

Consolidated

			Year-to-Date	NAR YTD	Districts YTD	DREAM + NAR	DREAM
Revenue			OPERATING				
WEEKEND Revenues							
4010	Application Fees Pay Pal + Districts	13,920.00		13,145.00	775.00	13,920.00	
4012	Weekend Donations	42,943.00		-	42,943.00	42,943.00	
4014	Post Dated Donations Deposited (checks)	4,683.00		-	4,683.00	4,683.00	
4016	ECHO Credit Card (weekend) Paid	33,888.70		33,888.70	-	33,888.70	
Weekend Revenue Sub-total			95,434.70	47,033.70	48,401.00	95,434.70	-
Non-Weekend Donations							
4020	Couple Donations	22,985.05		16,444.96	6,540.09	22,985.05	
4050	Echo Credit Card Donations (non-weekend)	-		-	-	-	
4052	Pay Pal Credit Card Donations	3,075.00		3,075.00	-	3,075.00	
4054	Deeper Participant Donations	-		-	-	-	
4056	Thrivent - Simply Giving (Vanco)	7,870.00		7,870.00	-	7,870.00	
4058	Thrivent Choice	3,659.00		3,659.00	-	3,659.00	
4060	10/10 Ministry	-		-	-	-	
4070	Weekend Travel Reimbursement donation	792.22		-	792.22	792.22	
4072	District/local meeting travel Reimbursement	325.15		-	325.15	325.15	
4074	NAR/ILME/I.F. Travel Reimbursement	1,171.40		866.40	305.00	1,171.40	
4076	Reimbursement donation (non-travel)	286.25		-	286.25	286.25	
4600	Donations to Dream Fund (Transfer on Consolidated)	-		846.20	-	-	
Non-Weekend Donations Sub-total			40,164.07	31,915.36	8,248.71	40,164.07	-
Miscellaneous Revenue							
4100	Area Fund Raisers	646.24		121.24	525.00	646.24	
4120	District Fund Raisers	-		-	-	-	
4200	Reunion/NAR Fund-Raisers	28.79		28.79	-	28.79	
4400	Bank Interest/Dividends	1.43		0.90	0.53	3.86	2.43
4500	Returned Checks ??? Is this uncashed CTBF?	(250.00)		-	(250.00)	(250.00)	
4520	Credit Cards Rejected??? ECHO totals include??	-		-	-	-	
4650	Miscellaneous	248.75		-	248.75	248.75	
Miscellaneous Revenue sub-total			675.21	150.93	524.28	(1,767.37)	loss in Value (2,442.58)
Revenue Total			136,273.98	79,099.99	57,173.99	133,831.40	(2,442.58)

Expenses		OPERATING				
ADMINISTRATIVE		2014 Totals	NAR YTD	Districts YTD		
6100	Area Expenses (Petty Cash)	-	-	-	-	-
6110	Bank Charges	1,038.40	1,028.40	10.00	1,088.40	50.00
6120	Echo/Intuit Credit Card Processing Fees	66.80	66.80	-	66.80	-
6140	Pay Pal Processing Fees	1,143.76	1,143.76	-	1,143.76	-
6150	Postage/Shipping - non-weekend	92.00	-	92.00	92.00	-
6160	Printing & Copying - non-weekend	320.35	-	320.35	320.35	-
6170	Website Development and Maintenance	-	-	-	18,001.40	18,001.40
6175	Internet Fees	300.00	300.00	-	300.00	-
6180	Tax Return Preparation	-	-	-	-	-
6182	Insurance/Bonding	-	-	-	-	-
6184	WWME Licensing	771.00	771.00	-	771.00	-
6186	Washington State Corp. registration	-	-	-	-	-
6190	Administrative Supplies non-weekend	-	-	-	-	-
6199	Other Miscellaneous (Explain on page 2)	626.50	-	626.50	626.50	-
Operating Expense Sub-Total		4,358.81	3,309.96	1,048.85	22,410.21	18,051.40
MEETINGS						
6200	Reunion	-	-	-	-	-
6320	District Facility	2,328.82	-	2,328.82	2,328.82	-
6322	District Travel	856.70	-	856.70	856.70	-
6324	District Pastoral Supply	-	-	-	-	-
6330	NAR Facility	4,809.91	4,809.91	-	4,809.91	-
6332	NAR Travel	4,828.47	4,828.47	-	4,828.47	-
6334	NAR Pastoral Supply	-	-	-	-	-
6340	Interfaith Meeting Travel	1,472.18	1,472.18	-	1,472.18	-
6342	Interfaith Membership Expense (Foundation)	200.00	200.00	-	200.00	-
INTERNATIONAL						
6400	ILME Travel & Lodging	3,039.38	3,039.38	-	3,039.38	-
6410	ILME Meeting Facility Expense	-	-	-	-	-
6420	ILME Meeting Administrative Expense	-	-	-	-	-
TRAINING						
6800	Deeper Facility	-	-	-	-	-
6810	Deeper Travel	-	-	-	-	-
6850	Deeper Pastoral Supply	-	-	-	-	-
Meeting & Deeper Sub-total		17,535.46	14,349.94	3,185.52	17,535.46	-
PROGRAM						
6900	Weekend Program Facility Expense	75,463.66	-	75,463.66	75,463.66	-
6920	Weekend Presenter Travel Expense	2,966.80	-	2,966.80	2,966.80	-
6940	Weekend Pastoral Supply Expense	99.16	-	99.16	99.16	-
6950	Weekend postage, Printing & Supplies	3,925.09	174.47	3,750.62	3,925.09	-
Weekend Sub-total		82,454.71	174.47	82,280.24	82,454.71	-
TOTAL EXPENSES		104,348.98	17,834.37	86,514.61	122,400.38	18,051.40
		OPERATING			NAR + DREAM	
Revenue less Expenses		31,925.00	61,265.62	(29,340.62)	11,431.02	(20,493.98)

NAR Operating Accounts 2015

	12/31/2014	2015 Balances	Change
Pay Pal Balance \$	22,207.14	\$38,315.57 \$	16,108.43
Wells Fargo Balance CKG + Svgs \$	34,564.92	\$56,249.83 \$	21,684.91
District 1 Balance \$	-	\$	-
District 2 Balance \$	3,710.67	\$3,442.18 \$	(268.49)
District 3 Balance \$	3,048.33	\$679.51 \$	(2,368.82)
District 4 Balance \$	6,306.87	\$3,075.84 \$	(3,231.03)
		\$	-
Total Operating Balance \$	69,837.93	\$ 101,762.93 \$	31,925.00
		Sheet shows	31,925.00

Actual balance less calculated balance Difference	\$	-
Deduction for transfer of 2014 & 2015 DREAM Fund donations	\$	1,342.40

Final LME Operating account increase 2014-2015 30,582.60

WORLDWIDE MARRIAGE ENCOUNTER
Lutheran North American and European Regions
WEEKEND STATISTICS - YEAR ENDING 2015

Year 2015						Deeper Notes		
YTD at end of 4th Quarter								
Indicate Quarters Being Reported		Original Weekends		Presenting Strength	Presenting Strength		Deeper Weekends	
	# of Weekends	Lay Couples Attending	Clergy Couples Attending	Lay Couples	Clergy Couples	# of Deeper	Lay Couples Attending	Clergy Couples Attending
Inside USA & Canada								
By Country:								
				Weekend Ready				
USA	21	190	13	41	14			
Canada	1	6		Can. Included above				
North American Region Summary Total	22	196	13	41	14	0	0	0
Outside USA & Canada								
By Country:								
Denmark	1	7		3	0			
Finland	7	204	4	21	8			
Iceland	3	60	61	12	3			
Norway	3	56	0	5	3			
Sweden	2	20	1	5	3			
Europe Summary Total	16	347	66	46	17	0	0	0
Brazil	Not Reported							
Grand Total	38	543	79	87	31	0	0	0

North American Region had 7 fewer weekends and 56 fewer couples than in 2014.

North American PC Strength increased from 2014 which may be a result of more couples completing re-writes to new outlines.

Average couples per weekend in NAR remained statistically the same at 8.9 couples per weekend.

E.R. couples per weekend was 21.6 which is a slight increase from 2014 .

Average couples per weekend= NAR 8.68, E.R. 20.77 This is the first year North America dropped below an average of 10 couples per weekend.

Return of Organization Exempt From Income Tax

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.
- ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2015 calendar year, or tax year beginning **2015**, and ending **20**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization **Call To Be Family**
 Doing business as **Lutheran Marriage Encounter**
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
4420 51st Ave NE Attn Carl Presley
 City or town, state or province, country, and ZIP or foreign postal code
Seattle, WA 98105-4933

D Employer identification number
91-1003177

E Telephone number
919-797-0501

G Gross receipts \$ **136,274**

F Name and address of principal officer: **Donald Christiansen**
2539 Larry Tim Dr, Saginaw, MI 48601

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ **www.ILME.org, www.godlovesmarriage.org**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1992** **M** State of legal domicile: **WA**

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: Strengthen and renew marriage relationships within a Christian environment		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	10
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	0
	6	Total number of volunteers (estimate if necessary)	6	200
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 48,056	Current Year 40,835
	9	Program service revenue (Part VIII, line 2g)	121,525	95,435
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,608	4
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,377	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	177,566	136,274
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	200	200
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	207,143	122,200
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	207,343	122,400	
19	Revenue less expenses. Subtract line 18 from line 12	(28,857)	13,874	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 196,632	End of Year 207,569
	21	Total liabilities (Part X, line 26)	-0-	-0-
	22	Net assets or fund balances. Subtract line 21 from line 20	196,632	207,569

Part II Signature Block

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

Sign Here

Signature of officer _____ Date _____

Type or print name and title _____

Paid Preparer Use Only

Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____

Firm's name ▶ _____ Firm's EIN ▶ _____

Firm's address ▶ _____ Phone no. _____

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No