Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

B Check if applicable: Address change AUDIO SCRIPTURE MINISTRIES D Employer identificat	
Address change AUDIO SCRIPTURE MINISTRIES	6
	6
Name change Doing business as 23-6296186	
Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number	
Final PO BOX 1439 616-396-52	
terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$	1,569,860.
I I O D DAND, MI 49422 H(a) is this a group retuin	
Application F Name and address of principal officer: JAMISON WORST for subordinates?	Yes X No
SAME AS C ABOVE H(b) Are all subordinates inclu	uded? Yes No
I Tax-exempt status: X 501(c)(3)	st. See instructions
J Website: WWW.AUDIOSCRIPTURE.ORG H(c) Group exemption n	
K Form of organization: X Corporation Trust Association Other L Year of formation: 1967 M S	State of legal domicile: M I
Part I Summary	
1 Briefly describe the organization's mission or most significant activities: AUDIO SCRIPTURE MINISTE	RIES HELPS
CONNECT PEOPLE TO GOD'S WORD IN THEIR OWN HEART LANGUAGE. Check this box if the organization discontinued its operations or disposed of more than 25% of its net asses. Number of voting members of the governing body (Part VI, line 1a). Number of independent voting members of the governing body (Part VI, line 1b). Total number of individuals employed in calendar year 2022 (Part V, line 2a). Total number of volunteers (estimate if necessary). Total unrelated business revenue from Part VIII, column (C), line 12.	
2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net asse	ets.
3 Number of voting members of the governing body (Part VI, line 1a)	7
4 Number of independent voting members of the governing body (Part VI, line 1b)4	7
5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)5	11
6 Total number of volunteers (estimate if necessary)	12
7a Total unrelated business revenue from Part VIII, column (C), line 12	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b	0.
Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h) 1,272,813.	1,490,566.
9 Program service revenue (Part VIII, line 2g)	0.
9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 8 Contributions and grants (Part VIII, line 1h) 1,272,613. 0. 859,017.	79,294.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,131,830.	1,569,860.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 258, 195.	278,383.
14 Benefits paid to or for members (Part IX, column (A), line 4)	0.
	686,190.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.
b Total fundraising expenses (Part IX, column (D), line 25)	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 347,508.	327,198.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,161,254.	1,291,771.
19 Revenue less expenses. Subtract line 18 from line 12 970,576.	278,089.
Beginning of Current Year	End of Year
Beginning of Current Year 20 Total assets (Part X, line 16) 1,970,304. 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 1,963,712.	2,262,550.
21 Total liabilities (Part X, line 26) 6,592.	7,763.
22 Net assets or fund balances. Subtract line 21 from line 20	2,254,787.
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 kn	nowledge 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 Signature of officer Date	
Here JAMISON WORST, PRESIDENT	
Type or print name and title	
Print/Type preparer's name Preparer's signature Date Check] PTIN
Paid DEBRA A BOEVE DEBRA A BOEVE 01/08/24 self-employed	P00111326
	-2426290
Use Only Firm's address 360 EAST BELTLINE NE STE 200	
	6)459-2233
May the IRS discuss this return with the preparer shown above? See instructions	X Yes No

Pai	Check if Schedule O contains a response or note to any line in this Part III
_	
1	Briefly describe the organization's mission: ASM'S COMMITMENT TO THE GREAT COMMISSION LEADS US TO SERVE OTHERS BY:
	-PARTNERING WITH NATIONAL LEADERS, CHURCHES, MINISTRIES, AND
	INDIVIDUALS TO CREATE AND DISTRIBUTE SCRIPTURE MEDIA TO SHARE THE GOOD
	NEWS OF JESUS.
2	Did the organization undertake any significant program services during the year which were not listed on the
2	prior Form 990 or 990-EZ? Yes X 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 X No
3	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 \$ 391,630 • including grants of \$ 100,879 •) (Revenue \$
	RESOURCE DISTRIBUTIONS - BRINGING GOD'S WORD TO THOUSANDS OF PEOPLE
	AROUND THE WORLD WHO WILL HEAR THE GOSPEL FOR THE FIRST TIME ON THEIR
	NEW AUDIO BIBLES. WE WORK WITH NATIONAL PASTORS AND OTHER LEADERS TO
	PLACE AUDIO BIBLE DEVICES INTO THE HANDS OF THOSE WHO NEED THEM MOST.
	AS A RESULT, CHURCHES ARE BEING PLANTED, BIBLE STUDY GROUPS ARE MEETING
	WEEKLY TO LISTEN TO GOD'S WORD, AND FAMILIES AND COMMUNITIES ARE BEING
	TRANSFORMED.
4b	(Code:) (Expenses \$221,584 • including grants of \$) (Revenue \$)
	PARTNERSHIP AND COLLABORATIONS - COLLABORATIVE PARTNERSHIPS ALLOW ASM
	TO LEVERAGE AND EXPAND THE OUTREACH OF LIKE-MINDED MINISTRIES AND
	INDIVIDUALS. SERVING WITH NATIONAL LEADERS, CHURCHES, DENOMINATIONS,
	BIBLE TRANSLATION AGENCIES, TECHNOLOGY FIRMS, MISSION AGENCIES, AND
	MORE ALSO HELPS TO DEMONSTRATE THE UNITY THAT JESUS PRAYED FOR (JOHN
	17) AND ALLOWS US TO BE GOOD STEWARDS OF THE RESOURCES GOD HAS ENTRUSTED TO OUR CARE.
	ENTRUSTED TO OUR CARE.
4c	(Code:) (Expenses \$ 164,086 • including grants of \$ 80,224 •) (Revenue \$)
	LANGUAGE AND RECORDINGS - ASM IS ON THE FRONT LINES OF RECORDING THE
	BIBLE AND BIBLE ENGAGEMENT RESOURCES THAT ARE CONTEXTUALLY APPROPRIATE
	AND CULTURALLY RELEVANT. WE FOCUS ON UNREACHED AND LEAST-REACHED PEOPLE
	GROUPS WHO HAVE LITTLE TO NO ACCESS TO GOD'S WORD.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 228,149 · including grants of \$ 76,300 ·) (Revenue \$) Total program service expenses 1,005,449 ·
40	Total program service expenses 1,005,449. Form 990 (2022)
	Form 390 (2022)

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	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			37
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			3,7
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		х
•	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
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	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
5	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	9		х
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	10		х
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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	11b		Х
С	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	11c		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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			3,7
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Λ	
b				
	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	14b	Х	
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	140		
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
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	17		Х
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	18		Х
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	19		Х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	21		X

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Form 990 (2022) AUDIO SCRIPTURE MINISTRIES 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? If "Yes," complete Schedule I, Parts I and III	22		х
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? If "Yes," complete			
	Schedule J	23		Х
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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	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? If "Yes," complete Schedule L, Part I	25a		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? If "Yes," complete			37
	Schedule L, Part I	25b		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%			Х
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
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? If "Yes," complete Schedule L, Part III.	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
_	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	l		
٥-	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
D	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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
30	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
0.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
		38	Х	
Pa	Note: All Form 990 filers are required to complete Schedule O tt 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			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	

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022) AUDIO SCRIPTURE MINISTRIES Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				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 11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	Х	
За	· · · · · · · · · · · · · · · · · · ·		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		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				
	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 A	, ,			37
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 transa		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-			v
	any contributions that were not tax deductible as charitable contributions?		6a		Х
D	If "Yes," did the organization include with every solicitation an express statement that such contribut	-	Ch		
-	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).	vices provided to the paver?	7-		Х
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser		7a 7b		21
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		76		
С	to file Form 8282?	•	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri		7f		X
g g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
			8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	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:				
а	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			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	 	12a		
	,	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		10-		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
h	Enter the amount of reserves the organization is required to maintain by the states in which the				
b	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
14a		100	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				
-	excess parachute payment(s) during the year?		15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16		Х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

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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			X						
Sec	tion 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	7								
	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.									
b	Enter the number of voting members included on line 1a, above, who are independent 1b	7								
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?	2		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?	3		Х						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X						
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?	6		Х						
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?	7a		X						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	X							
b	Each committee with authority to act on behalf of the governing body?	8b	Х							
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	9		X						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No X						
	Did the organization have local chapters, branches, or affiliates?	10a		Λ.						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	l								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х							
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a								
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40	v							
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X							
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Λ							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	х							
10	on Schedule O how this was done	12c	X							
13	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	13	X							
14 15		14	25							
13	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?									
2	The organization's CEO, Executive Director, or top management official	15a	х							
	Other officers or key employees of the organization	15b	X							
b	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	130								
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
100	taxable entity during the year?	16a		х						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	Tou								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure	10.0								
17	List the states with which a copy of this Form 990 is required to be filed AL, CA, CO, FL, GA, IL, KS, KY, MI	E, MD	, MA	,MI						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(
-	for public inspection. Indicate how you made these available. Check all that apply.	,	,							
	X Own website X Another's website X 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, a	nd fina	ncial							
-	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									
	ERIKA HOEKZEMA - 616-396-5291									
	P.O. BOX 1439, HOLLAND, MI 49422									
	SEE SCHEDILE O FOR FILL LIST OF STATES	Forn	aan	(2022)						

11606__1

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 the 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.

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

- 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.

O	(A)	(B)		(C)		(D)	(E)	(F)			
Week (list any hours for related organizations below line) MaoMI FRIZZELL 40.00 EXECUTIVE DIRECTOR X X May be a like organization with the organization and related organizations and related organizations (W.2/1099-NEC) 1099-NEC) 1099-NEC)	Name and title		(do	Position (do not check more than one		1					
(1) NAOMI FRIZZELL			offic	officer and a director/trustee)			or/trus	n an tee)	·	· ·	
(1) NAOMI FRIZZELL		, ,	rector								
(1) NAOMI FRIZZELL			e or di	tee			sated			,	
(1) NAOMI FRIZZELL			truste	nal trus		oyee	omper			1000 1120)	_
(1) NAOMI FRIZZELL			lividua	titutior	icer	y empl	hest c ployee	mer			organizations
EXECUTIVE DIRECTOR	(1) NAOMI ERIZZELL		프	su	#0	ş.	를 를	윤			
1.50		10.00	1		$ _{\mathbf{x}} $				88,981.	0.	23,438.
O		1.50									
O	PRESIDENT/DIRECTOR		Х		х				0.	0.	0.
(4) RYAN WOOD 1.00 SECRETARY/DIRECTOR X X 0. 0. 0. (5) BEN RUITER 1.00 X X 0. 0. 0. VICE PRESIDENT/DIRECTOR X X 0. 0. 0. 0. (6) TIM JACKSON 0.50 0. 0. 0. 0. 0. 0. (7) CHERYL PRINDLE 0.50 X 0. 0. 0. 0. 0. (8) JOHN SMITH 0.50 X 0. 0. 0. 0. 0. (9) LEE DEYOUNG 0.50 0.50 0. <t< td=""><td>(3) KODY FAULK</td><td>0.50</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	(3) KODY FAULK	0.50									
SECRETARY/DIRECTOR	DIRECTOR		Х						0.	0.	0.
1.00 X X X 0. 0. 0. 0. 0.	(4) RYAN WOOD	1.00							_		_
VICE PRESIDENT/DIRECTOR X X X 0. 0. 0. (6) TIM JACKSON 0.50 0. 0. 0. 0. 0. DIRECTOR X 0. 0. 0. 0. 0. (8) JOHN SMITH 0.50 X 0. 0. 0. 0. (9) LEE DEYOUNG 0.50 0. 0. 0. 0. 0.			Х		Х				0.	0.	0.
(6) TIM JACKSON 0.50 DIRECTOR X (7) CHERYL PRINDLE 0.50 DIRECTOR X (8) JOHN SMITH 0.50 DIRECTOR X (9) LEE DEYOUNG 0.50		1.00	ļ								
DIRECTOR X 0. 0. 0.		0.50	X		X				0.	0.	0.
(7) CHERYL PRINDLE DIRECTOR (8) JOHN SMITH DIRECTOR X 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		0.50	١,,								0
DIRECTOR X 0. 0. 0. (8) JOHN SMITH 0.50 X 0. 0. (9) LEE DEYOUNG 0.50		0 50	X						0.	0.	0.
(8) JOHN SMITH DIRECTOR (9) LEE DEYOUNG (8) JOHN SMITH O.50 X 0.00 0.00		0.50	Į						0	0	0
DIRECTOR		0.50	^						0.	0.	0.
(9) LEE DEYOUNG 0.50		0.30	x						0.	0.	0.
		0.50							•	•	
			x						0.	0.	0.
			-								

Form 990 (2022)

	990 (2022) AUDIO SCR	RIPTURE	M:	[N]	SI	'R I	EES	3		23-629	961	86	Page 8
Pai	t VII Section A. Officers, Directors, Trust	tees, Key Em	ploy	ees,	and	iH b	ghes	st C	compensated Employe	es (continued)			
	(A) Name and title	(B) Average hours per week	box	not cl , unles	ss per	tion more rson i	than o	n an	(D) Reportable compensation from	(E) Reportable compensation from related		Estin amou	ated unt of ner
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC, 1099-NEC)	/	from organ and re	nsation n the ization elated zations
_													
16	Subtotal								88,981.	().	23	,438.
	Total from continuation sheets to Part VII Total (add lines 1b and 1c) Total number of individuals (including but no	, Section A		· · · · · · · ·					0. 88,981.	().		0.
_	compensation from the organization	or invited to the		iiste	u ai		-) vvi		eceived more man proc	,,000 or reportable		Y	0 es No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for su	uch individual			· ·····							3	Х
4 5	For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a	,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	for such individual			4	Х
_	rendered to the organization? If "Yes," comp	olete Schedule	e J f	or su	ıch p	oers	on .					5	X
1	tion B. Independent Contractors Complete this table for your five highest cor	•	-							· · · · · · · · · · · · · · · · · · ·	ensati	ion froi	m
	the organization. Report compensation for t (A) Name and business	•		ONE		/itri (or w	ıtnır	(B) Description of s		Cor	(C) npensa	ation
2	Total number of independent contractors (in	ncluding but n	ot lir	mited	d to	thos	se lis	sted	d above) who received m	nore than			
	\$100,000 of compensation from the organiz	ation)				Fo	orm 99	0 (2022)

232008 12-13-22

Ра	rt V	Ш							
			Check if Schedule O contains a resp	onse	or note to any lir		(B)	(C)	<u> </u>
						(A) Total revenue	Related or exempt		Revenue excluded
						Total revenue		business revenue	
(0.40									sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts			Federated campaigns 1a						
Gra			Membership dues 1b						
ts, An		С	Fundraising events 1c						
Gif		d	Related organizations 1d						
ns, Sim			Government grants (contributions) 1e						
er S		f	All other contributions, gifts, grants, and	_					
ję Ż			similar amounts not included above 1f	1,	490,566. 60,202.				
ont od C		g	Noncash contributions included in lines 1a-1f	\$					
<u>a C</u>		h	Total. Add lines 1a-1f			1,490,566 .			
					Business Code				
Ce	2	а							
ervi Ie		b							
n Si ent		С							
ran ?ev		d							
Program Service Revenue		е							
<u> </u>		f	All other program service revenue						
		g	Total. Add lines 2a-2f						
	3		Investment income (including dividends,		•				
			other similar amounts)			79,294.			79,294.
	4		Income from investment of tax-exempt b	ond p	roceeds				
	5		Royalties						
			(i) Rea	ıl	(ii) Personal				
	6	а	Gross rents 6a						
		b	Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss)						
	7	а	Gross amount from sales of (i) Securi	ties	(ii) Other				
			assets other than inventory 7a						
•		b	Less: cost or other basis						
ů.			and sales expenses 7b						
Revenue			Gain or (loss) 7c						
er R			Net gain or (loss)		· · · · · · · · · · · · · · · · · · ·				
Othe	8	а	Gross income from fundraising events (not						
0			including \$ of						
			contributions reported on line 1c). See						
			Part IV, line 18						
			Less: direct expenses						
			Net income or (loss) from fundraising eve						
	9	а	Gross income from gaming activities. See	- 1					
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gaming activities	:s					
	Ю	а	Gross sales of inventory, less returns	100					
		L	and allowances						
			Less: cost of goods sold						
		Ü	Net income or (loss) from sales of inventor	лу	Business Code				
sno	44	_			Duamess Code				
nec	11								
Miscellaneous Revenue		b							
Be		q	All other revenue						
Σ			Total. Add lines 11a-11d						
	12	U	Total revenue. See instructions			1,569,860.	0.	0.	79,294.
	12		TOTAL TOVORIDO. OCC INSUIDUONONS			<u>,,,,</u>			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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 respon	se or note to any line in (A)	this Part IX(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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	270 202	270 202		
	individuals. See Part IV, lines 15 and 16	278,383.	278,383.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	02 220	74 576	0 222	0 222
	trustees, and key employees	93,220.	74,576.	9,322.	9,322
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	120 506	207 /11	76 241	54,934
7	Other salaries and wages	438,586.	307,411.	76,241.	34,934
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	114,314.	81,494.	18,867.	13,953
9	Other employee benefits	40,070.	27,623.	7,718.	4,729
10	Payroll taxes	40,070.	41,043.	1,110.	4,143
11	Fees for services (nonemployees):				
a					
b	Legal	13,900.		13,900.	
C	5 · · · · · · · · · · · · · · · · · · ·	13,900.		13,900.	
	Lobbying				
e	, <u> </u>	7,462.		7,462.	
f	Investment management fees	1,402.		7,402.	
g	, ,				
	column (A), amount, list line 11g expenses on Sch 0.)	54,803.	31,976.	21,956.	871.
12	Advertising and promotion	145,098.	113,685.	5,829.	25,584
13	Office expenses	6,364.	4,537.	1,050.	777
14	Information technology	4,540.	4,540.	1,030.	111
15	Royalties	15,117.	15,085.	18.	14.
16	Occupancy	11,259.	9,885.	10.	1,374
17	Travel	11,239.	9,003.		1,3/4
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	2,679.	1,005.	1 505	169
19	Conferences, conventions, and meetings	1,262.	1,003.	1,505.	109
20	Interest	1,202.		1,202.	
21	Payments to affiliates	1,995.	1,421.	330.	244
22	Depreciation, depletion, and amortization	1,333.	1,441.	330.	244
23	Other evenesses Itemize evenesses not severed				
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 0.) MISSIONARY SUPPORT	48,483.	48,483.		
a	RELOCATION COSTS	5,704.	40,403.	713.	713
D	DUES AND SUBSCRIPTIONS	3,438.	4,4/0.	3,301.	137
c	STATE FILING FEES	2,936.		3,301.	2,936
d		2,158.	1,067.	908.	183
	All other expenses	1,291,771.	1,005,449.	170,382.	115,940
25	Total functional expenses. Add lines 1 through 24e	1,491,111.	1,000,449.	110,304.	11J, 54U
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 if following SOP 98-2 (ASC 958-720)				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2022

Form **990** (2022)

Part X Balance Sheet

art x	•	balance Sneet					
		Check if Schedule O contains a response or no	ote to ar	y line in this Part X			
					(A) Beginning of year		(B) End of year
1	ı	Cash - non-interest-bearing			489,296.	1	542,388.
2		Savings and temporary cash investments			846,506.	2	973,440
3	3	Pledges and grants receivable, net		[3	
4		Accounts receivable, net				4	
5		Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of the	ese pers	ons		5	
6	6	Loans and other receivables from other disqua	lified pe	sons (as defined			
		under section 4958(f)(1)), and persons describe	ed in se	tion 4958(c)(3)(B)		6	
? 7	,	Notes and loans receivable, net				7	
8		Inventories for sale or use			20,158.	8	78,720
[[] 9		Prepaid expenses and deferred charges				9	
10		Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	30,560.			
	b	Less: accumulated depreciation		18,398.	4,157.	10c	12,162
11		Investments - publicly traded securities			610,187.	11	655,840
12		Investments - other securities. See Part IV, line			12		
13	3	Investments - program-related. See Part IV, line		13			
14	Ļ	Intangible assets		14			
15		Other assets. See Part IV, line 11		15			
16		Total assets. Add lines 1 through 15 (must eq			1,970,304.	16	2,262,550
17	,	Accounts payable and accrued expenses			5,980.	17	7,327
18	3	Grants payable			18		
19		Deferred revenue			19		
20		Tax-exempt bond liabilities				20	
21		Escrow or custodial account liability. Complete				21	
22	2	Loans and other payables to any current or for	mer offi	er, director,			
		trustee, key employee, creator or founder, sub	stantial	ontributor, or 35%			
22		controlled entity or family member of any of the	ese pers	ons		22	
i 23	3	Secured mortgages and notes payable to unre	lated th	rd parties		23	
24	Ļ	Unsecured notes and loans payable to unrelat	ed third	oarties		24	
25	5	Other liabilities (including federal income tax, p	ayables	to related third			
		parties, and other liabilities not included on line	s 17-24	. Complete Part X			
		of Schedule D			612.	25	436
26	<u>`</u>	Total liabilities. Add lines 17 through 25			6,592.	26	7,763
,		Organizations that follow FASB ASC 958, ch	eck her	e X			
		and complete lines 27, 28, 32, and 33.					
27	,	Net assets without donor restrictions			1,687,010.	27	1,875,415
28	3	Net assets with donor restrictions		<u></u> .	276,702.	28	379,372
		Organizations that do not follow FASB ASC					
27 28 29 30 31 32		and complete lines 29 through 33.					
29)	Capital stock or trust principal, or current fund	s			29	
30)	Paid-in or capital surplus, or land, building, or e	quipme	nt fund		30	
31		Retained earnings, endowment, accumulated				31	
32	2	Total net assets or fund balances			1,963,712.	32	2,254,787
33		Total liabilities and net assets/fund balances			1,970,304.	33	2,262,550

orn	n 990 (2022) AUDIO SCRIPTURE MINISTRIES	23-	-6296186	Pag	ge 12
Pa	rt 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	1,569		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,291		
3	Revenue less expenses. Subtract line 2 from line 1	3			89.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,963		
5	Net unrealized gains (losses) on investments	5	12	2,9	86.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,254	1,7	87.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
	<u> </u>			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual 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?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	i,		
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit	,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule	o.		
За	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?		3a		Х

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

Form **990** (2022)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

AUDIO SCRIPTURE MINISTRIES

Employer identification number

23-6296186 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). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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.) 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. 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. 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. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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.)

Sec	ction A. Public Support	71	•	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	, ,	` '	` ,	. ,	. ,	.,
	membership fees received. (Do not						
	include any "unusual grants.")	1,042,214.	797,129.	1,255,321.	1,272,813.	1,465,566.	5,833,043.
2	Tax revenues levied for the organ-						
	ization'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	1,042,214.	797,129.	1,255,321.	1,272,813.	1,465,566.	5,833,043.
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)						726,796.
	Public support. Subtract line 5 from line 4.						5,106,247.
	ction B. Total Support	1				· · · · · · · · · · · · · · · · · · ·	
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	1,042,214.	797,129.	1,255,321.	1,272,813.	1,465,566.	5,833,043.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	10 550	6 072	1.54	14 205	1 (11	41 500
	and income from similar sources	18,559.	6,973.	164.	14,395.	1,611.	41,702.
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.)						5 054 545
	Total support. Add lines 7 through 10		,				5,874,745.
12	•	=				12	
13	First 5 years. If the Form 990 is for the						
Sec	organization, check this box and storection C. Computation of Publ		rcentage				L
	Public support percentage for 2022 (olumn (f))		14	86.92 %
	Public support percentage from 2021					15	87.98 %
	33 1/3% support test - 2022. If the o						
	stop here. The organization qualifies	•		•		•	
b	33 1/3% support test - 2021. If the o						
_	and stop here. The organization qual	-					
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact	ū					•
	meets the facts-and-circumstances to						
b	10% -facts-and-circumstances tes	•	•		•		
	more, and if the organization meets the	_					
	organization meets the facts-and-circ				-		
18	Private foundation. If the organization		-				
						0 1 1 1	Earm 000\ 2022

Schedule A (Form 990) 2022

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

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

Se	ction A. Public Support	clow, picase com	pioto i art ii.j				
	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	, ,	, ,	` ,	<u> </u>	1	` ` `
	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						
Ŭ	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
_	ization's benefit and either paid to or expended on its behalf						
_	The value of services or facilities						
5	furnished by a governmental unit to the organization without charge						
6	***						
	Total. Add lines 1 through 5	<u> </u>		+	+	+	
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
k	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						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
	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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	<u> </u>				1	
14	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,
_	check this box and stop here						<u></u>
	ction C. Computation of Publ						
15	Public support percentage for 2022 (I	line 8, column (f),	divided by line 13,	column (f))		15	%
	Public support percentage from 2021					16	%
Se	ction D. Computation of Inves	stment Incom	ne Percentage				
17	Investment income percentage for 20					17	%
18	Investment income percentage from 2	2021 Schedule A,	Part III, line 17			18	%
19a	a 33 1/3% support tests - 2022. If the	-					17 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization qual	ifies as a publicly s	supported organiz	ation	
k	33 1/3% support tests - 2021. If the line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization			•		· ·	

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Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or 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? If "Yes," provide detail in Part VI.
- 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? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in* **Part VI.**
- 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)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
За		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

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Par	rt IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion 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			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's o	fficers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one sup	ported		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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? 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.	2		
Sect	tion 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)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the supported organization(s).	1		
Seci	tion 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? If "No," explain in Part VI how			
2	the organization maintained a close and continuous working relationship with the supported organization(s).	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? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion 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 yeafsee inst	ructions)		
' a	The organization satisfied the Activities Test. Complete line 2 below.	detions).		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below</i> .			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	itv (see instructio	ns).	
2	Activities Test. Answer lines 2a and 2b below.	., (Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			-110
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b				
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b | 232025 12-09-22 | Schedule A (Form 990) 2022

Sche	edule A (Form 990) 2022 AUDIO SCRIPTURE MINIST	RIES		23-6296186 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organ	izations	J
1	Check here if the organization satisfied the Integral Part Test as a qualify			Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	ust complete	Sections A through E.	
Sect	ion 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		
Sect	cion 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		
е	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		
Sect	ion 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		

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

Schedule A (Form 990) 2022

5

6

5 Income tax imposed in prior year

instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anızatıons _{(continu}	ıed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	1			
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide 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	he organization is responsive	е		
	(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	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
С	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i_	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
<u>b</u>	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

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.)

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 Inspection

Name of the organization

AUDIO SCRIPTURE MINISTRIES

Employer identification number 23-6296186

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other S	Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.		
		(a) Donor advised	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets he	eld in donor advised fur	nds
	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 a	advisors in writing that gra	ant funds can be used	only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for ar	y other purpose confe	rring
_	impermissible private benefit?			
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes	s" on Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organizat		ı	
	Preservation of land for public use (for example, recrea	ation or education)	1	orically important land area
	Protection of natural habitat		Preservation of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contrib	ution in the form of a co	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
C	Number of conservation easements on a certified historic str			2c
d	Number of conservation easements included in (c) acquired			
_	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or t	erminated by the organ	nization during the tax
	year			
4	Number of states where property subject to conservation ea		da a da a a a a da a a a a a	
5	Does the organization have a written policy regarding the pe			Yes No
6	violations, and enforcement of the conservation easements Staff and volunteer hours devoted to monitoring, inspecting.		nd opforoing concorret	
6	Stan and volunteer hours devoted to monitoring, inspecting	, Haridiling of Violations, at	id emorcing conservati	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and en	forcing conservation e	asements during the year
•	, and an experience meanined in mornitoring, inopositing, main	aming of violationio, and on	roroning correctivation of	acomenic daming the year
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requiremen	ts of section 170(h)(4)(f	3)(i)
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservat			
	balance sheet, and include, if applicable, the text of the foot		<u> </u>	
	organization's accounting for conservation easements.	· ·		
Par	t III Organizations Maintaining Collections of	of Art, Historical Tre	asures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 98	58, not to report in its rev	enue statement and ba	lance sheet works
	of art, historical treasures, or other similar assets held for pu	blic exhibition, education	, or research in furthera	nce of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that des	cribes these items.	
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue	e statement and baland	ce sheet works of
	art, historical treasures, or other similar assets held for public	c exhibition, education, or	research in furtherand	e 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 tre	easures, or other similar a	ssets for financial gain,	provide
	the following amounts required to be reported under FASB A	ASC 958 relating to these	items:	
а	Revenue included on Form 990, Part VIII, line 1			
<u>b</u>	Assets included in Form 990, Part X			
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.		Schedule D (Form 990) 2022

	t III Organizations Maintaining Co	ollections of A			easures. or	Other	Similar	Asse	ts/contin		age Z
			-						•	<i>aou</i>)	
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):										
а	Public exhibition	d		oan or ove	hange program						
b	Scholarly research	e		_oan or exc Other	nange program						
	Preservation for future generations	-		Julei							
с 4	_	llastions and avalai	n how th	ov furthor t	ho organization	'o ovomr	t nurnos	o in Dor	+ VIII		
5	Provide a description of the organization's co During the year, did the organization solicit or							emran	t AIII.		
Э	to be sold to raise funds rather than to be ma								Yes] Na
Par	t IV Escrow and Custodial Arrang										No
ı uı	reported an amount on Form 990, Part		ete ii tile	organizatio	ii aliswered 16	es on re) i i i i i i i i i i i i i i i i i i i	rail iv,	iii le 9, oi		
12	Is the organization an agent, trustee, custodia		diany for	contribution	e or other acce	te not in	cludod				
Ia									Yes		No
h	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII a								_ 1es] INO
D	ii res, explain the arrangement in Part Alli a	and complete the lo	illowing t	able.					Amount		
_	Designing belongs						40		711100111		
	Beginning balance						1c 1d				
	Additions during the year						1e				
	Distributions during the year						1f				
f 20	Ending balance						-		Yes		No
	_					-		🗀]
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete if										
	21 Zirae i i i i i i i i i i i i i i i i i i i	(a) Current year		rior year	(c) Two years b			rs back	(e) Four	vears	back
10	Paginning of year balance	(a) Carrent year	(6)1	nor your	(6) 1110 yours a	Juon (u)	111100 300	iro buon	(C) i oui	youro	buon
	Beginning of year balance										
	Contributions										
	Net investment earnings, gains, and losses										
	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
	Administrative expenses										
g	End of year balance		- /!: 1	l /-	-)\						
2	Provide the estimated percentage of the curre	•	, ,	g, column (a	a)) neid as:						
a	Board designated or quasi-endowment		_%								
D	Permanent endowment	%									
С	Term endowment										
•	The percentages on lines 2a, 2b, and 2c should be a sh	•									
Зa	Are there endowment funds not in the posses	ssion of the organiza	ation tha	t are neid a	ina administere	a for the			Г	Yes	No
	organization by:									163	NO
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations			ala adul - DO					3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizat								3b		
Do:	Describe in Part XIII the intended uses of the t VI Land, Buildings, and Equipment		wment t	unas.							
Fai) Dort IV	llina 11a C	Coo Form 000 F	Tort V lin	o 10				
	Complete if the organization answered								(-N.D. :		_
	Description of property	(a) Cost or o			or other		umulated		(d) Book	value	Э
		basis (investr	nent)	Dasis	(other)	uepre	ciation				
	Land										
	Buildings										
	Leasehold improvements			າ	0,560.	1	8 30	<u>. </u>	1 ^) 1	62
	Equipment			3	0,500.		.8,39	 		, <u>,</u> _	62.
	Other		V oolus	an (D) line 1	100)				1.3) 1	62.

Schedule D (Form 990) 2022

	OKE MINISIKI	LES 23	-0290100 Page 3
Part VII Investments - Other Securities. Complete if the organization answered "Yes" of	on Form 000 Dort IV line	11h Coo Form 000 Port V line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-vear market value
(1) Financial derivatives	(2) 20011 10100	(5,	a or your marker raids
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.	5 000 B 1 N/ I	11 O F 200 B 1 V II 10	
Complete if the organization answered "Yes" o		(c) Method of valuation: Cost or end	d af a a a a a l a
	(b) Book value	(c) Method of Valuation: Cost of end	a-or-year market value
(1)			
(2)			
(3)		+	
(4) (5)			
(6)		<u> </u>	
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.		•	
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a) D	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8) (9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		
Part X Other Liabilities.	10.7		
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	i.
1. (a) Description of liability	<u> </u>		(b) Book value
(1) Federal income taxes			
(2) ANNUITY OBLIGATIONS			436.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(6)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 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... X

Schedule D (Form 990) 2022

436.

Pa	rt XI	Reconciliation of Revenue per Audited Financial State		Revenue per R	eturn).
		Complete if the organization answered "Yes" on Form 990, Part IV, line				1 575 201
1		revenue, gains, and other support per audited financial statements			1	1,575,384
2		ints included on line 1 but not on Form 990, Part VIII, line 12:	اما	12,986.		
a		nrealized gains (losses) on investments		12,900.		
b		ted services and use of facilities				
c d		veries of prior year grants (Describe in Part XIII.)				
e		ines 2a through 2d			2e	12,986
3		act line 2e from line 1			3	1,562,398
4		ints included on Form 990, Part VIII, line 12, but not on line 1:				· · · · · · · · · · · · · · · · · · ·
а		tment expenses not included on Form 990, Part VIII, line 7b	4a	7,462.		
b		(Describe in Part XIII.)				
С		nes 4a and 4b	' <u>'</u>		4c	7,462 1,569,860
5		revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	
Pa	rt XII	Reconciliation of Expenses per Audited Financial State	tements With	Expenses per	Retu	rn.
		Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1	Total	expenses and losses per audited financial statements			1	1,284,309
2	Amou	ints included on line 1 but not on Form 990, Part IX, line 25:				
а	Donat	ted services and use of facilities	2a			
b	Prior y	year adjustments	2b			
С	Other	losses	2c			
d	Other	(Describe in Part XIII.)	2d			•
е		nes 2a through 2d			2e	0.
3		act line 2e from line 1			3	1,284,309
4		ints included on Form 990, Part IX, line 25, but not on line 1:	1 1	7 460		
а		tment expenses not included on Form 990, Part VIII, line 7b		7,462.		
b		(Describe in Part XIII.)	4b			7 460
		ines 4a and 4b			4c	7,462
5 Do		expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.))		5	1,291,111
		Supplemental Information.	David IV/ 15 41	on al Ob o Doubly the s	4. D	V 15 0- D+ VI
		descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;			4; Part	X, line 2; Part XI,
ines	20 and	d 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	y additional inform	ation.		
PAI	א ידי	I, LINE 2:				
	23	THE Z.				
THI	E OR	GANIZATION IS EXEMPT FROM FEDERAL IN	ICOME TAXI	ES UNDER I	NTEI	RNAL
RE	VENU	JE SERVICE CODE SECTION 501(C)(3).				
WI:	гн г	EW EXCEPTIONS, PERIODS ENDING SEPTEM	MBER 30, 2	2020 AND T	HER	EAFTER ARE
		·				
SUI	BJEC	T TO U.S. INCOME TAX EXAMINATIONS. T	THE ORGAN	ZATION DI	D NO	T HAVE ANY
UN	CERT	AIN TAX POSITIONS WHERE A LIABILITY	WAS RECO	RDED.		

SCHEDULE F (Form 990)

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.

OMB No. 1545-0047
2022

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

AUDIO SCRIPTURE MINISTRIES

Employer identification number

23-6296186

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.) (e) If activity listed in (d) (a) Region (b) Number of (c) Number of (d) Activities conducted in the region (f) Total émployees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region PROVIDE FUNDS FOR AUDIO BIBLES, BIBLE RECORDINGS, AND INTEGRAL SOUTH ASIA PROGRAM SERVICES MISSIONS. 41,855. PROVIDE FUNDS FOR AUDIO BIBLES, BIBLE RECORDINGS, AND INTEGRAL PROGRAM SERVICES MISSIONS. MOZAMBIOUE 1 72,750. PROVIDE AUDIO PLAYERS LOADED WITH THE BIBLE TRANSLATED INTO THE LOCATIONS NATIVE PROGRAM SERVICES MEXICO 91,726. 1 PROVIDE FUNDS FOR AUDIO BIBLES, PROGRAM SUPPORT, AND INTEGRAL MISSIONS. PROGRAM SERVICES KENYA 1 29,900. PROVIDE FUNDS FOR AUDIO BIBLES AND INTEGRAL SOUTHEAST ASIA MISSIONS, 3,950. 1 PROGRAM SERVICES PROVIDE FUNDS FOR MEDIA GREATER SOUTH ASIA PROGRAM SERVICES OUTREACH. 19,750. PROVIDE FUNDS FOR AUDIO DEMOCRATIC REPUBLIC VISUAL EVANGELISM OF CONGO PROGRAM SERVICES MATERIALS. 10,120. PROVIDE FUNDS FOR PARTNER'S MINISTRY EFFORTS. ETHTOPTA PROGRAM SERVICES 1,500. 1 3 a Subtotal 12 271,551. **b** Total from continuation 6,832. sheets to Part I c Totals (add lines 3a 278,383. and 3b)

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

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Schedule F (Form 990) 2022

Part I Continuation	n of Activitie	s per Regio	1.(Schedule F (Form 990), Part I, line 3	3)	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
				PROVIDE FUNDS FOR AUDIO BIBLES, PARTNERSHIP	
UGANDA	1	1	PROGRAM SERVICES	MINISTRY SUPPORT.	6,832.
Totals	.] 1	l 1			6 832

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.

(b) IRS code section and EIN (if applicable) (c) Region (d) Purpose grant		(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)	
			PROVIDE FUNDS FOR					
			AUDIO BIBLES, BIBLE					
			RECORDINGS, AND					
			INTEGRAL MISSIONS.	31,631.	WIRE	0.		воок
			PROVIDE FUNDS FOR					
			AUDIO BIBLES, BIBLE					
			RECORDINGS, AND					
		MOZAMBIQUE	INTEGRAL MISSIONS.	72,750.	WIRE	0.		воок
			PROVIDE AUDIO PLAYERS					
			LOADED WITH THE BIBLE					
			TRANSLATED INTO THE					
		MEXICO	LOCATIONS NATIVE	38,986.	WIRE	0.		воок
			PROVIDE FUNDS FOR					
		DEMOCRATIC	AUDIO VISUAL					
		REPUBLIC OF CONGO	EVANGELISM MATERIALS.	10,120.	WIRE	0.		воок
			PROVIDE FUNDS FOR					
			AUDIO BIBLES,					
			PARTNERSHIP MINISTRY					
		UGANDA	SUPPORT.	5,832.	WIRE	0.		воок

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
	Following the state of the company o

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. (c) Number of (d) Amount of (f) Amount of (g) Description of (e) Manner of (h) Method of (a) Type of grant or assistance (b) Region valuation recipients cash grant cash disbursement noncash noncash assistance (book, FMV, assistance appraisal, other) PROVIDE AUDIO PLAYERS LOADED WITH THE BIBLE TRANSLATED INTO THE LOCATIONS NATIVE LANGUAGE AND LANGUAGE MEXICO 52,740.DIRECT DEPOSIT/WIRES воок 0 PROVIDE FUNDS FOR AUDIO BIBLES, BIBLE RECORDINGS, AND INTEGRAL MISSIONS. SOUTH ASIA 10,224.WIRES BOOK 0 PROVIDE FUNDS FOR AUDIO BIBLES, PROGRAM SUPPORT, AND INTEGRAL MISSIONS. KENYA 28,100 WIRES 0 воок PROVIDE FUNDS FOR AUDIO GREATER SOUTH BIBLES AND INTEGRAL MISSIONS. ASIA 19,750.WIRES воок 0 PROVIDE FUNDS FOR MEDIA SOUTHEAST ASIA 3,950.WIRES OUTREACH. 0. воок PROVIDE FUNDS FOR AUDIO BIBLES, PARTNERSHIP MINISTRY SUPPORT. UGANDA 1,000 WIRES воок 0

Schedule F (Form 990) 2022 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 Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2022

Page 5

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

THE ORGANIZATION COMMUNICATES WITH RECIPIENT ON PLAYERS DISTRIBUTED AND PROGRAM SUPPORT PROVIDED. THE RECIPIENTS UPDATE THE BOARD ANNUALLY ON THE WORK OF THEIR MISSION PROJECTS SUPPORTED BY THE ORGANIZATION WHICH IS REVIEWED AT THE BOARD MEETING.

PART I, LINE 3:

U.S. GAAP

PART I, LINE 3, COLUMN (E):

REGION: MEXICO

(E) SPECIFIC TYPES OF SERVICES IN REGION: PROVIDE AUDIO PLAYERS LOADED WITH THE BIBLE TRANSLATED INTO THE LOCATIONS NATIVE LANGUAGE AND LANGUAGE RECORDINGS.

PART II, COLUMN (D):

REGION: MEXICO

(D) PURPOSE OF GRANT: PROVIDE AUDIO PLAYERS LOADED WITH THE BIBLE TRANSLATED INTO THE LOCATIONS NATIVE LANGUAGE AND LANGUAGE RECORDINGS.

PART III, COLUMN (A):

REGION: MEXICO

(A) TYPE OF GRANT OR ASSISTANCE: PROVIDE AUDIO PLAYERS LOADED WITH THE BIBLE TRANSLATED INTO THE LOCATIONS NATIVE LANGUAGE AND LANGUAGE RECORDINGS.

Schedule F (Form 990) 2022

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Open to Public Inspection

Employer identification number

	AUDIO SCRIPTURE MINISTRIES					23-6296186			
Pai	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 de noncash contribu	etermir	•	:s	
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 (AUDIO BIBLES &)	Х	5,202	35,202.	COMPARABLE	ITE	M S	ALE	
26	Other ()								
27	Other ()								
28	Other ()								
29	Number of Forms 8283 received by the organi	zation durin	g the tax year for o	contributions					
	for which the organization completed Form 82	83, Part V, D	Donee Acknowledg	gement 29					
							Yes	No	
30a	During the year, did the organization receive b	y contributio	on any property rep	oorted in Part I, lines 1 through	gh 28, that it				
	must hold for at least 3 years from the date of	the initial co	ontribution, and wh	nich isn't required to be used	for				
	exempt purposes for the entire holding period	?				30a		Х	
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribu	ıtions?	31	Х		
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash								
	contributions?					32a		Х	
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in o	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,				
	describe in Part II.								

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

Schedule M (Form 990) 2022

Schedule M (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

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

2022

Open to Public Inspection

Name of the organization

AUDIO SCRIPTURE MINISTRIES

Employer identification number 23-6296186

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
-RECORDING BIBLE AND BIBLE ENGAGEMENT RESOURCES IN LANGUAGES NEEDED BY

PEOPLE GROUPS AROUND THE WORLD.

-DISTRIBUTING EITHER DIRECTLY OR THROUGH OTHERS, SCRIPTURE MEDIA TO ALL WHO NEED TO HEAR.

-ENGAGING PEOPLE TO BE IN THE WORD, BE WITH JESUS, AND BE TRANSFORMED.

-SERVING AS THE HANDS AND FEET OF JESUS IN INTEGRAL MISSION SO THAT BARRIERS TO SHARING THE GOSPEL ARE REMOVED.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

INTEGRAL MISSIONS - OUR TEAMS SERVE AS THE HANDS AND FEET OF JESUS IN

INTEGRAL MISSION SO THAT BARRIERS TO SHARING THE GOSPEL ARE REMOVED

THROUGH: COMPASSIONATE CARE HOSPICE AND PALLIATIVE CARE IN THE INTERIOR

OF MOZAMBIQUE; NEW HARVEST FARM TRAINING OF SUBSISTENCE FARMERS IN

UPDATED AGRICULTURAL TECHNIQUES; AND PROVIDING DISASTER RELIEF TO HELP

IN TIMES OF EMERGENCY. OUR TEAMS DISTRIBUTE AUDIO BIBLES, RECORD AND

DISTRIBUTE BIBLICALLY-BASED AGRICULTURAL TRAINING FOR LOCAL FARMERS,

AND HEALTH CARE EDUCATIONAL RESOURCES FOCUSED ON HELPING SLOW THE

SPREAD OF HIV/AIDS, MALARIA, AND DYSENTERY.

BIBLE ENGAGEMENT - PROVIDING ACCESS TO SCRIPTURES AND TRAINING IN THE

METHODS THAT HELP PEOPLE MOST EFFECTIVELY ENCOUNTER JESUS IS CENTRAL TO

BIBLE ENGAGEMENT. INCREASING ENGAGEMENT WITH GOD'S WORK USES A VARIETY

OF STRATEGIES AND TOOLS SUCH AS AUDIO, WRITTEN, STORYTELLING, ART,

GRAPHICS, MUSIC, POETRY, SKITS, DRAMA, ETC. THE GOAL IS WHOLE LIFE

TRANSFORMATION, BASED ON GOD'S WORD.

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2

Name of the organization AUDIO SCRIPTURE MINISTRIES

Employer identification number 23-6296186

EXPENSES \$ 228,149. INCLUDING GRANTS OF \$ 76,300. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:

THE AUDITORS PRESENT THE FORM 990 TO THE AUDIT COMMITTEE FOR REVIEW AND ACCEPTANCE. THE 990 IS THEN PRESENTED TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD IS REQUIRED TO ANNUALLY DISCLOSE ANY POTENTIAL FOR CONFLICT OF INTEREST AND PROVIDE TIMELY NOTIFICATIONS OF CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD CONDUCTS AN ANNUAL PERFORMANCE REVIEW OF THE EXECUTIVE DIRECTOR

AND APPROVES COMPENSATION AFTER LOOKING AT COMPARABLE DATA FOR SIMILAR

POSITIONS AND ORGANIZATIONS TO DETERMINE REASONABLE RATE OF COMPENSATION.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,CA,CO,FL,GA,IL,KS,KY,ME,MD,MA,MI,MN,MS,NH,NJ,NY,ND,OK,OR,PA,SC,TN,UT,VI
WA,WV,WI,NM

FORM 990, PART VI, SECTION C, LINE 18:

THE ORGANIZATION'S FORM 990 IS AVAILABLE ON GUIDESTAR'S WEBSITE AND UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2(C)

Schedule O (Form 990) 2022	Page 2
Name of the organization AUDIO SCRIPTURE MINISTRIES	Employer identification number 23-6296186
THE ORGANIZATION'S AUDIT COMMITTEE ASSUMES RESPONSIBILITY	FOR OVERSIGHT
OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF	AN
INDEPENDENT ACCOUNTANT TO PERFORM THE AUDIT. THIS PROCESS	HAS NOT
CHANGED FROM PRIOR YEARS.	