Form 990

Department of the Treasury

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)

OMB No. 1545-0047 2(0)114

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service 20 , 2004, and ending For the 2004 calendar year, or tax year beginning D Employer identification number C Name of organization Check if applicable: 37 1179056 Three Angels Broadcasting Network, Inc. Address change label o E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite orint o Name change type. (618)627-4651 P.O. Box 220 Initial return F Accounting method: Cash Accruai City or town, state or country, and ZIP + 4 Final return ☐ Other (specify) ► West Frankfort, IL 62896 tions. Amended return H and I are not applicable to section 527 organizations. • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable Application pending trusts must attach a completed Schedule A (Form 990 or 990-EZ). H(b) If "Yes," enter number of affiliates ▶ ... G Website: ▶ Yes No H(c) Are all affiliates included? J Organization type (check only one) ► Ø 501(c) () ◄ (insert no.) ☐ 4947(a)(1) or ☐ 527 (If "No," attach a list. See instructions.) H(d) is this a separate return filed by an K Check here ▶ ☐ if the organization's gross receipts are normally not more than \$25,000. The organization covered by a group ruling? Yes No organization need not file a return with the IRS; but if the organization received a Form 990 Package Group Exemption Number ► in the mail, it should file a return without financial data. Some states require a complete return. Check ► ☐ if the organization is not required to attach Sch. 8 (Form 990, 990-EZ, or 990-PF). Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.) Part I Contributions, gifts, grants, and similar amounts received: 13,581,898 1a a Direct public support 1b b Indirect public support 1c c Government contributions (grants) 13,581,898 d Total (add lines 1a through 1c) (cash \$ 12,811,538 noncash \$ 770,360 j 1d 1.106,556 2 Program service revenue including government fees and contracts (from Part VII, line 93) 2 3 3 3,903 4 Interest on savings and temporary cash investments 4 5 Dividends and interest from securities 5 33,173 6a 6b b Less: rental expenses 32,275 6c Net rental income or (loss) (subtract line 6b from line 6a) . 7 Other investment income (describe > (B) Other (A) Securities 8a Gross amount from sales of assets other 893,177 21.726 8a 1,011,845 21,747 8b b Less: cost or other basis and sales expenses. (21) 8c (118,668)c Gain or (loss) (attach schedule) . . . (118,689)8d d Net gain or (loss) (combine line 8c, columns (A) and (B)) 9 Special events and activities (attach schedule). If any amount is from gaming, check here ▶ □ a Gross revenue (not including \$] فينار b Less: direct expenses other than fundraising expenses 9c c Net income or (loss) from special events (subtract line 9b from line 9a) . 713,725 10a Gross sales of inventory, less returns and allowances . . | 10a | 10b b Less: cost of goods sold 129,705 10c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a). (760,511)11 Other revenue (from Part VII, line 103) 13,975,137 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)______. 12 12 9,881,759 13 Program services (from line 44, column (B)) 13 4,938,968 14 Expenses Management and general (from line 44, column (C)) 14 15 Fundraising (from line 44, column (D)) 15 16 Payments to affiliates (attach schedule) . . . 16 14,820,727 17 Total expenses (add lines 16 and 44, column (A)) 17 (845,590)18 Excess or (deficit) for the year (subtract line 17 from line 12) Net Assets 18 19 Net assets or fund balances at beginning of year (from line 73, column (A)) . . 19 20,798,407 20 Other changes in net assets or fund balances (attach explanation). . . . 20 19,952,817

Net assets or fund balances at end of year (combine lines 18, 19, and 20)

21

Part	Statement of Functional Expenses	All organizations mu and section 4947(a)	ist comple (1) nonexe	ete column (A). Columns empt charitable trusts bu	(B), (C), and (D) are re it optional for others. (quired for section 501(c)(See page 22 of the instru	3) and (4) organization: octions.)
	Do not include amounts rep 6b, 8b, 9b, 10b, or 16	orted on line		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
	Grants and allocations (attac						
	(cash \$ noncash	,	22			en automobile	
	Specific assistance to individuals	,	23		· · · · · · · · · · · · · · · · · · ·	A post of the	9.20
	Benefits paid to or for members	•	25	204 776	20 647	175,129	
	Compensation of officers, di		26	204,776 3,234,199	29,647 1,435,852		
	Other salaries and wages ,		27	3,234,155	1,433,032	1,730,047	
	Pension plan contributions		28				
	Other employee benefits . Payroll taxes		29	226,597		226,597	
	Professional fundraising fees		30				
	Accounting fees		31	26,537		26,537	
	Legal fees		32	397,332		397,332	
	Supplies		33	270,342	112,135	158,207	
	Telephone		34	79,876	79,876		
	Postage and shipping		35	755,918		755,918	
	Occupancy		36	317,179	146,638	170,541	
	Equipment rental and mainte		37	3,576,426	3,427,597	148,829	
8	Printing and publications .		38	145,753	145,753		
9	Travel		39	1,399,516	1,144,093	255,423	
0	Conferences, conventions, a	and meetings .	40			0.500	
	Interest		41	9,682	2 000 400	9,682	
	Depreciation, depletion, etc.	•	42	2,229,469	2,229,469		
3	Other expenses not covered above	(itemize): a	43a	1,947,125	1,130,699	816,426	
b			43b				
C			43c				
d			43d 43e				
4	Total functional expenses (add lines 22 th completing columns (B)-(D), carry these	wough 43). Organizations	44	14,820,727	9,881,759	4,938,968	
re ar "Ye: ii) th	t Costs. Check if you ny joint costs from a combined as," enter (i) the aggregate amount allocated to Manager Statement of Progr	educational campaigr unt of these joint cos ment and general \$ ram Service Acc	and furts \$; (ii) the ; and (iv) the shments (See p	e amount allocated e amount allocated age 25 of the in	to Program service to Fundraising \$ nstructions.)	Yes I
ll or	t is the organization's primary ganizations must describe the ents served, publications issue nizations and 4947(a)(1) nonexe	ir exempt purpose a ed, etc. Discuss act	ichiever nieverne	nents in a clear and ents that are not m	d concise manner easurable. (Section	State the number on 501(c)(3) and (4)	Expenses (Required for 501(c)(3) at (4) orgs., and 4947(a)() trusts; but optional for others.)
	Production and distribution throughout the world.	of 24 hour per da	y relig	ious programmin	g for electronic	transmission	
-		(Grants	and allocations	\$)	9,881,7
b .							
-		(Grants	and allocations	\$)	
с <u>.</u>							
-		•••••					
-		(Grants	and allocations	\$)	
d.		************				•	
				• • • • • • • • • • • • • • • • • • • •			
-			_				•
-	Other program services (attac			and allocations and allocations	\$ \$)	

Part IV Balance Sheets (See page 25 of the instructions.)

N	ote:	Where required, attached schedules and amounts column should be for end-of-year amounts only.	within t	ne description	(A) Beginning of year		(B) End of year
	· ·			-	383,281	45	766,858
	45	Cash—non-interest-bearing			2,554,835	46	1,822,424
- 1	46	Savings and temporary cash investments ,					
	47.	A and contact and a six obtains	47a	165,157	·		
		Accounts receivable	47b	600	247,539	47c	164,557
	Þ	Less; allowance for doubtful accounts ,					
ļ	40.	Diadaga ragaiyabla	48a				
		Pledges receivable	48Ь		323,165	48c	517,185
	49	Grants receivable				49	
		Receivables from officers, directors, truste		d kov emplovees			
	50	(attach schedule)				50	
		Other notes and loans receivable (attach	• •			2. 1. 2	
ø,	Sia	schedule)	51a				
ssets	١,	Less: allowance for doubtful accounts	51b		1	51c	
Ą	52	Inventories for sale or use			850,165	52	1,313,507
	53	Prepaid expenses and deferred charges			767,863	53	939,847
	54	Investments—securities (attach schedule)	•	Cost FMV		54_	
	55a	and the second s	•			Š.	
	554	equipment: basis	55a			line.	
	ь	Less: accumulated depreciation (attach				Bulai.	2 207 400
	~	schedule)	55b		3,387,100	55c	3,387,100
	56	.Investments—other (attach schedule)			<u> </u>	56	
	57a	Land, buildings, and equipment: basis	57a			10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
		Less: accumulated depreciation (attach				لفيان	44.540.570
		schedule)	57b		16,247,379	+	
	58	Other assets (describe ► Schedule 5)	30,016,365	58	31,301,209
				1 P 7 4	54,777,692	59	54,762,265
_	59	Total assets (add lines 45 through 58) (mus			1,582,036		831,841
	60	Accounts payable and accrued expenses .			1,302,030	61	001,041
	61	Grants payable , , , , , , , ,			40,333	+	27,460
	62	Deferred revenue			40,000	3.15	
Liabilities	63	Loans from officers, directors, trustees, an				63	
Ξ		schedule)				64a	
펺	l l	Tax-exempt bond liabilities (attach schedule			40,000	+	
_	1	Mortgages and other notes payable (attach Other liabilities (describe ► Statement 6	sched	uie)	32,316,916	_	22.22.12
	65	Other liabilities (describe - Statement o		/		1	
	66	Total liabilities (add lines 60 through 65)			33,979,285	66	34,809,448
_	+	anizations that follow SFAS 117, check here					
		67 through 69 and lines 73 and 74.		and complete mics			
Se	67	Unrestricted			16,978,544	67	15,792,142
ü	68	Temporarily restricted			3,819,863	68	4,160,675
3a	69	Permanently restricted				69	
Fund Balances	0	panizations that do not follow SFAS 117, chec				312	
Ē	١٠١١	complete lines 70 through 74.					<u> </u>
7.0	70	Capital stock, trust principal, or current fun-	ds, .			70	
45	71	Paid-in or capital surplus, or land, building,				71	
Se	72	Retained earnings, endowment, accumulate				72	
Net Assets or	73	Total net assets or fund balances (add lir					er i
Zel		70 through 72;			20 709 407		40 053 947
_		column (A) must equal line 19; column (B)			20,798,407	_	54 700 OCE
	74	Total liabilities and net assets / fund balar	nces (a	dd lines 66 and 73)	54,777,692	2 74	54,762,265

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 programs and accomplishments.

	19U (2UU4)								
Par	t IV-A	Reconciliation of Revenue Financial Statements with Return (See page 27 of the	n Revenue p	er	Part IV-B	Reconciliation of Financial States Return	of Expenses ments with	s per A Exper	Audited 1ses per
а	Tutal rever	nue, gains, and other support	rgit (drop (6th			expenses and k		<i>200</i> , 2	45 405 045
	per audite	d financial statements	a 14,5	60,055		financial statemer		a	15,405,645
b	Amounts i line 12, Fo	included on line a but not on orm 990:				s included on line 17, Form 990:	a but not		
	Net unreal on investm					d services of facilities <u>\$</u>	·····		
(2)	Donated and use of	services of facilities			reported	r adjustments on line 20,			
(3)	Recoverie		10.00	0.45		o			d the first
(4)	year gran Other (sp				• '	Form 990 . \$			1 6-2 7 8
	Stateme	nt 7 \$ 584,918			(4) Outer (52	表的这种证明
	Add amou	ints on lines (1) through (4) ▶	b 5	84,918	Staten	nent 8 \$	584,918	2	TO 4 0 4 0
			42.0	75 497		ounts on lines (1) t		С	584,918 14,820,727
C		nus line b	C 13,3	75,137		minus line b			(*************************************
d		included on line 12, but not on line a:			Form 9	ts included on line 190 but not on line			de la
(1)		t expenses	5 1 7:3-2			ent expenses uded on line			
		led on line 390 \$		Tan Mag.		11990 <u>\$</u>			
(2)	Other (sp			Mgarya. Eli va	(2) Other				
. ,		···········				e			MATERIAL CONTRACTOR
		<u>\$</u>				<u>ə</u>) and (0) >	d	ند در با فقط بها باقتفه بسیایا می بن
_		unts on lines (1) and (2)	d		1	nounts on lines (1) xpenses per line 11			
ę		enue per line 12, Form 990 us line d)	e 13,9	975,137		plus line d)		e_	14,820,727
Pa		st of Officers, Directors, T	rustees, an	d Key l	Employees (L	ist each one even i	f not comper	nsated	; see page 27 o
	the	(A) Name and address		(B) Title a	and average hours devoted to positio	per (If not paid, enter		pians &	(E) Expense account and other allowances
Stat	ement 9				 	-0-,	delates compa	A CALLON	
Via.									
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				<u>L</u>					J
75	Did any o	officer, director, trustee, or key	employee rece	ive aggre	egate compensa	tion of more than \$	100,000 from	your	☐ Yes 🗹 No
		ion and all related organizations			iu,uuu was prov	nued by the related	organizations		
	it "Yes,"	attach schedulesee page 28	o or the instit	JUUUNS.					

	990 (2004)			age 5
Par	Other Information (See page 28 of the instructions.)	T	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.	76	-	-
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	1 344	
	If "Yes," attach a conformed copy of the changes.	78a		V
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78b	\vdash	
	If "Yes," has it filed a tax return on Form 990-T for this year?	79		1
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		To P	1344
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common	80a		V
h	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?			
D	and check whether it is exempt or nonexempt.			
91a	Enter direct and indirect political expenditures. See line 81 instructions	e de s	V 486	4.0
b	Did the organization file Form 1120-POL for this year?	81b	[<u>-</u>	V
82a	The state of the s			1
	or at substantially less than fair rental value?	82a	**************************************	189 apr 139 S
b	If "Yes," you may indicate the value of these items here. Do not include this amount			
	as revenue in that the as an expense in that in (occurrence in that in).	83a	/	e pagement and
	Did the organization comply with the public inspection requirements for returns and exemption applications?	83b	+	
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?.	84a		V
	Did the organization solicit any contributions or gifts that were not tax deductible?		e service	ilya.
Þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	 	+
þ	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	, in th	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	100		1.00
	received a waiver for proxy tax owed for the prior year.	1007	1	
_	Dues, assessments, and similar amounts from members			25
d	Section rozie) lobdying and pointed experionales		172	
	Aggregate nondeducible amount of section coocles (1)(A) data nondeducible amount of section coocles (1)(A) d			
	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85g		
g	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its			
	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax	85H		
	year?	651	•	
86	307 (3/7) drgs. Enter. a miniation rees and capital commoditions included on the 12.			
	Gloss receipts, included of fine 12, for public use of club facilities			
87	301(c)(72) orgs. Like: a cross meeting from members of shareholders			
Ь	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	7.5		
	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or	35.	2. 10. 0	
88	partnership, or an entity disregarded as separate from the organization under Regulations sections	This	2	مقديدة الم القديدة الم
	301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			
	section 4911 >; section 4912 >; section 4955 >	7		
D	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach			\ \rac{1}{2}
	a statement explaining each transaction	89t	3	<u> </u>
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			
·	sections 4912, 4955, and 4958			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			
90a	List the states with which a copy of this return is filed ▶ Statement 10			
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)		125	
91	The books are in care of ▶ Larry Ewing Telephone no. ▶ (618)	627-4	651	
	Located at ► 3391 Charlie Good Road, West Frankfort, IL ZIP + 4 ►	2030		
92	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 |

Part VII	er gross amounts unless otherwise	Unrelated b	usiness income	Excluded by sect	ion 512, 513, or 514	(E)
indicated.	er gross amounts unless otherwise	(A)	(B)	(C)	{D)	Related exempt fur
	ram service revenue:	Business code	Amount	Exclusion code	Amount	incom
	duction and distribution					1,10
b		_				
-						<u></u>
e						
	icareMedicaid payments	_				
	and contracts from government agencie	•				
-	bership dues and assessments					<u> </u>
	est on savings and temporary cash investment	s				
	dends and interest from securities		:			<u> </u>
	rental income or (loss) from real estate:		Z PRZWIET SAREV			Sur Mis
	financed property					
	debt-financed property					3
	ental income or (loss) from personal property	,				
	er investment income					
	or (loss) from sales of assets other than inventor	rv				(118
	income or (loss) from special events	,				12
	ss profit or (loss) from sales of inventory					
	er revenue: a					
b Cha	ange in value of split interest agreeme	nts				(79
C Oth						3
					ļ	
d		l	_l			
105 Tota	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) . 105 plus line 1d, Part I, should equal th) e amount on line	12, Part I.			39
e 104 Sub 105 Tota Note: <i>Line</i> Part VIII	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) 105 plus line 1d, Part I, should equal the Relationship of Activities to the Ad	e amount on line	12, Part I. of Exempt Pur	ooses (See pa	age 34 of the in	39 nstructions
e 104 Sub 105 Tota Note: <i>Line</i>	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) . 105 plus line 1d, Part I, should equal th	e amount on line	12, Part I. of Exempt Pur	ooses (See pa	age 34 of the in	39 nstructions
e	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) 105 plus line 1d, Part I, should equal the Relationship of Activities to the Activity for which income	e amount on line	12, Part I. of Exempt Pur	ooses (See pa	age 34 of the in	39 nstructions
e	total (add columns (B), (D), and (E))	e amount on line	12, Part I. of Exempt Pur	ooses (See pa	age 34 of the in	39 nstructions
e	total (add columns (B), (D), and (E))	e amount on line	12, Part I. of Exempt Pur	ooses (See pa	age 34 of the in	39 nstructions
e	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) 105 plus line 1d, Part I, should equal the Relationship of Activities to the Activities to the Activities how each activity for which income of the organizations exempt purposes (otherwise).	e amount on line complishment of e is reported in coner than by providing	12, Part I. of Exempt Pury lumn (E) of Part M ng funds for such	contributed im purposes).	age 34 of the in portantly to the a	35 nstructions.
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e	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) 105 plus line 1d, Part I, should equal the Relationship of Activities to the Activities to the Activities to the Activities are considered by the organizations exempt purposes (otherwise Statement 11 Information Regarding Taxable Subme, address, and EIN of corporation,	e amount on line complishment of its reported in coner than by providing sidiaries and Di (B) Percentage of	12, Part I. of Exempt Purplumn (E) of Part II ng funds for such	contributed impurposes).	age 34 of the inportantly to the a	nstructions. ccomplishm
e	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) 105 plus line 1d, Part I, should equal the Relationship of Activities to the Activities to the Activities how each activity for which income of the organizations exempt purposes (otherwise) Statement 11 Information Regarding Taxable Subsequences	e amount on line complishment of its reported in coner than by providing sidiaries and Di (B) Percentage of ownership interest	12, Part I. of Exempt Pury lumn (E) of Part II ng funds for such sregarded Enti (C) Nature of	contributed impurposes).	age 34 of the inportantly to the a	nstructions. ccomplishm
e	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) 105 plus line 1d, Part I, should equal the Relationship of Activities to the Activities to the Activities to the Activities are considered by the organizations exempt purposes (otherwise Statement 11 Information Regarding Taxable Subme, address, and EIN of corporation,	e amount on line complishment of its reported in coner than by providing sidiaries and Di (B) Percentage of ownership interest	12, Part I. of Exempt Pury lumn (E) of Part II ng funds for such sregarded Enti (C) Nature of	contributed impurposes).	age 34 of the inportantly to the a	39 Instructions. Instructions.
e	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) 105 plus line 1d, Part I, should equal the Relationship of Activities to the Activities to the Activities to the Activities are considered by the organizations exempt purposes (otherwise Statement 11 Information Regarding Taxable Subme, address, and EIN of corporation,	e amount on line complishment of the is reported in content than by providing esidiaries and Di (B) Percentage of ownership interest	12, Part I. of Exempt Purplement (E) of Part Mang funds for such sregarded Enti	contributed impurposes).	age 34 of the inportantly to the a	nstructions. ccomplishm
e	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) 105 plus line 1d, Part I, should equal the Relationship of Activities to the Activities to the Activities to the Activities are considered by the organizations exempt purposes (otherwise Statement 11 Information Regarding Taxable Subme, address, and EIN of corporation,	e amount on line complishment of the is reported in content than by providing estimates and Di Percentage of ownership interest % %	12, Part I. of Exempt Purp lumn (E) of Part II ng funds for such sregarded Enti	contributed impurposes).	age 34 of the inportantly to the a	nstructions. ccomplishm
e	total (add columns (B), (D), and (E))	e amount on line complishment of its reported in coner than by providing sidiaries and Di (B) Percentage of ownership interest % % %	12, Part I. of Exempt Purplumn (E) of Part Mang funds for such sregarded Enti	contributed impurposes). ties (See page activities	age 34 of the inportantly to the a	structions. ccomplishm ructions.) (E) End-of-asse
e	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) 105 plus line 1d, Part I, should equal th Relationship of Activities to the Ac Explain how each activity for which incom of the organizations exempt purposes (oth Statement 11 Information Regarding Taxable Sub (A) me, address, and EIN of corporation, partnership, or disregarded entity Information Regarding Transfers Ass	e amount on line complishment of the is reported in content than by providing sidiaries and Di Percentage of ownership interest % % % % ociated with Per	12, Part I. of Exempt Purp lumn (E) of Part II ng funds for such sregarded Enti (C) Nature of	contributed impurposes). ties (See page) activities	e 34 of the instruction of the i	nstructions. ructions.) End-of-asse
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Part X (a) Did (b) Did (b) Did (a) 104 Sub Part VIII Line No. Part X (a) Did (b) Did	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) 105 plus line 1d, Part I, should equal th Relationship of Activities to the Activities to	e amount on line complishment of the is reported in content than by providing sidiaries and Di Percentage of ownership interest % % % ociated with Percentage of interest, inter	12, Part I. of Exempt Purp lumn (E) of Part II ng funds for such sregarded Enti (C Nature of to pay premiums or or indirectly, on	contributed impurposes). ties (See page) activities	e 34 of the instruction of the i	nstructions accomplishment (E) End-of-asse
Part X (a) Did (b) Did (b) Did (a) 104 Sub Part VIII Line No. Part X (a) Did (b) Did	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) 105 plus line 1d, Part I, should equal th Relationship of Activities to the Activities to	e amount on line complishment of the is reported in content than by providing the sidiaries and Di Percentage of ownership interest % % % ociated with Periodirectly, remiums, directly 4720 (see instruct	12, Part I. of Exempt Purp lumn (E) of Part II ng funds for such sregarded Enti (C) Nature of to pay premiums or or indirectly, ontions).	contributed impurposes). ties (See page) activities ontracts (See a personal benefit a	e 34 of the instruction of the i	nstructions.) Cuctions.) End-of-asse nstructions.) Yes Yes
Part X (a) Did (b) Did (b) Did (a) 104 Sub Part VIII Line No. Part X (a) Did (b) Did	Information Regarding Transfers Ass	e amount on line complishment of the is reported in content than by providing sidiaries and Di (B) Percentage of ownership interest % % % ociated with Percentage of indirectly, remiums, directly 4720 (see instruct)	12, Part I. of Exempt Purplumn (E) of Part II ng funds for such sregarded Enti (C) Nature of sonal Benefit Co to pay premiums or or indirectly, on-	contributed impurposes). ties (See page) activities ontracts (See) a personal benefit	age 34 of the inportantly to the age 34 of the instruction of the inst	asse Yes
Part X (a) Did (b) Did (b) Did (a) 104 Sub Part VIII Line No. Part X (a) Did (b) Did	total (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and (E) 105 plus line 1d, Part I, should equal th Relationship of Activities to the Activities to	e amount on line complishment of the is reported in content than by providing sidiaries and Di (B) Percentage of ownership interest % % % ociated with Percentage of indirectly, remiums, directly 4720 (see instruct)	12, Part I. of Exempt Purplumn (E) of Part II ng funds for such sregarded Enti (C) Nature of sonal Benefit Co to pay premiums or or indirectly, on-	contributed impurposes). ties (See page) activities ontracts (See) a personal benefit	age 34 of the inportantly to the age 34 of the instruction of the inst	asse Yes
Part X (a) Did (b) Did Note: If	Information Regarding Transfers Ass the organization, during the year, receive any funds the organization, during the year, pay parties to (b), file Form 8870 and Form Under penalties of perjary, I declare that I have example period (c) the true, correct, and complete. Declared and the period (c) to the true, correct, and complete. Declared (c) the true to the true, correct, and complete. Declared (c) the true true, correct, and complete. Declared (c) the true true, correct, and complete. Declared (c) the true true true true true true true tru	e amount on line complishment of the is reported in content than by providing sidiaries and Di (B) Percentage of ownership interest % % % ociated with Percentage of indirectly, remiums, directly 4720 (see instruct)	12, Part I. of Exempt Purplumn (E) of Part II ng funds for such sregarded Enti (C) Nature of sonal Benefit Co to pay premiums or or indirectly, on-	contributed impurposes). ties (See page) activities ontracts (See) a personal benefit	age 34 of the inportantly to the age 34 of the instruction of which preparation of which prep	asse Tuctions.) (E) End-of-asse Instructions.) Yes Yes Dest of my kinds
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SCHEDULE A

Department of the Tressury Internal Revenue Service

Name of the organization

(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 Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ Employer identification number

OMB No. 1545-0047

ame or the organization Three Angels Broadcasting Network, Inc.			37 1179056		
Compensation of the Five High (See page 1 of the instructions.	nest Paid Employees Ot	her Than Office	ers, Directors, a lone.")	nd Trustees	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances	
Linda Shelton	Vice President	117,110			
2125 Renwick Dr., Springfield, IL 62704	40 111 5/Wh				
Moses Primo	Director of Engineering	50,818			
PO Box 39, Thompsonville, IL 62890	40 MS/WR				
	-				
Total number of other employees paid over \$50,000					
Part II Compensation of the Five Hig (See page 2 of the instructions.	ghest Paid Independent List each one (whether ind	Contractors fo ividuals or firms)	r Professional S . If there are none	Services e, enter "None.")	
(a) Name and address of each independent contract			e of service	(c) Compensation	
Union Bank of California		Investment Ma	Investment Management		
PO Box 85243, San Diego, CA 92186					
Sidley, Austin, Brown & Wood LLP		Legal		191,49	
555 West 5th Street, Suite 4000, Los Angele	s, CA 90013		<u></u>		
Total number of others receiving over \$50,000 for			li sa tualeki ge iza		

	t III	Statements About Activities (See page 2 of the instructions)			
		Statements About Activities (See page 2 of the instructions.)		Yes	No
	atter or in Part	ng the year, has the organization attempted to influence national, state, or local legislation, including any npt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid acurred in connection with the lobbying activities \$	1		~
	orga	anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other inizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of obbying activities.			
	sub: with own	ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or any taxable organization with which any such person is affiliated as an officer, director, trustee, majority er, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the sactions.)			
а	Sale	, exchange, or leasing of property?	2a		V
		ting of money or other extension of credit?	2b		٧
c	Furr	ishing of goods, services, or facilities?	2c	~	Ĺ
d	Pay	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		~
е	Tran	sfer of any part of its income or assets?	2e		~
		you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how determine that recipients qualify to receive payments.)	За		V
b	Doy	rou have a section 403(b) annuity plan for your employees?	3b		~
4a	Did	you maintain any separate account for participating donors where donors have the right to provide advice			·
		he use or distribution of funds?	4a		_
<u>b</u>	Do	rou provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		~
Par	t IV	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)	·		
The c	orgar	lization 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		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 hosend state	pital's	name	, cit
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Sect (Also complete the Support Schedule in Part IV-A.)	tion 170	X(b)(1)	(A)(i
11a		An organization that normally receives a substantial part of its support from a governmental unit or from the gene 170(b)(1)(A)(vi). (Also complete the <mark>Support Schedule</mark> in Part IV-A.)	ral pub	lic. Se	etic
		A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12		An organization that normally receives: (1) more than 33%% of its support from contributions, membershi receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no mo ts support from gross investment income and unrelated business taxable income (less section 511 tax) from bu	re tha	n 33½	5%
		by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part	IV-A.)		
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supplescribed in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(3).)			
		Provide the following information about the supported organizations. (See page 5 of the instructions	3.)		
		(a) Name(s) of supported examination(a) (b) Line	e numb	er	
		(a) Name(s) of supported organization(s) from	n abov	e	

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

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) 2003 (b) 2002 (c) 2001 (d) 2000 (e) Total Gifts, grants, and contributions received, (Do not include unusual grants. See line 28.). 12,918,511 17,236,402 13,521,717 11,202,957 54,879,587 16 Membership fees received . 17 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 3.476,063 2.310.642 1.998.731 1,794,201 9,579,637 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 48,917 52,416 70,437 83,580 by the organization after June 30, 1975 255,350 income from unrelated activities not included in line 18, Tax revenues levied for the organization's 20 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 public without charge. Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets 23 Total of lines 15 through 22 15,278,070 19,287,549 15,386,355 14,762,600 64,714,574 24 Line 23 minus line 17 12,967,428 17,288,818 13,592,154 11,286,537 55.134.937 25 Enter 1% of line 23 147,626 152,781 192,875 153.864 26a 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 . . . 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 2000 through 2003 exceeded the 26b amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶ 26c c Total support for section 509(a)(1) test: Enter line 24, column (e) d Add: Amounts from column (e) for lines: 18 ______ _ 19 26d 26b _ e Public support (line 26c minus line 26d total) 26e Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 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: (2003) 146,809 (2002) 317,048 (2001) 261,527 (2000) 455,945 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 11, 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 amounts) for each year: (2003) 337,040 (2002) 182,840 (2001) 379,400 (2000) 179,522 **54,879,587** 16 c Add: Amounts from column (e) for lines: 15 _ 64,459,224 9,579,637 1,181,329 27đ 2,260,131 d Add: Line 27a total. and line 27b total . 27 e 62,199,093 f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) . . ▶ 27f 96.1 % 27g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). > 27h Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003,

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

Pa	Trivate School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)			
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?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
	·			
32	Does the organization maintain the following:			
a b	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32a 32b		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d		32d		11.22
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			\$ 134.5 \$ 134.5 \$ 174.
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	33a	1	
b	Admissions policies?	33b	<u> </u>	
С	Employment of faculty or administrative staff?	33c		
đ	Scholarships or other financial assistance?	33d	-	
е	Educational policies?	33e		
f	Use of facilities?	33f		
9	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.)			7
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	<u> </u>	<u> </u>
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
35	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 pondiscrimination? If "No." attach an explanation	25		

	t VI-A Lobbying Expenditures by El (To be completed ONLY by an				instructions.)	Page 3
Chec	tk ▶ a ☐ if the organization belongs to an affilia		4	you checked "a" ar	nd "limited control"	provisions apply.
	Limits on Lobbyi	ng Expenditur	es		(a) Affiliated group totals	(b) To be completed for ALL electing
	(The term "expenditures" mea	<u> </u>		26		organizations
36	Total lobbying expenditures to influence public					
37	Total lobbying expenditures to influence a tegis					
38	Total lobbying expenditures (add lines 36 and	•				
39	· · · · · · · · · · · · · · · · · · ·			· · · · 		
40	Total exempt purpose expenditures (add lines	•			5 (0.00)	73.1 2 2 2 2 2 2 2 2 2 E 0
41	Lobbying nontaxable amount. Enter the amount If the amount on line 40 is— The I	obbying nontaxa	-	A STATE	and section	Section 1
		of the amount on		1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
		000 plus 15% of ti		00 000		A Comment
		000 plus 10% of th				
	Over \$1,500,000 but not over \$17,000,000. \$225,	•		022 917 1,1510	Transciptor Same	2000年
		0.000		10° 7	1 1 1 () () ()	A HEALTH A
42	Grassroots nontaxable amount (enter 25% of	line 41)		42		
43	Subtract line 42 from line 36. Enter -0- if line 4	l2 is more than lir	ne 36,	43		
44	Subtract line 41 from line 38. Enter -0- if line 4	I1 is more than lir	ne 38	44		Carte of The Decision of
	Caution If there is an amount on either line of	ar lina dd ymy r	must file Earn 47	20		
	Caution: If there is an amount on either line 43		•			SIF & ANTO SECTION DESIGNATION IN
	(Some organizations that made a section See the instructions in		do not have to d	omplete all of the		elow.
		Lob	bying Expenditu	ires During 4-Ye	ear Averaging Pe	eriod
	Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45	Lobbying nontaxable amount					
46	Lobbying ceiling amount (150% of line 45(e))					
47	Total lobbying expenditures					
48	Grassroots nontaxable amount		į			
49	Grassroots ceiling amount (150% of line 48(e))	CONTRACTOR OF CARROLL				
50	Grassroots lobbying expenditures				_	
Pa	t VI-B Lobbying Activity by Nonelector (For reporting only by organization)			Part VI-A) (See	page 11 of th	e instructions.)
Duri	ng the year, did the organization attempt to infl					Amount
	npt to influence public opinion on a legislative r		_	_	103 110	741102114
а	Volunteers					
b	Paid staff or management (Include compensat	tion in expenses r	eported on lines	c through h.)		
c	Media advertisements					
d	Mailings to members, legislators, or the public					
e	Publications, or published or broadcast staten	nents				<u> </u>
f	Grants to other organizations for lobbying pur	poses			_	
g	Direct contact with legislators, their staffs, gov		-	=	· · 	
h	Rallies, demonstrations, seminars, conventions		•		· · · · · · · · · · · · · · · · · · ·	9.2
i	Total lobbying expenditures (Add lines c through "Yes" to any of the above, also attach a sta		etailed description		activities.	<u></u>

Schedule		/E	000	000 E3	2024
JULICULIE	~	IPUIN	33U DI	33U-F/ I	71274

Pa	Information Regarding Tra Organizations (See page 1	nsfers To and Transaction 1 of the instructions.)	s and Relationships With Noncha	aritable		age b
51	Did the reporting organization directly or 501(c) of the Code (other than section 50	indirectly engage in any of the 1(c)(3) organizations) or in section	following with any other organization den 527, relating to political organizations	escribed s?	in se	
а	Transfers from the reporting organization	to a noncharitable exempt orga	nization of:		Yes	No
	(i) Cash			51a(i)		~
	(iii) Other assets			a(ii)		~
b	Other transactions:					~
	(i) Sales or exchanges of assets with a	noncharitable exempt organizat	ion	b(i)		
	(ii) Purchases of assets from a nonchar	itable exempt organization		b(ii)		~
	(iii) Rental of facilities, equipment, or other	ner assets . ,		b(iii)		~
	(iv) Reimbursement arrangements			b(iv)		~
	(v) Loans or loan guarantees			b(v)		1
	(vi) Performance of services or members	ship or fundraising solicitations	1	b(vi)		~
C	Sharing of facilities, equipment, mailing list	sts, other assets, or paid employ	yees	С		~
d	goods, other assets, or services given by transaction or sharing arrangement, show in	the reporting organization. If the	ne organization received less than fair r	market va	alue i	of the in any
	a) (b) e no. Amount involved Name of nonc	(c) charitable exempt organization	(d) Description of transfers, transactions, and st	haring arra	uđem	ents
				· · · · · · · · · · · · · · · · · · ·		
		-				
						
-						
	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	, ,	☐ Yes] No
	(a)	(b)	(c)			
	Name of organization	Type of organization	Description of relationshi	p		
				•		
				<u> </u>		
						·

#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:

Securities

Various

Purchased or Donated

Various

Market Shares - Unknown

 Gross Sales Price
 21,726

 Cost Basis
 21,747

 Loss on Sale
 (21)

Other Assets

Description: Capital Assets
Date Acquired: Various
How Acquired: Purchased or Donated
Date Sold: Various
To Whom Sold: Various

 Gross Sales Price
 893,177

 Cost Basis
 1,011,845

 Loss on Sale
 (118,668)

#37-1179056

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

		Program N	/lanagement	
Other Expenses	Total	Services	& General	Fundraising
Advertising and Promotion	206,995	37,500	169,495	
Bank Charges	64,189		64,189	
Broadcasting	49,734	49,734		
Camp Meeting	37,516		37,516	
Cost of Goods Given Away	330,242	330,242		
Contract Labor	111,478	99,716	11,762	
Dues and Registration	36,855	36,855		
Insurance	333,123		333,123	
Miscellaneous	144,618		144,618	
Music Production	102,777	102,777		
Special Projects	529,598	473,875	55,723	
	1,947,125	1,130,699	816,426	

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

Land held in Charitable Remainder Unitrusts

3,387,100

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

Asset	Cost	Accum. Deprec.	Net Book Value
Buildings	6,583,111	760,019	5,823,092
Land	855,813		855,813
Land Improvements	290,903	61,384	229,519
Machinery & Equipment	18,660,049	11,599,773	7,060,276
Vehicles	1,410,066	1,194,408	215,658
Construction in Progress	365,220	·	365,220
·	28,165,162	13,615,584	14,549,578

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Statement 5
Form 990 Part IV, Line 58
Other Assets

Annuities Trusts	10,814,529 20,486,680 31,301,209
Statement 6 Form 990 Part IV, Line 65 Other Liabilities	:
Annuities Liabilities under Unitrust Agreements Revocable Trust Liabilities	11,439,255 1,994,212 20,486,680 33,920,147
Statement 7 Form 990 Part IV-A, Line B(4) Other Amounts	
Cost of Goods Sold - Satelites Rental Expenses	584,020 898 584,918
Statement 8 Form 990 Part IV-B, Line B(4) Other Amounts	
Cost of Goods Sold - Satelites Rental Expenses	584,020 898 584,918

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Statement 9
Form 990, Part V
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	Q		0	0
Larry Ewing PO Box 75 Thompsonville, IL 62890	Treasurer 40 hrs/wk	60,729			
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
Nicholas Miller 2352 Bond Street Niles, MI 49120	Director None	C	•	0	0
Wintley Phipps PO Box 8008 Vero Beach, FL 32963	Director None	C	1	0	0
Danny Shelton 2954 New Lake Road West Frankfort, IL 62896	President Director 40 hrs/wk	59,294	!		

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

Moilie Steenson 400 E. 9th Street Johnston City, IL 62951	Secretary Director 40 hrs/wk	44,166		
G. Ralph Thompson 12501 Old Columbia Pike Silver Spring, MD 20904-6600	Director None	0	0	0
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	40,584 204,773	0	0

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

Illinois Oregon

Statement 11

Form 990, Part VII Relationship of Activities to the Accomplishment of Exempt Purposes Line # Explanation of Activities

Line #	Explanation of Activities
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
103b	Recovery of airtime and production revenue relating to religious programming
103c	Other income is used to help offset general operating expenses