

Form **990**

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

2007

Open to Public Inspection

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 the 2007 calendar year, or tax year beginning January 1, 2007, and ending December 31, 20 07

B Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization
Three Angels Broadcasting Network, Inc
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
3391 Charley Good Road, P.O. Box 220
 City or town, state or country, and ZIP + 4
West Frankfort, IL 62896

D Employer identification number
 ■■■■■■■■

E Telephone number
 (**618**) **627-4651**

F Accounting method: Cash Accrual
 Other (specify) ▶

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? Yes No
 (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: ▶

J Organization type (check only one) ▶ 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Check here ▶ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶

M Check ▶ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)			
Revenue	1 Contributions, gifts, grants, and similar amounts received:		
	a Contributions to donor advised funds	1a	14,199,289
	b Direct public support (not included on line 1a)	1b	
	c Indirect public support (not included on line 1a)	1c	
	d Government contributions (grants) (not included on line 1a)	1d	
	e Total (add lines 1a through 1d) (cash \$ <u>12,696,631</u> noncash \$ <u>1,502,658</u>)	1e	14,199,289
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	998,789
	3 Membership dues and assessments	3	
	4 Interest on savings and temporary cash investments	4	4557
	5 Dividends and interest from securities	5	
	6a Gross rents	6a	43,665
	b Less: rental expenses	6b	2,089
c Net rental income or (loss). Subtract line 6b from line 6a	6c	41,576	
7 Other investment income (describe ▶)	7		
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other
		377,013	8a align="right">138,914
	b Less: cost or other basis and sales expenses.	371,878	8b align="right">140,721
	c Gain or (loss) (attach schedule)	5,135	8c align="right">(1,807)
d Net gain or (loss). Combine line 8c, columns (A) and (B)		8d	3,328
9 Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>	a Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a	
	b Less: direct expenses other than fundraising expenses	9b	
	c Net income or (loss) from special events. Subtract line 9b from line 9a	9c	
10a Gross sales of inventory, less returns and allowances		10a	555,717
	b Less: cost of goods sold	10b	435,725
	c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c	119,992
11 Other revenue (from Part VII, line 103)	11	(265,713)	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	15,101,818	
Expenses	13 Program services (from line 44, column (B))	13	12,960,097
	14 Management and general (from line 44, column (C))	14	4,279,056
	15 Fundraising (from line 44, column (D))	15	
	16 Payments to affiliates (attach schedule)	16	
	17 Total expenses. Add lines 16 and 44, column (A)	17	17,239,153
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12	18	(2,137,335)
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	16,236,150
	20 Other changes in net assets or fund balances (attach explanation)	20	
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	14,098,815

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A	249,910	43,356	206,554	
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B				
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26	Salaries and wages of employees not included on lines 25a, b, and c	3,946,150	2,903,979	1,042,171	
27	Pension plan contributions not included on lines 25a, b, and c				
28	Employee benefits not included on lines 25a - 27				
29	Payroll taxes	264,055		264,055	
30	Professional fundraising fees				
31	Accounting fees	51,139		51,139	
32	Legal fees	1,100,545		1,100,545	
33	Supplies	256,052	104,432	151,620	
34	Telephone	206,845	206,845		
35	Postage and shipping	606,104	545,494	60,610	
36	Occupancy	388,488	211,547	176,941	
37	Equipment rental and maintenance	3,864,715	3,741,309	123,406	
38	Printing and publications	224,150			
39	Travel	1,173,321	956,940	216,381	
40	Conferences, conventions, and meetings	17,207		17,207	
41	Interest	27,225		27,225	
42	Depreciation, depletion, etc. (attach schedule)	1,825,183	1,825,183		
43	Other expenses not covered above (itemize):				
a	Statement 2	43a 3,038,064	2,196,862	841,202	
b	-----	43b			
c	-----	43c			
d	-----	43d			
e	-----	43e			
f	-----	43f			
g	-----	43g			
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	17,239,153	12,960,097	4,279,056	



Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a Total revenue, gains, and other support per audited financial statements				a	15,539,632
b Amounts included on line a but not on Part I, line 12:					
1	Net unrealized gains on investments	b1			
2	Donated services and use of facilities	b2			
3	Recoveries of prior year grants	b3			
4	Other (specify): <u>Statement</u>	b4	437,814		
	Add lines b1 through b4			b	437,814
c Subtract line b from line a				c	15,101,818
d Amounts included on Part I, line 12, but not on line a :					
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2			
	Add lines d1 and d2			d	
e Total revenue (Part I, line 12). Add lines c and d				e	15,101,818

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a Total expenses and losses per audited financial statements				a	17,676,967
b Amounts included on line a but not on Part I, line 17:					
1	Donated services and use of facilities	b1			
2	Prior year adjustments reported on Part I, line 20	b2			
3	Losses reported on Part I, line 20	b3			
4	Other (specify): <u>Statement 8</u>	b4	437,814		
	Add lines b1 through b4			b	437,814
c Subtract line b from line a				c	17,239,153
d Amounts included on Part I, line 17, but not on line a :					
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2			
	Add lines d1 and d2			d	
e Total expenses (Part I, line 17). Add lines c and d				e	17,239,153

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
<u>Statement 9</u>				
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Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)		Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 13		
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b	✓
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 I, 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 the organization? See the instructions for the definition of "related organization." If "Yes," attach a statement that includes the information described in the instructions.	75c	✓
d	Does the organization have a written conflict of interest policy?	75d	✓

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances

Part VI Other Information (See the instructions.)		Yes	No
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76	✓
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	✓
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	✓
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	✓
b	If "Yes," enter the name of the organization ▶ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a	Enter direct and indirect political expenditures. (See line 81 instructions.) 81a		
b	Did the organization file Form 1120-POL for this year?	81b	✓

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Part VI Other Information (continued)

		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		✓
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
84b			
85a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?		
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 complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	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 year?	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX.	88a	✓
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI.	88b	✓
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0; section 4912 ▶ 0; section 4955 ▶ 0		
b	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 a statement explaining each transaction.	89b	
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		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	✓
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	✓
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	
90a	List the states with which a copy of this return is filed ▶ See Statement 10		
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90b	
91a	The books are in care of ▶ Brian Hamilton Telephone no. ▶ (618) 627-4651 Located at ▶ 3391 Charley Good Rd, PO Box 220, West Frankfort, IL ZIP + 4 ▶ 62896		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.	91b	✓

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Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country **Russia**

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 Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a Production and Distribution					998,789
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					4,557
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					41,576
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					3,328
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					119,992
103 Other revenue: a					
b Change in value split interest agreements					(290,831)
c Other					25,118
d					
e					
104 Subtotal (add columns (B), (D), and (E))					902,529
105 Total (add line 104, columns (B), (D), and (E))					902,529

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
 (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization **make** any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

				Yes	No
(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer		
a					
b					
c					
Totals					

107 Did the reporting organization **receive** any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

				Yes	No
(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer		
a					
b					
c					
Totals					

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

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

Please Sign Here

Signature of officer: *James W. Gilley* Date: 11-11-08

James W. Gilley, President and CEO

Type or print name and title

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____

Check if self-employed

Preparer's SSN or PTIN (See Gen. Inst. X) _____

Firm's name (or yours if self-employed), address, and ZIP + 4: _____

EIN: _____

Phone no.: () _____

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

OMB No. 1545-0047

2007

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Three Angels Broadcasting Network, Inc.

Employer identification number

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.")

(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
CA Murray 14645 Paulton Rd, Thompsonville, IL 62890	Production Manager	55,832		
Moses Primo P.O. Box 39, Thompsonville, IL 62890	Director of Engineering	63,880		
Lenard Westphal 25306 Cypress St., Loma Linda, CA 92354	Trust Service Director	52,860		
Total number of other employees paid over \$50,000 ▶		0		

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
Siegel Brill Greupner Duffy 100 Washington Ave S Ste 1300, Minneapolis, MN 55401-2110	Legal Services	631,330
The Hartford P.O. Box 2907, Hartford, CT 06104-2907	Insurance	191,823
Fierst, Pucci and Kane LLP 64 Gothic Street, North Hampton 01060-3042	Legal Service	121,069
Guadian Life Insurance P.O. Box 95101, Chicago, IL 60694-5101	Insurance-Employee Benefits	75,368
Davis Wright Tremaine LLP 1201 Third Ave Suite 2200, Seattle, WA 98101	Legal Services	68,127
Total number of others receiving over \$50,000 for professional services ▶	2	

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 \$50,000	(b) Type of service	(c) Compensation
Intelsat Corporation P.O. Box 7247-8912, Philadelphia, PA 19170-8912	Satellite	627,330
SES Americom California, Inc P.O. Box 642961, Pittsburgh, PA 15264-2961	Satellite	450,073
R.R. Satellite Communications 4 Hagoren Street, Industrial Park, Omer, Israel 84965	Satellite	446,000
TopField N & S America 1064 Salk Road, Unit 11, Pickering, ON Canada L1W 4B5	Satellite Receiver Equipment	363,614
Smith & Butterfield PO Box 3446, Evansville, IN 47733-3446	Printing	331,568
Total number of other contractors receiving over \$50,000 for other services ▶	21	

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

Cat. No. 11285F

Schedule A (Form 990 or 990-EZ) 2007

Part III Statements About Activities (See page 2 of the instructions.)

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)		✓
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?		✓
b	Lending of money or other extension of credit?		✓
c	Furnishing of goods, services, or facilities?	✓	
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		✓
e	Transfer of any part of its income or assets?		✓
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)		✓
b	Did the organization have a section 403(b) annuity plan for its employees?		✓
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		✓
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		✓
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		✓
b	Did the organization make any taxable distributions under section 4966?		✓
c	Did the organization make a distribution to a donor, donor advisor, or related person?		✓
d	Enter the total number of donor advised funds owned at the end of the tax year ▶		0
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶		0
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶		0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶		0

**THREE ANGELS BROADCASTING NETWORK, INC.
990 - SUPPLEMENTAL INFORMATION
YEAR ENDED DECEMBER 31, 2007**

[REDACTED]

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

Other Expenses	Total	Program Management Services	& General	Fundraising
Advertising and Promotion	92,286		92,286	
Bad Debts	330		330	
Bank Charges	73,342		73,342	
Broadcasting	273,709	273,709		
Cable Promotion	1,145	1,145		
Cost of Goods Given Away	1,065,030	1,065,030		
Contract Labor	105,866	105,796		70
Donations	125,739		125,739	
Dues and Registration	31,624	31,624		
Insurance	344,958		344,958	
Miscellaneous	74,421		74,421	
Music Production	41,684	41,684		
Special Projects	701,597	677,874		23,723
Trust	106,333		106,333	
	<u>3,038,064</u>	<u>2,196,862</u>	<u>841,202</u>	

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

Land held in Charitable Remainder Unitrusts	<u>3,120,000</u>
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**Statement 4
Form 990, Part IV, Line 57
Land, Buildings and Equipment**

Asset	Cost	Accum. Deprec.	Net Book Value
Buildings	6,679,379	1,319,658	5,359,721
Land	725,273		725,273
Land Improvements	534,047	161,117	372,930
Machinery & Equipment	20,958,895	16,435,241	4,523,654
Vehicles	1,415,948	1,364,609	51,339
Construction in Progress	391,676		391,676
	<u>30,705,218</u>	<u>19,280,625</u>	<u>11,424,593</u>

THREE ANGELS BROADCASTING NETWORK, INC.
990 - SUPPLEMENTAL INFORMATION
YEAR ENDED DECEMBER 31, 2007

[REDACTED]

Statement 5
Form 990 Part IV, Line 58
Other Assets

Deposits	288,951
Annuities	10,577,027
Trusts	29,120,646
	<u>39,986,624</u>

Statement 6
Form 990 Part IV, Line 65
Other Liabilities

Annuities	12,723,751
Liabilities under Unitrust Agreements	1,595,547
Revocable Trust Liabilities	29,120,646
	<u>43,439,944</u>

Statement 7
Form 990 Part IV-A, Line B(4)
Other Amounts

Cost of Goods Sold - Satellites	435,725
Rental Expenses	2,089
	<u>437,814</u>


Statement 8
Form 990 Part IV-B, Line B(4)
Other Amounts

Cost of Goods Sold - Satellites	435,725
Rental Expenses	2,089
	<u>437,814</u>

THREE ANGELS BROADCASTING NETWORK, INC.
990 - SUPPLEMENTAL INFORMATION
YEAR ENDED DECEMBER 31, 2007

[REDACTED]

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	62,558		
Merlin Fjarli 670 Mason Way Medford, OR 97501	Director None	0	0	0
Bill Hulseley 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	78,404	0	0

**THREE ANGELS BROADCASTING NETWORK, INC.
990 - SUPPLEMENTAL INFORMATION
YEAR ENDED DECEMBER 31, 2007**

[REDACTED]

**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	65,592		
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	43,356	0	0
		249,910		

**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
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
100	Gain or loss from sales other than inventory helps offset general operating expenses
102	Sale of satellite dishes to enable viewers to receive programming
103c	Other income is used to help offset general operating expenses

**Statement 12
Schedule A, Part III, Line 2c**

Three Angels Broadcasting Network, Inc. uses the services of the Westphal Law Group a principal of which is related to the Director of Trust Services
Three Angels Broadcasting Network, Inc. purchases inventory from a corporation controlled by a person related to the President.
Three Angels Broadcasting Network, Inc. contracts music services from a person related to the President.