## 990 Form

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

20**05** 

Open to Public

Department of the Treasury Internal Revenue Service . The organization may have to use a copy of this return to satisfy state reporting requirements.

A	For t	he 2005 c	alendar	year, or tax year beginning	, 2005, ai	nd ending		, 20
8	Check if	appiicable:	Please	C Name of organization			D Employ	ver identification number
	Addres	s change	use IRS label or	Three Angels Broadcastin			37 : 1	179056
	Name i	change	print or type.	Number and street (or P.O. box	if mail is not delivered to street addre	ess) Room/suite	E Teleph	one number
	Initiat ri	eturn	See	3391 Charley Good Rd., P	O Box 220		{ 618	) 627-4651
$\bar{\Box}$	Final re	eturn :	Specific Instruc-	City or town, state or country, ar	nd ZIP + 4		F Accountin	ig method: Cash Accrual
	Amend	ed return	tions.	West Frankfort, IL 62896				ner (specify) >
	Applica	tion pending	• Sec	ction 501(c)(3) organizations and	4947(a)(1) nonexempt charitable	<b>I</b>		to section 527 organizations.
				sts must attach a completed Sche	edule A (Form 990 or 990-EZ).	1		1 for affiliates? 🔲 Yes 🗹 No
<u>G</u>	Websit	te: ➤ 3abı	n.org			1 ` '		er of affiliates
J	Organi	zation type	i (check d	only one) ▶	nsertino.) 4947(a)(1) or 527	H(c) Are all at		cted? Yes No See instructions.)
				rganization's gross receipts are nor		H(d) is this a se		
	organiz	ation need	not file a	return with the IRS; out if the orga	mally not more than \$25,000. The nization chooses to file a return, be	organizatio	on covered b	y a group ruling? Tyes No.
	sure to	file a compl	lete returr	n. Some states require a complete	return.		emotion Nu	
	Cross		A at at 11	- Ch				he organization is not required
	ares are I			s 6b. 8b. 9b, and 10b to line 12				orm 990, 990-EZ, or 990-PF).
L	,				Net Assets or Fund Bala	ances (See th	e instruc	ctions.)
	1			gifts, grants, and similar am	and the second s			
	а	Direct p			<u>1a : </u>	14,060,2	75	
	b			support			_	
	C				1c			
	i d			1a through 1c) (cash S1	1d 2	14,060,275		
	2 3	Program service revenue including government fees and contracts (from Part VII. line 93)  Membership dues and assessments  Interest on savings and temporary cash investments						1,162,106
	4							5 470
	5			ings and temporary cash inv interest from securities	estments		5	6,470
<u>-</u>	6a	Gross re				44,8	} <del></del>	
	b			Dancac		2,7	<u> </u>	
•		b Less: rental expenses 6b 2,757 c Net rental income or (loss) (subtract line 6b from line 6a)					6c	42,044
đi	7							
Revenue	: - 8a			from sales of assets other	7			
Je V	;	than inve			50,397 8a	11,4	71	
-	b			er basis and sales expenses.		10,3		
					(1.328) 8c ±	1,1:	22	
				i) (compine line 8c, columns (	A) and (B))		8d	(206)
	9				any amount is from gaming, che	ck here 🕨 🗀		
	а				of			
	ļ	contribut	tions re	ported on line 1a)	9a		_	
	b	Less: dir	rect exp	censes other than fundraising	g expenses 9b		_	
i	С	Net inco	me or (	loss) from special events (si	ubtract line 9b from line 9a)		9с	
	10a			inventory, less returns and a		864,3		
	b	Less: co	st of go	oods sold	10b	609,66	59	
		Gross pro	ofit or (lo		ach schedule) (subtract line 10b		10c	254,692
	11 12	Other rev	venue (	from Part VII, line 103)			11	(568,784)
					8d, 9c, 10c, and 11)		12	14,956,597
S	13			es (from line 44, column (B))			13	10,511,457
Expenses	14	ivianager	ment ar		umn (C))		15	4,927,633
Š	15		undraising (from line 44, column (D)) ayments to affiliates (attach schedule)					
ا "	16 17	Total ex	s io all nenses	illiates (aπach schedule) : (add lines 16 and 44 colum			16	45 420 000
9					nn (A))		17	15,439,090
Net Assets	18		Excess or (deficit) for the year (subtract line 17 from line 12)					482,493 19,952,817
Ĭ,	19 20	O Other changes in act accept at Segrating of year (noth line 75, colonial (A))				-	19	13,332,017
ž	21	Net asset	कापुर्द्ध । Is or fur	in het assets or fund balance no balances at end of year (co	es (attach explanation)		20	19,470,324
					sinomic mico ru, ro, anu ZVI		1 41 )	12,710,247

	Do not include amounts reported on line		(A) Total	(B) Program	(C) Management	
	6b, 8b, 9b, 10b, or 16 of Part I.		( ) ( )	services	and general	(D) Fundraising
22	Grants and allocations (attach schedule)		1			
	(cash S noncash S)  If this amount includes foreign grants, check here ▶ □	22				
23	Specific assistance to individuals (attach	<del> </del>				:
	schedule)	23				
24	Benefits paid to or for members (attach schedule)	24			·	
25	Compensation of officers, directors, etc.	25	237,027	35,472	201,555	•
26	Other salaries and wages	26	3,431,919	1,565,081		
27	Pension plan contributions	27	0,401,515	1,500,001	1,000,030	
28	Other employee benefits	28	<del></del>			· · · · · · · · · · · · · · · · · · ·
29	Payroll taxes	29 !		<del></del> .	, , , , , , , , , , , , , , , , , , ,	
30	Professional fundraising fees	30	235,090		235,090	
31	Accounting fees	31	28,361		28,361	
32	Legal fees	32	177,760		177,760	
33	Supplies	33	392,253	143,634		
34	Telephone	34	159,058	159,058	240,010	
35	Postage and shipping	35	501,094		501,094	
36	Occupancy	36	394,674	215,193	<del></del>	
37	Equipment rental and maintenance	37	3,448,036	3,279,518	168,518	
38	Printing and publications	38	153,922	153,922		
39	Travel	39	1,387,687	1,094,779	292,908	
ю	Conferences, conventions, and meetings	40		•		
11	Interest	41	6,038		6,038	
2	Depreciation, depletion, etc. (attach schedule)	42	2,060,396	2,060,396	:	
13	Other expenses not covered above (itemize):			· · · · · · · · · · · · · · · · · · ·	i	
a	Statement 2	43a	2,825,775	1,304,404	1,021,371	
.b		43b		:	1	
С	***************************************	43c	;		i	
d	***************************************	43d				• • •
е	***************************************	43e				
f		43f				
g		43g			:	
	Total functional expenses Add lines 22 through 43. (Organizations completing					
	columns (B)-(D), carry these totals to lines 13-15)				i	
		44	15,439,090	10,511,457	4,927,633	
oint	Costs. Check ► ☐ if you are following SOP	98-2.				
c ai	ny joint costs from a combined educational campaign	and fundr	aising solicitation ri	eported in (B) Prod	gram services? . > Program services	L Yes L N

Part III Statement of Program Somio	e Accomplishments (See the instructions.)
Form 990 is available for public income	Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's

org a	clients served, publications issued, etc. Discuss a panizations and 4947(a)(1) nonexempt charitable true  Production and distribution of religious productions.	se? > a achievements in a clear and concise manner. State the number achievements that are not measurable. (Section 501(c)(3) and (4) sts must also enter the amount of grants and allocations to others.)  gramming for electronic distribution throughout the	Program Se Expense (Required for 501th (4) orgs., and 494 trusts; but option others.)
	world.	granting for electronic distribution throughout the	Quiers.)
	*********		
	12/17/19/19/19/19		
	(Grants and allocations \$		
b.		) If this amount includes foreign grants, check here >	10.54
			10,51
-			
	***************************************		
76	Conta Illiano de la contacta de la c		
	Grants and allocations S	1 M blue and	
٠.		) If this amount includes foreign grants, check here	
٠.			
٠.	***************************************	***************************************	
	***************************************		
ïĠ	FOOT	***************************************	
10	rants and allocations S	1 If this are	
٠		) If this amount includes foreign grants, check here	
- <b>.</b> .	*******************************		
	***************************************	***************************************	
	***************************************	***************************************	
(Gr	ants and allocations \$	***************************************	
Oth	Ter program	) If this amount include 4	
Gra	ner program services (attach schedule)	) If this amount includes foreign grants, check here >	
	ants and allocations \$ sal of Program Service Expenses (should equa	) If this amount in a single	
	di di Frogram Service Expenses (should a	) If this amount includes foreign grants, check here	

	art IV						rage 4
	Note:	Where required, attached schedules and amounts column should be for end-of-year amounts only.	within the	description	(A) Beginning of year		(B) End of year
	45				766,858	45	1,043,070
	46	Savings and temporary cash investments .			1,822,424	46	20,410
	47-	As as well as a simple	47a	204 977			•
		Accounts receivable  Less: allowance for doubtful accounts	47b	204,877	164,557	470	204.077
		Less, allowance for doubtful accounts.	4/0			476	204,877
	48a	Pledges receivable	48a	669,592			
	,	Less: allowance for doubtful accounts	48b		517,185	48c	669,592
	49	Grants receivable				49	
	50	Receivables from officers, directors, truste (attach schedule)				50	
sts	51a	Other notes and loans receivable (attach schedule)	51a				
ssets	b	Less: allowance for doubtful accounts		51c			
⋖	52	Inventories for sale or use			1,313,507	52	1,397,326
	5 <b>3</b> .			<u>.</u> <u>.</u> . <u>-</u>	939,847		450,706
	54	Investments-securities (attach schedule)	. >	Cost 🗹 FMV 🕹		54	1,104,153
	55a	Investments—land, buildings, and equipment: basis	55a	3,120,000			
	: <b>b</b>	Less: accumulated depreciation (attach		•			
	. 50	schedule)	55b	<u> </u>	3,387,100		3,120,000
	: 56	Investments—other (attach schedule)	57a	29,173,455	<u> </u>	56	
		Land, buildings, and equipment: basis Less: accumulated depreciation (attach	3/4	29,173,455			
		schedule)	57b	15,605,753	14,549,578	57c	13,567,702
	58	Other assets (describe ▶		)	31,301,209	58	35,578,962
<u>-</u>				:	į	į	
	59	Total assets (must equal line 74). Add lines			54,762,265		57,156,798
٠	60	Accounts payable and accrued expenses			831,841		1,124,241
	61 62	Grants payable			27.460	61	6.965
ŝ	63				21,400	02	0,303
abilities	63	Loans from officers, directors, trustees, and schedule)	-		1	63	
abi	64a	Tax-exempt bond liabilities (attach schedule)			;	64a	
Ξ		Mortgages and other notes payable (attach			30,000	64b i	40,000
	65	Other liabilities (describe >		)	33,920,147	65	36,515,269
	66	Total liabilities. Add lines 60 through 65			34,809,448	66	37,686,475
s	Orga	nizations that follow SFAS 117, check here > 67 through 69 and lines 73 and 74.	· 🗌 and	complete lines			
Fund Balances	67	Unrestricted			15,792,142	67	14,863,131
alar	68	Temporarily restricted			4,160,675		4,607,192
80	69	Permanently restricted				69	
Š	Orga	nizations that do not follow SFAS 117, check	here 🕨	and			
	70	complete lines 70 through 74.				70	
S OF	70 71	Capital stock, trust principal, or current fund.	S			71	
set		Paid-in or capital surplus, or land, building, a Retained earnings, endowment, accumulated			<u> </u>	72	
Net Assets	73	Total net assets or fund balances (add line					
Ž		70 through 72;				.	***
		column (A) must equal line 19; column (B) m			19,952,817		19,470,323
!	<del>, ,</del>	Total liabilities and net assets/fund balance	s. Add lin	es bb and /3.	54,762,265	74	57,156,798 Form 990 (2005)

	rt IV-A	Reconciliation of Revenue prostructions.)	oer Au	dited Financial Stater	ments	With Rev	enue pe	er Ret	um (See	the
a b	Total rev Amounts	enue, gains, and other support p included on line a but not on Pa	er audi art I, lin	ted financial statement	s			а		15,569,023
1	Net unre	alized gains on investments .			b1					
2	Donated	services and use of facilities .			b2			1	-	
3	Hecoveri	es of prior year grants			b3			1		
4	Other (sp. Stateme	ecify):		************	b4		612,426			
	Add lines	b1 through b4		***************************************	<b></b>			ь		612,426
c	Subtract	line b from line a						c		14,956,597
ď	Amounts	included on Part I, line 12, but r	not on i	ine a:						1-1000,001
1	Investme	nt expenses not included on Par	t I, line	6b	[ tb ]	_		]		
2	Other (sp	ecify):				-		] [		
				*-*	d2					
_		d1 and d2						đ		
e	TOTAL PEV	enue (Part I, line 12). Add lines of				· · ·	. , >	е		14,956,597
		Reconciliation of Expenses	per Au	dited Financial State	ments	With Exp	oenses p	er Re	eturn	
a	lotal exp	enses and losses per audited fin	ancial s	statements				а		16.051.516
b	Amounts	included on line a but not on Pa	rt I, line	17:				j l		
1 2	Donated:	services and use of facilities			b1		<del></del>			•
3	Losson so	adjustments reported on Part I.	line 20			<del></del>		<u> </u>		
4	Other (so	ported on Part I, line 20			_b3 !		<del></del>			
7	Statemen	ecify):			b4		640 400			
							612,426			640 400
С		line b from line a		$\bullet = \bullet = \bullet = \bullet = \bullet = \bullet = \bullet = \bullet$				b		612,426 15,439,090
đ		included on Part I, line 17, but n						С		10,439,090
1		nt expenses not included on Part			: d1			}		
_2	Other (spe	ecify):								
-				***************************************						
•	Add lines	d1 and d2						d		
e • 7		enses (Part I, line 17). Add lines			·		, , ▶	e		15,439,090
Een		Current Officers, Directors, Tra or key employee at any time during	ustees the yea	, and Key Employees ar even if they were not a	i (List ea comper	ich persor Isatea.) (Se	n who was ee the ins	s an off <i>tructio</i>	ficer, direc ns.)	ctor, trustee.
		(A) Name and address		(B) Title and average nours per week devoted to position	(If not ;	pensation paid, enter 0)	penelit blar	ons to emp is & caleri ation plans	red and d	cense account ther allowances
state	ment 9									
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Form 990 (2005)

Pa	rt V-A Current Officers, Directors, Trustee	s, and Key Employe	es (continued)			Yes	s No	
75	<ul> <li>Enter the total number of officers, directors, and to</li> </ul>			n business at board	12.	628		
	meetings		<b>≻</b>	11	1			
l	Are any officers, directors, trustees, or key employees listed in Schedule A, Part I, or his contractors listed in Schedule A, Part II-A or relationships? If "Yes," attach a statement that id	ghest compensated p II-B, related to each	orofessional and other through	other independent family or business	75b			
Ć	c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part II, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? Note. Related organizations include section 509(a)(3) supporting organizations.							
	If "Yes," attach a statement that identifies to organization and the other organization(s) including amounts paid to each individual between the control of	and describes t	he compensati	thip between this on arrangements,				
	Does the organization have a written conflict of i	nterest policy?			75d		1	
Le	Former Officers, Directors, Trustees, and officer, director, trustee, or key employee reperson below and enter the amount of comp	eceived compensation of	r other benefits (de	escribed below) during	a the v	/ear. li	former ist that	
	(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee penefit plans & cerefred compensation plans	acco	E) Expe	d other	
	da Shelton 5 Renwick Dr., Springfield, IL 62704		82,922					
		:	:					
		-1			:			
<u>-</u>			:					
+								
			:		:			
			:		:			
			:	•				
Pa	Common (See the instruction	s.)				Yes	No	
76	Did the organization engage in any activity not predescription of each activity	reviously reported to t		' attach a detailed	76		~	
77	Were any changes made in the organizing or gove If "Yes," attach a conformed copy of the changes	erning documents but		the IRS?	77			
	Did the organization have unrelated business grothis return?	ss income of \$1,000 c			78a	:	~	
	If "Yes," has it filed a tax return on Form 990-T fo				78b	l 	-	
	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement						V	
	Is the organization related (other than by associated common membership, governing bodies, trusted organization?	es, officers, etc., to	any other exem	ipt or nonexempt	80a		<u>'</u>	
b	If "Yes," enter the name of the organization ▶				ξ 1, [V]		i	
91a b	Enter direct and indirect political expenditures. (Se Did the organization file Form 1120-POL for this year.)	e line 31 instructions.	is □ exempt or ) 81a	0	81b	16 . 1911-16	7	

82a Did the organization receive donated services or the use of			age 7
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge but "Yes" you may in it.	e		ار
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part II or as an expense in Part II.	82a	1 (5.1)	17.00
			ر ا چود در در
The organization comply with the training	-	<b>1</b>	
b Did the organization comply with the disclosure requirements for returns and exemption applications?  84a Did the organization solicit any contributions or gifts that were not tax determined to quid pro quo contributions?	83a		
84a Did the organization solicit any contributions or gifts that were not tax deductible?  b If "Yes," did the organization include with average all the contributions of the con	83b	-	
gifts were not tax deductible?			<u> </u>
19/17/ 19/ Uf (D) Officializations = 14/-	845	-	
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?  If "Yes" was answered to either 85a or 85b, do not seembly the see	85a	<del>-                                    </del>	
If "Yes" was answered to either 95e as 350	85b		
received a waiver for proxy tax owed for the prior year.			
C bodes, assessments, and similar amounts (	1 1	- 1	
The control and control and control		-	
33. Take Hondeductible amount of north	-		
f Taxable amount of loboying and political expenditures (line 85d less 85e)  g Does the organization elect to pay the pasting 2000.	-		
	05		
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f following tax years?	85g	<del>- '</del>	
to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the	-	•	
86 501(c)(7) orgs Enter: a Initiation (	85h		
86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on	0011	$\dashv$	
b Gross receipts, included on line 12 fee		1	
	İ		
		ĺ	
sources against amounts due or received from them.)			
at any time dumn the year did at	İ	}	
At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or and 301.7701-3? If "Yes," complete Part IX  89a 501(c)(3) organization under Regulations sections 301.7701-2			
- 30 (C/C) Uluanizatione Enter: A	88	1	<u>,</u>
section 4911 ► ; section 4912 ► ; section 4915 ► ; section 4955 ►		1	
b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4955 ▶  during the year or did it become aware of an excess benefit transaction a statement explaining and the sta	ļ	1	
a choin the each transaction	:	1	
S SAME AND OF THE INDEXES OF THE PROPERTY OF T	9ь		_
under sections 4912, 4955, and 4958			_
= 4. (c), dillouti di tay on lice co			
The restrict of CDDV of this return in the			_
Y NUMBER OF PROJUCTOR AND A STATE OF THE STA			
91a The books are in a service and the books are in a service			
91a The books are in care of ► Larry Ewing  Located at ► 3391 Charley Good Road, West Frankfort, IL  b At any time during the calendar year did to	130		-
b At any time during the calendar year, did the organization have as the state of t	-4651 20	• • - •	
b At any time during the calendar year, did the organization have an interest in or a signature or other authority account?  ZIP + 4 ▶ 62890-02  Over a financial account in a foreign country (such as a bank account securities accounts)	~·····	• • • • • •	
The securities according of other financial	Yes	No	
91 co, citier the name of the foreign	b	110	•
If "Yes," enter the name of the foreign country  See the instructions for exceptions and filing requirements for Form TD 5 on 20 4 5			
and Therefore Accounts.			
At any time during the colondary			
If "Yes," enter the name of the fearer, did the organization maintain an office outside of the United Channel	c		
c At any time during the calendar year, did the organization maintain an office outside of the United States?  If "Yes," enter the name of the foreign country   Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  92	<u>c    </u>		

Part	Analysis of Income-Producing	Activities (See th	e instruction	s.)		
Note:	Enter gross amounts unless otherwise		iness income	<del></del>	section 512, 513, or 514	(E)
indica	ted.	(A) Susiness code	(B) Amount	(C)	(D)	Related or exempt function
93 a	Program service revenue:  Production and Distribution	Cusiness code	Amount	Exclusion co	del Amount	income
a b	1 Toddellon and Distribution			<del></del>	<u> </u>	1,162,106
c			<del></del>	<del> </del>		<del> </del>
ď		-			<del></del>	<u>-</u>
e		_ <del>   </del>		-		
f	Medicare/Medicaid payments			<del>                                     </del>		<del>                                     </del>
g	Fees and contracts from government agenci			_		<del> </del>
94	Membership dues and assessments					
95	Interest on savings and temporary cash investmen			i	T	6,470
96	Dividends and interest from securities					
97	Net rental income or (loss) from real estate:			_	- i	Í
а	debt-financed property	1 .				İ
b	not debt-financed property			!	į.	42,044
98	Net rental income or (loss) from personal property	ty		!	:	İ
99	Other investment income		·-··	1		!
100	Gain or (loss) from sales of assets other than invento	ory			<u> </u>	(206)
101	Net income or (loss) from special events	!		ļ	į	<u> </u>
102	Gross profit or (loss) from sales of inventory	· -		<u> </u>	i	254,692
103	Other revenue: a				25	!
b	Change in value split interest agreements Other	<u> </u>		<u> </u>		(626,366)
C	Other	<del>-</del>		:		57,582
d			<del></del>	·		:
e 104	Coletated (and and and and and and and and and and			<del>-</del>	<del>-</del>	200 200
105	Subtotal (add columns (B), (D), and (E)) Total (add line 104, columns (B), (D), and (E)	<u> </u>	-		!	896,322 896,322
	Line 105 plus line 1d, Part I, should equal th	)) le amount on line 13	Part		· · · •	690,322
Part\	Relationship of Activities to the A	ccomplishment of	Fremat Pur	2000 (See	the instructions )	
Line N						ancomplishment
	of the organization's exempt purposes (o	ther than by providing	funds for such	purposesi.	importantly to the	accompliantient
	Statement 11					
	·			-		
	1					· · · · · · · · · · · · · · · · · · ·
Part	The state of the s	sidiaries and Disre	egarded Entit	ies (See the	instructions.)	
	(A) Name, address, and EIN of corporation,	(10)	(C)		(D)	(E)
		wnership interest	Nature of ac	ctivities	Total income	End-of-year assets
		<u>%</u>				
		%				
		%				
		%i			<u> </u>	
Part )	Information Regarding Transfers Ass	ociated with Person	al Benefit Co	ntracts (See	the instructions.)	<del></del>
(a) (	Did the organization, during the year, receive any funds.	directly or indirectly, to pa	ay oremiums on a	personal bene	iit contract?	Yes 🗌 No
(b)	Did the organization, during the year, pay pre	emiums, directly or in	odirectly on a	personal b	enefit contract? [	∐ Yes ☐ No
Note	: If "Yes" to (b), file Form 8870 and Form 4;					
	Under penalties of penury, I declare that I have exami and belief, it is true, correct, and complete. Declarati	ned this return, including in of preparer other than	accompanying sci	hedules and sta	itements, and to the be	est of my knowledge
Please	1 7 5	-	· omeer) is eased	on all inclinat	-/	nas anj knombago. - 🗡
Sign	Rally N' Cumo	<del></del>		!	2/26/0	<u> </u>
Here	Signature of officer  Larry Ewing - Treasurer				Date	
	Type or print name and title,	<del></del>				
	1		To .	LObert 18		
aid	Preparer's signature		Date	Check if self-	Preparer's SSN or I	PTIN (See Gen, Inst. 'M)
reparer	Firm's name (or yours )		<u> </u>	employed ➤		
lse Only	if self-employed).	<del></del>		EIN	<u> </u>	
	address, and ZIP = 4			Phon	e no. ➤ 1 :	

### SCHEDULE A

(Form 990 or 990-EZ)

### Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

or 4947(a)(1) Nonexempt Charitable Trust
Supplementary Information—(See separate instructions.)

2005

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.") (d) Contributions to (a) Name and address of each employee paid more (b) Title and average hours (e) Expense mployee benefit plans & account and other than \$50,000 per week devoted to position deferred compensation allowances Moses Primo Director of Engineering 64.573 PO Box 39, Thompsonville, IL 62890 Total number of other employees paid over \$50,000 Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms), If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation Union Bank of California - Investment Management 63,876 PO Box 85243, San Diego, CA 92186 Total number of others receiving over \$50,000 for professional services , , , , . . . . 11 Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.) (a) Name and address of each independent contractor paid more than 550,000 (b) Type of service (c) Compensation Total number of other contractors receiving over \$50,000 for other services

Pa	ırti	Statements About Activities (See page 2 of the instructions.)	<u> </u>	Yes	age No
1	at or Pa	uring the year, has the organization attempted to influence national, state, or local legislation, including any tempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities   (Must equal amounts on fine 38, art VI-A, or line i of Part VI-B.)	1	,	~
	O: or	rganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other ganizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of e lobbying activities.			
2	su wi ov	uring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any obstantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or the any taxable organization with which any such person is affiliated as an officer, director, trustee, majority orner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the ansactions.)			
а	Sa	ale, exchange, or leasing of property?	2a		V
b		ending of money or other extension of credit?	2b	i	V
c		mishing of goods, services, or facilities?	2c		~
d		syment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	i	V
е		ansfer of any part of its income or assets?	2e		~
3а	Oc	you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how u determine that recipients qualify to receive payments.)	3a		V
b		you have a section 403(b) annuity plan for your employees?	3b		~
С	Du	uring the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c		V
4a	Die	d you maintain any separate account for participating donors where donors have the right to provide advice on a use or distribution of funds?	_4a		V
d	Do	you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	:	V
Pa	أاغد	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
The	orga	anization is not a private foundation because it is: (Please check only ONE applicable box.)			
5		A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6		A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii),			
8	$\Box$	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hosp and state ▶	ital's r	name,	city
0		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Secti (Also complete the <b>Support Schedule</b> in Part IV-A.)			
1a		An organization that normally receives a substantial part of its support from a governmental unit or from the gener 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	ai publ	ic. Se	ction
		A community trust, Section 170(b)(1)(A)(vi), (Also complete the Support Schedule in Part IV-A.)			
2		An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, a	nd gro	ss rec	eipts
		from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33% from gross investment income and unrelated business taxable income (less section 511 tax) from businesses organization after June 30, 1975. See section 509(a)(2), (Also complete the Support Schedule in Part IV-A.)	5% of acqui	its suc red by	pon the
3		An organization that is not controlled by any disqualified persons (other than foundation managers) and support described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section	509(a)	(2). CI	tions neck
			ype 3	_	
		Provide the following information about the supported organizations. (See page 6 of the instructions.)			
		(a) Name(s) of supported organization(s)  (b) Line from	above		
			_		
4		An organization organized and operated to test for public safety. Section 509(a)(4), (See page 6 of the instruction	ons.)		

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. Calendar year (or fiscal year beginning in) (a) 2004 (b) 2003 (c) 2002 (d) 2001 (e) Total Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.). 14,671,736 12,918,511 17,236,402 58,348,366 16 Membership fees received 13,521,717 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose 1,924,281 2,310,642 1,998,731 1,794,201 8,027,855 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 37,076 48,917 52,416 70.437 Net income from unrelated 208,846 business activities not included in line 18. 20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the oublic without charge 22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets Total of lines 15 through 22 16,633,093. 15,278,070; 19,287,549 15,386,355 66,585,067 24 Line 23 minus line 17 14,708,812 12,967,428 17,288,8181 58,557,212 13,592,154 25 Enter 1% of line 23 166,331 152,781 192,875 153,864 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26 26a \_\_b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts > 26b c Total support for section 509(a)(1) test: Enter line 24, column (e) 26c d Add: Amounts from column (e) for lines: 18 \_\_\_\_\_\_ 19 \_ 22 \_ 266 \_\_\_\_\_ 26d e Public support (line 26c minus line 26d total) f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26e : 26f Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2004) 185,984 (2003) 206,809 (2002) 317,048 (2001) 261,527 b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5.000. (Include in the list organizations described in lines 5 through 11b. as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess (2004) **570**,69**4** (2003) **563**,54**0** (2002) **182**,84**0** (2001) **379**,400 17 \_\_\_\_ 8,027,855 20 \_ 27c 66,376,221 d Add: Line 27a total. 971,368 and line 27b total . 27d 2,667,842 e Public support (line 27c total minus line 27d total). 27e 63,708,379 f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) . . . > 27f 66,585,067 Public support percentage (line 27e (numerator) divided by line 27f (denominator)) . . . . . . h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). % Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004. prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

E	Private School Questionnaire (See page 7 of the instructions.)  (To be completed ONLY by schools that checked the box on line 6 in Part IV)	<u>-, .</u>		aye 4
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?  If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	31		
		}		
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
þ	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its benaff to solicit contributions?	32d	!	
	If you answered "No" to applied the opens places out to "If you			
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
		i		
33	Does the organization discriminate by race in any way with respect to:			
a 	Students' rights or privileges?	33a	- 1	
_p	Admissions policies?	335		
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e	į	
f	Use of facilities?	33f	<u> </u>	
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		İ	
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
ь	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
55	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

E	(To be completed ONLY by a	Electing Public an eligible organ	Charities (See	page 9 of	of the 768)	instructio	ns.)	
Ch	eck > a  if the organization belongs to an aff					nd "limited co	ntrol"	provisions apply.
	Limits on Lobb (The term "expenditures" me	ying Expenditu	res	<u> </u>		(a) Affiliated gro totals		(b) To be completed for ALL electing
36					00	<u> </u>		organizations
37	Total lobbying expenditures to influence publicate lobbying expend	lic opinion (grassro	oots lobbying)		36 37			
38	Total lobbying expenditures to influence a legaction of the lobbying expenditures (add lines 36 and	gisiative body (dire	ect lobbying)		38			<u> </u>
39	Other exempt purpose expenditures	331)			39			<u> </u>
40	Total exempt purpose expenditures (add line	n 30 and 201			40			<u> </u>
41	Lobbying nontaxable amount. Enter the amount	s so and self	· · · · · · ·		40			
, ,		lobbying nontax						
		of the amount of					•	
		0.000 plus 15% of			i i			
		5.000 plus 10% of th			41			
		5,000 plus 5% of th			7			
		00,000						
42	Grassroots nontaxable amount (enter 25% of	line 41)	• • • • •	• • •	42			
43	Subtract line 42 from line 36. Enter -0- if line	42 is more than li	ne 36		43	-	-	
44	Subtract line 41 from line 38. Enter -0- if line	41 is more than li	ne 38		44			
_	Caution: If there is an amount on either line	13 or line 44, you i	must file Form 47:	20.				
	(Some organizations that made a secti See the instructions	for lines 45 through	do not have to d	omplete all of the instr	ruction	s.)		
	Calendar year (or						<del></del> -	
	fiscal year beginning in) ➤	(a) 2005	( <b>b)</b>	(c) 2003	į	(d)		_(e)
=		2000	2004	2003	1	2002		Total
45	Loboying nontaxable amount				Ì		!	
46	Lobbying ceiling amount (150% of line 45(e))							
47	Total lobbying expenditures	<u>:</u>						····
48_	Grassroots nontaxable amount						į	· · ·
49	Grassroots ceiling amount (150% of line 48(e))			<del> </del>				
50	Grassroots lobbying expenditures	<u> </u>	ĺ		İ		l	
Pa	Lobbying Activity by Nonelectivity (For reporting only by organization)	cting Public Chations that did r	narities not complete P	art VI-A) (	See p	page 11 of	the	instructions.)
Duri	ng the year, did the organization attempt to infli	uence national, sta	ate or local legisla	ation includ	ling ar		<u>-</u> -	
atter	not to influence public opinion on a legislative r	natter or referendu	um, through the u	se of:		Yes Yes	NO	Amount
а	Volunteers							
þ	Paid staff or management (Include compensati	ion in expenses re	ported on lines c	through h.	)			
С	Media advertisements							
d	Mailings to memoers, legislators, or the public		_					
е	Publications, or published or broadcast statem	ients						
f	Grants to other organizations for lobbying purp	oses						
9	Direct contact with legislators, their staffs, government	ernment officials,	or a legislative bo	dv			Ī	
h	Hallies, demonstrations, seminars, conventions	, speeches, lectur	es, or any other n	neans				
i	Total lobbying expenditures (Add lines c through	ah h.)					$\Box$	
	if "Yes" to any of the above, also attach a stat	ement giving a de	tailed description	of the lobb	vina a	ctivities.		

Pa	VII Information Regarding	Transfers To and Transc		<b>B</b> 1.22 . 7.1	10.0714		Page (
	Exempt Organizations (S	Transfers To and Transa ee page 12 of the instructio	ns.)				_
51	Did the reporting organization directly of 501(c) of the Code (other than section 5	i01(c)(3) organizations) or in secti	on 527, relatin	any other organiz g to political organ	ation des	_	
а	Transfers from the reporting organization	n to a noncharitable exempt orga	anization of:			<u> </u>	'es No
	(i) Cash				<u>[5</u>	51a(i)	
	(ii) Other assets				上	a(ii)	_ V
ь	Other transactions:			•			
	(i) Sales or exchanges of assets with					b(i)	
	(ii) Purchases of assets from a noncha				上	b(ii)	V
	(iii) Rental of facilities, equipment, or or	ther assets			[_	b(iii)	1
	(iv) Reimbursement arrangements				<u>L</u> 1	b(iv)	V
	(v) Loans or loan guarantees				_	b(v)	_
	(vi) Performance of services or membe				[_]	b(vi)	V
C	Sharing of facilities, equipment, mailing				L	С	
	If the answer to any of the above is "Yes, goods, other assets, or services given by transaction or sharing arrangement, show it	by the reporting organization. If t	he organization	received less that	n fair ma	arket va rket val	due of the ue in any
(;	a) (b)	(c)		(d)			•••
Line	no. Amount involved Name of nor	ncharitable exempt organization	Description o	f transfers, transaction	s, and shan	ing arrang	gements
		-					
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	:		1	<del></del>			
			 				·-··
			!				
			I	÷			
	Is the organization directly or indirectly described in section 501(c) of the Code If "Yes," complete the following schedule	(other than section 501(c)(3)) or i	e or more tax n section 527?	-exempt organizat		Yes	☑ No
	(a)	(b)		(c)			
	Name of organization	Type of organization	į	Description of rel	ationsnip		
		<u> </u>	<u> </u>	<u> </u>	<del></del>		
		1	<u>.</u>	······································	<del></del>		
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				<u> </u>			
	·····					<del>-</del>	·

#37-1179056

Statement 1 Form 990, Part I, Line 8 Net Gain (Loss) form Noninventory Sales

### Publicly Traded Securities

Description: Date Acquired: How Acquired: Date Sold: To Whom Sold:

Gross Sales Price Cost Basis Loss on Sale

#### Other Assets

Description: Date Acquired: How Acquired: Date Sold: To Whom Sold:

Gross Sales Price -Cost Basis Loss on Sale

Securities Various Purchased or Donated Various Market Shares - Unknown

50,397 51,725 (1.328)

Capital Assets Various Purchased or Donated Various Various

11.471 10,349 1.122

#37-1179056

Statement 2 Form 990, Part II, Line 43 Other Expenses

		Program	Management	
Other Expenses	Total	Services	& General	Fundraising
Advertising and Promotion	74 926		74.000	
<u> </u>	74,836		74,836	
Bank Charges	74,456		74,456	
Broadcasting	134,135	134,135		
Cable Promotion	7,266	7,266		
Camp Meeting	43,287		43.287	
Cost of Goods Given Away	605,744	605,744		
Contract Labor	179,409	179,409		
Donations	216,636		216,636	
Dues and Registration	41,892	41,892		
Insurance	390,950		390,950	
Inventory Write-down		278,700.		
Miscellaneous	35,783		35,783	
Music Production	58,375	58,375		
Special Projects	535,883	498,883	37,000	
Trust	148.423		148,423	
	2,825.775	1,804,404	1,021,371	

Statement 3
Form 990, Part IV, Line 55
Land, Buildings and Equipment

Land held in Charitable Remainder Unitrusts

3,120,000

Statement 4
Form 990, Part IV, Line 57
Land, Buildings and Equipment

Asset	Cost	Accum. Deprec.	Net Book Value
Buildings	6,600,103	917,355	5,682,748
Land	855,813	,	855,813
Land Improvements	491,697	88,440	403,257
Machinery & Equipment	19,268,904	13,258,720	6,010,184
Vehicles	1,414,309	1,341,238	73,071
Construction in Progress	542,629	. ,	542,629
·	29,173,455	15,605,753	13,567,702

#37-1179056

Statement 5
Form 990 Part IV, Line 58
Other Assets

Deposits Annuities Trusts	813,877 12,551,006 22,214,079 35,578,962
Statement 6 Form 990 Part IV, Line 65 Other Liabilities	
Annuitiés Liabilities under Unitrust Agreèments Revocable Trust Liabilities	12,602,521 1,698,669 22,214,079 36,515,269
Statement 7 Form 990 Part IV-A, Line B(4) Other Amounts	
Cost of Goods Sold - Satelites -Bental Expenses	609,669 2,757 612,426
Statement 8 Form 990 Part IV-B, Line B(4) Other Amounts	012,420
Cost of Goods Sold - Satelites Rental Expenses	609,669 2,757 612,426

#37-1179056

Statement 9
Form 990, Part V-A
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title & Avg. Hrs/Wk	Comp.	Employee Benefits	Expense Account	
Dr. Walter Thompson 174 Fox Borough Burr Ridge, IL 60521	Chairman None	0		0	0
Kenneth Denslow 619 Plainfield Rd., 3rd Floor Willowbrook, IL 60521-5381	Director None	0		0	0
May Chung 155 Manchester Lane San Bernardino, CA 92408	Director None	0		0	0
Larry Ewing PO Box 75 Thompsonville, IL 62890	Treasurer 40 hrs/wk	68,365			
Merlin Fjarli 670 Mason Way Medford, OR 97501	Director None	0		0	0
Bill Hulsey PO Box 596 Collegedale, TN 37315	Director None	0		0	0
Ellsworth McKee PO Box 750 Collegedale, TN 37315	Director None	0		0	0
Wintley Phipps PO Box 8008 Vero Beach, FL 32963	Director None	0		0	0
Danny Shelton 2954 New Lake Road West Frankfort, IL 62896	President Director 40 hrs/wk	70,944			

#37-1179056

Statement 9
Form 990, Part V (Continued)
List of Officers, Directors, Trustees, and Key Employees

Mollie Steenson 400 E. 9th Street Johnston City, IL 62951	Secretary Director 40 hrs/wk	56,729		
Carmelita Troy 4024 Ronda Rd. Pebble Beach, CA 93953	Director None	0	0	0
Larry Welch 715 S Mulkey Christopher, IL 62822	Director 40 hrs/wk	40,989	0	0
	- -	237,027	÷	

Statement 10
Form 990, Part V, Line 90A
List of States Which This Return is Filed
California
Illinois
Gregon

Statement 11 Form 990, Part VII

Relationship of Activities to the Accomplishment of Exempt Purposes

93 Payment for airtime & production of certain religious programming
95 Interest income is used to help offset general operating expenses
97 Rental income is used to help offset general operating expenses
102 Sale of satellite dishes to enable veiwers to receive programming
103c Other income is used to help offset general operating expenses