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

2016

- Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2016 calendar year, or tax year beginning, 2016, and ending, 20

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C Name of organization HEAL MINISTRIES INC. D Employer identification no. 26-2267496. E Telephone number (615)973-0119. F Name and address of principal officer: TINA WEIR. G Gross receipts \$ 476,978. H(a) Is this a group return for subordinates? Yes No. H(b) Are all subordinates included? Yes No. I Tax-exempt status: 501(c)(3). J Website: WWW.HEAL-MINISTRIES.ORG. K Form of organization: Corporation. L Year of formation: 2007. M State of legal domicile: TN.

Part I Summary

Table with 4 main sections: Activities & Governance (lines 1-7), Revenue (lines 8-12), Expenses (lines 13-19), and Net Assets or Fund Balances (lines 20-22). Includes columns for Prior Year and Current Year.

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 RODNEY SYLER, Date 11-15-2017. Type or print name and title RODNEY SYLER, CHAIRMAN.

Paid Preparer Use Only: Print/Type preparer's name Bryan Blair, Preparer's signature Bryan Blair, Date 11-15-2017, Check self-employed, PTIN P00631975, Firm's name H A Beasley and Company PLLC, Firm's address 111 MTCS Drive Murfreesboro TN 37129, Firm's EIN, Phone no. 615-895-5675.

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, ITEM 5 GENERAL EXPLANATION ATTACHMENT

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 \$ 448,947 including grants of \$) (Revenue \$ 430,782)

See SERVICES page for a description of this program service.

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

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

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 448,947

Statement of Program Service Accomplishments**2016 PG01**

Name(s) as shown on return

HEAL MINISTRIES INC

Your Social Security Number

26-2267496

FORM 990-PART III(A)

Statement #4

Statement of Service Accomplishment**PROGRAM SERVICE CODE****PROGRAM SERVICE EXPENSES**

\$448947

GRANTS AND ALLOCATIONS INCLUDED IN ABOVE EXPENSE

\$0

PROGRAM SERVICES REVENUE

\$430782

EXPLANATION

AT THE JAMES PLACE IN JINJA, UGANDA, HEAL MENTORS WOMEN AND CHILDREN HOPING THAT, THROUGH THE PROCESS THEY WILL FEEL LOVE, FIND HOPE AND KNOW VALUE. DURING THE WEEK WE HOLD SEVERAL PROGRAMS AT THE JAMES PLACE (BIBLE STUDY, ENGLISH CLASSES, CHILDCARE, PRESCHOOL, KIDS CLUB, SEWING, BUSINESS CLASSES, AND ARTISAN TRAINING). WE HAVE HAD OVER 300 WOMEN AND 600 CHILDREN COME THROUGH OUR GATES AND REGISTER FOR PROGRAMS. OVER 75 OF THESE WOMEN ARE NOW ENTREPRENEURS IN THE COMMUNITY AND ARE ABLE TO CARE FOR THEIR FAMILIES. HEAL HOSTS AN AVERAGE OF 350 CHILDREN WEEKLY IN OUR KIDS CLUB PROGRAM WHERE CHILDREN FROM THE NEARBY RIPPON FISHING VILLAGE AND WORKS SLUM COME TO PLAY, LEARN BIBLICAL LESSONS ON LIFE AND HEALTH, AND RECEIVE A HEALTHY SNACK. ADDITIONALLY, HEAL HOSTS MISSIONS TEAMS AND INTERNS AT THE JAMES PLACE TO SERVE ALONGSIDE TWO FULL-TIME US EMPLOYEES OF THE ORGANIZATION. INTERNS ASSIST IN THE VARIOUS JAMES PLACE PROGRAMS IN AN AREA THAT THEY HAVE RECEIVED SPECIFIC EDUCATIONAL TRAINING IN. TEAMS SERVE THE PEOPLE OF THE COMMUNITY THROUGH VBS PROGRAMS, BUILDING IMPROVEMENT PROJECTS AND MORE.



If you would like a full version of the
form 990 submitted to the IRS,
please contact us at:

info@heal-ministries.org