# **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)

Open to Public

OMB No 1545-0047

Ex.

		of the Treasu enue Service	ry 🕨	The organization ma	ay have to	use a copy of this re	turn to sa	atisfy state repor	ting re	equirer	ments Inspection
A	For t	he 2005 c	alendar	year, or tax year t	beginning		, 2005	, and ending			, 20
R	Check if	Check if applicable Please C Name of organization						D	Emplo	yer identification number	
		s change	use IRS label or	Three Angels B	roadcasti	ng Network, Inc.					9056
=	Name o	-	print or	Number and street	(or PO box	if mail is not delivered	to street a	ddress) Room/suit	e E	Telepi	none number
$\equiv$	Initial re	-	type See	3391 Charley Go	ood Rd., P	O Box 220				(618	) 627-4651
=	Final re		Specific Instruc-	City or town, state	or country, a	nd ZIP + 4			F	Account	ing method: Cash 🗹 Accrual
=		ed return	tions.	West Frankfort,	IL 62896				_		ther (specify) ▶
$\overline{\Box}$	Applicat	tion pending	• Sec	ction 501(c)(3) organ	izations and	d 4947(a)(1) nonexemp	ot charita				e to section 527 organizations
	• •	. •	tru	sts must attach a cor	mpleted Sch	edule A (Form 990 or	990-EZ).		_		n for affiliates? Yes Mo
G	Websit	te: ► 3abı	n.org			·- <u>-</u> -		1 ''			ber of affiliates
.1	Organi	ization tune	/check c	only one) > 501(	0/3/40	nsert no )	\or □	H(c) Are al 527 (If "No			uded? Yes No.it. See instructions)
_								H(d) le thie			m filed by an
ĸ						ormally not more than \$ anization chooses to file		Organi.			by a group ruling? Yes No
	_			Some states require					Exem	ption N	lumber ▶
_											the organization is not required
_				s 6b, 8b, 9b, and 1							Form 990, 990-EZ, or 990-PF)
Р	art I	Rever	ue, Ex	penses, and Cl	hanges ii	n Net Assets or	Fund B	alances (See	the	instru	ctions.)
	1	Contribi	utions,	gifts, grants, and	simılar an	nounts received.	1 . 1	44.00			
	а	Direct p	ublic s	upport			1a	14,060	,275	-	
	b	Indirect	•	• • • • • •			1b			} .	
	С			ontributions (grant			1c				44 000 000
	d					13,456,923 noncas				1d	14,060,275
	2	_		-	_	ent fees and contrac	cts (from	Part VII, line 9	3)	2	1,162,106
	3			ues and assessme					•	3	6 470
	4			ngs and tempora	-					5	6,470
	5			interest from secu	urities .				,801	-	
	6a	Gross re					6a   6b		,757	1	
	b			oenses , , , .					.,,,,,,,,	6c	42,044
	7 C			me or (loss) (subti		o from line baj			i	7	72,044
Revenue	1			nt income (descri	1	(A) Securities	T = T	(B) Other		-	
evel	Ba			from sales of asse	ets other	50,397	8a	11	,471	1	
Œ	h	than inv	•	er basis and sales		51,725		<del></del>	,349	1	
	Į.			attach schedule)	expenses.	(1,328)			,122	1 1	
	1			s) (combine line 8c					<u>, </u>	8d	(206)
	9	_		• •		any amount is from	aamina	check here	i		
	່ັ.	•		(not including \$ _	, , , , , , , , , , , , , , , , , , ,	of	ga,g,	0.1001(1.010	_		
	"			ported on line 1a	)		_9a			<u> </u>	
	Ь			penses other than			9b				
						subtract line 9b fro	m line 9	a)		9с	
	10a			inventory, less ret			10a		,361		
	b	Less: co	st of g	oods sold			10b	609	,669	i	
	С	Gross pr	ofit or (le	oss) from sales of in	ventory (at	tach schedule) (subtr	act line 1	0b from line 10a	a).	10c	254,692
	11			(from Part VII, line					1	11	(568,784)
	12					, 8d, 9c, 10c, and 1	1)	· 1000	<del>   </del> -	12	14,956,597
ų,	13	_		es (from line 44, o		) · :· · ·		ENED	1881	13	10,511,457
Expenses	14	_		nd general (from I		olumn (C))	REC		/Q	14	4,927,633
xpe	15		Fundraising (from line 44, column (D))						୍/ଏ	15	
Ü	16   17			filiates (attach sch s (add lines 16 an		(A)	الحد ا	· 3. W. L.	المسينس	<b>516</b> 17	45 420 000
	-						1 .11150		F	18	<u>15,439,090</u> 482,493
set	18	EXCESS I	or (defi	cit) for the year (s	uptract (in	e 17 from line 12)	ه سیناه	SOFN.	سسسنسا	19	19,952,817
Net Assets	19	Other of	ers or fr	und balances at b	eginning (	e 17 from line 127 of year (from line 7 ces (attach explai	o, commun	(1)		20	13,332,017
N F	20 21	Net asse	iany <del>o</del> s its or fii	nd balances at en	d of vear (	ces (attach explai) combine lines 18, 1	anony	0)	:	21	19,470,324
								<u>,</u>			

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2005)



Form	990 (2005)						age
Pa	t V-A Current Officers, Directors, Trustee	s, and Key Employe	es (continued)			Yes	No
75a	Enter the total number of officers, directors, and tr meetings	rustees permitted to vo	ote on organizatio	n business at board 11			,
b	Are any officers, directors, trustees, or key employemployees listed in Schedule A, Part I, or high	hest compensated p	rofessional and	other independent			
	contractors listed in Schedule A, Part II-A or relationships? If "Yes," attach a statement that ide	ill-B, related to each entifies the individuals	and explains the	relationship(s)	75b		•
С	Do any officers, directors, trustees, or key employeemployees listed in Schedule A, Part I, or hig	hest cornpensated p	rofessional and	other independent			
	contractors listed in Schedule A, Part II-A or II-B, retax exempt or taxable, that are related to this orga <b>Note</b> . Related organizations include section 509(	inization through comr	non supervision o		75c		V
	If "Yes," attach a statement that identifies to organization and the other organization(s) including amounts paid to each individual between the control of	he individuals, expla , and describes	ins the relations the compensati	thip between this on arrangements,			
d	Does the organization have a written conflict of it		<u>.</u>		75 <u>d</u>		~
Pa	t V-B Former Officers, Directors, Trustees, and officer, director, trustee, or key employee reperson below and enter the amount of comp	eceived compensation of pensation or other benef	r other benefits (de its in the appropria	escribed below) during te column. See the ins (D) Contributions to employee	the y struction	ear, lis ons.) Expen	st tha
Line	(A) Name and address  a Shelton	(B) Loans and Advances	(C) Compensation	benefit plans & deferred compensation plans		int and lowance	
	Renwick Dr., Springfield, IL 62704	-	82,922		<u> </u>		
				· · · · · · · · · · · · · · · · · · ·	<u> </u>	·	
					ļ <u>.</u>		
		•					
		-					
		•					
		•					
		-			<u> </u>		
		-				,	
Par	t VI Other Information (See the instruction					Yes	No
76	Did the organization engage in any activity not p description of each activity		the IRS? If "Yes,	" attach a detailed	76		1
77	Were any changes made in the organizing or gov If "Yes," attach a conformed copy of the changes	erning documents but	t not reported to	the IRS?	77		<b>V</b>
78a	Did the organization have unrelated business grothis return?	oss income of \$1,000	or more during ti	ne year covered by	78a		<b>V</b>
	If "Yes," has it filed a tax return on Form 990-T f				78b	$\vdash\vdash$	
79	Was there a liquidation, dissolution, termination, of a statement	or substantial contract	ion during the ye	ar? If "Yes," attach	79		1
80a	Is the organization related (other than by associa						
<b>h</b>	common membership, governing bodies, truste organization?  If "Yes," enter the name of the organization			npt or nonexempt	80a		1
	Enter direct and indirect political expenditures. (S	and check whether it	ıs 🗆 exempt o	r ☐ nonexempt			
	Did the organization file <b>Form 1120-POL</b> for this		,., <u>Gia</u>		81b		

Form	990 (2005)		P	Page 7
Pa	rt 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?	82a		~
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.		<del> </del>	ļ
	(See instructions in Part III.)	-	<b>'</b>	]
	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a		<del>                                     </del>
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b 84a	~	-
	Did the organization solicit any contributions or gifts that were not tax deductible?	04d		_
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or	84b	, <u>-</u>	<u> </u>
	gifts were not tax deductible?	85a		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85b		
D	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	000		<b></b>
	If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
_	Dues, assessments, and similar amounts from members			1
	Dues, assessments, and similar amounts from members	1		
	Section 192(a) tobbying and pointed experiences	1		
e	Taxable amount of lobbying and political expenditures (line 85d less 85e)	1	-	1
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
_	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f			
n	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	] ]		
b	Gross receipts, included on line 12, for public use of club facilities	]		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	1 1	- 1	
b	Gross income from other sources. (Do not net amounts due or paid to other			
	sources against amounts due or received from them.)	1 1		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or		Ì	
	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	88	<del></del>	/
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:		!	l
	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction	1 1	ĺ	
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach	89b	ľ	
	a statement explaining each transaction	oan		
С	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year			
	under sections 4912, 4955, and 4958			
	List the states with which a copy of this return is filed Statement 10			
	Number of employees employed in the pay period that includes March 12, 2005 (See	••••		
D	instructions.)	13	0	
91a	The books are in care of ▶ Larry Ewing Telephone no. ▶ (618)6	27-46	51	
	Located at ▶ 3391 Charley Good Road, West Frankfort, IL ZIP + 4 ▶ 62890-	0220		
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		Yes	No
	account)?	91b		
	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.	<del> </del>		
C	The any time during the eartheat year, and the erganization maintain an embe eatelde of the embed etailed.	91c		
	If "Yes," enter the name of the foreign country ▶			_
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		. •	۲ ⊔

Form 99	0 (2005)					Page 8
Part	VII Analysis of Income-Producing	Activities (See th	ne instructions	.)		
Note:	Enter gross amounts unless otherwise	Unrelated bu	isiness income	Excluded by sea	tion 512, 513, or 514	(E)
indicat	•	(A)	(B)	(C)	(D)	Related or exempt function
93	Program service revenue:	Business code	Amount	Exclusion code	Amount	income
а	Production and Distribution		· · · · · · · · · · · · · · · · · · ·			1,162,106
b						
С						
d						
е				<u> </u>		
f	Medicare/Medicaid payments					
g	Fees and contracts from government agenci	es				
94	Membership dues and assessments	1 1				
95	Interest on savings and temporary cash investmen	1 :				6,470
96	Dividends and interest from securities					
97	Net rental income or (loss) from real estate:					
а	debt-financed property					
b	not debt-financed property					42,044
98	Net rental income or (loss) from personal propert					
99	Other investment income	·				
100	Gain or (loss) from sales of assets other than inventor					(206)
101	Net income or (loss) from special events .	,				
102	Gross profit or (loss) from sales of inventory					254,692
103	Other revenue: a					
b	Change in value split interest agreements	<u> </u>				(626,366)
С	Other		·			57,582
d						
е						
104	Subtotal (add columns (B), (D), and (E))				<u> </u>	896,322
	Total (add line 104, columns (B), (D), and (E				. •	896,322
	Line 105 plus line 1d, Part I, should equal th					
Part \	Relationship of Activities to the A	ccomplishment of	Exempt Purp	oses (See th	e instructions.)	
Line I					mportantly to the	accomplishment
	of the organization's exempt purposes (or	ther than by providin	g tunds for such	purposes).		
	Statement 11					
			1 1 5			
Part	Information Regarding Taxable Sul	451	regarded Entit	ies (See the	nstructions.)	(E)
	Name, address, and EIN of corporation,	(B) Percentage of	(C) Nature of ac	etivities	(D) Total income	<b>(E)</b> End-of-year
	partnership, or disregarded entity c	ownership interest	Nature or ac		Total income	assets
		%				
		%				
		<u>%</u>				
Part 2	Information Regarding Transfers Ass	%	nal Banafit Car	stracte (See t	ho instructions )	
	<del></del>			· · · · · · · · · · · · · · · · · · ·	_ <del></del>	
	Did the organization, during the year, receive any funds,					∐ Yes ∐ No
	Did the organization, during the year, pay pro			personal ber	nefit contract? (	」Yes ∐ No
NOTE	: If "Yes" to (b), file Form 8870 and Form 4  Under penalties of perjury, I declare that I have exam			and the and state	ments and to the he	et of my knowledge
	and belief, it is true, correct, and complete Declarat					
Please		•		1	5/3///	56
Sign	Signature of officer				ate / C	7 67
Here	Larry Ewing - Treasurer			U		
	Type or print name and title	<del></del>				
			Date	Check if	Preparer's SSN or	PTIN (See Gen Inst W)
Paid	Preparer's signature			self- employed ▶ [	1	(222 Con High 11)
Preparer	S Firm's name (or yours )			EIN	<u> </u>	
Use Only	if self-employed), address, and ZIP + 4				no ▶ ( )	
	1	<del></del>		1. 110110	···	

Pa	rt III	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	attem or inc	g the year, has the organization attempted to influence national, state, or local legislation, including any pt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid urred in connection with the lobbying activities   \$	1_1_		•
	organ	nizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other izations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of bbying activities.			
2	substantial substa	g the year, has the organization, either directly or indirectly, engaged in any of the following acts with any antial 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 or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the actions.)			
а	Sale.	exchange, or leasing of property?	2:3		~
b		ng of money or other extension of credit?	2b		~
c		hing of goods, services, or facilities?	20		~
d		ent of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		~
е	-	fer of any part of its income or assets?	29		~
3a	Do yo	u make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how etermine that recipients qualify to receive payments)	3.a		~
b	•	u have a section 403(b) annuity plan for your employees?	3lo		~
	•	the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c		1
4a		bu maintain any separate account for participating donors where donors have the right to provide advice on			1
	•	e or distribution of funds?	411		
b	Do yo	u provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		~
Pai	rt IV	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.	)		
The	organiz	ation is not a private foundation because it is. (Please check only <b>ONE</b> applicable box)			
5		church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6		school. Section 170(b)(1)(A)(ii). (Also complete Part V)			
7	_	hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8	_	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 hos	pital's	name,	, city
10		organization operated for the benefit of a college or university owned or operated by a governmental unit. Sec Iso complete the <b>Support Schedule</b> in Part IV-A.)	tion 170	)(b)(1)(	(A)(IV)
11a		n organization that normally receives a substantial part of its support from a governmental unit or from the gene 10(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)	eral pub	lic. Se	ction
11b	$\square$ A	community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)			
12		organization that normally receives. (1) more than $33\%\%$ of its support from contributions, membership fees,			
		om activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33			
		om gross investment income and unrelated business taxable income (less section 511 tax) from businesse ganization after June 30, 1975. See section 509(a)(2). (Also complete the <b>Support Schedule</b> in Part IV-A.)	s acqu	ired b	y the
13	de	organization that is not controlled by any disqualified persons (other than foundation managers) and supposeribed in. (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of sections box that describes the type of supporting organization: Type 1 Type 2		)(2). C	
	_	Provide the following information about the supported organizations. (See page 6 of the instructions	.)		
		(a) Name(s) of supported organization(s)	numb n above		
				_	
	_				
				_	

### THREE ANGELS BROADCASTING NETWORK, INC. 990 - SUPPLEMANTAL INFORMATION YEAR ENDED DECEMBER 31, 2005

#37-1179056

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

·		Program	Management	
Other Expenses	Total	Services	& General	Fundraising
			= 4	
Advertising and Promotion	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

## THREE ANGELS BROADCASTING NETWORK, INC. 990 - SUPPLEMANTAL INFORMATION YEAR ENDED DECEMBER 31, 2005

#37-1179056

Statement 5	
Form 990 Part IV, Line 58	3
Other Assets	

Annuities	12,551,006
Trusts	22,214,079
1145.65	35,578,962

#### Statement 6 Form 990 Part IV, Line 65 **Other Liabilities**

Annuities	12,602,521
Liabilities under Unitrust Agreements	1,698,669
Revocable Trust Liabilities	22,214,079
	36,515,269

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

Cost of Goods Sold - Satelites	609,669
Rental Expenses	2,757
·	612,426

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

Cost of Goods Sold - Satelites	609,669
Rental Expenses	2,757
·	612,426

# Page 4

THREE ANGELS BROADCASTING NETWORK, INC. 990 - SUPPLEMANTAL INFORMATION YEAR ENDED DECEMBER 31, 2005

#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 Fjarlı 670 Mason Way Medford, OR 97501	Director None	0	C	)	0
Bill Hulsey PO Box 596 Collegedale, TN 37315	Director None	0	C	)	0
Ellsworth McKee PO Box 750 Collegedale, TN 37315	Director None	0	C	)	0
Wintley Phipps PO Box 8008 Vero Beach, FL 32963	Director None	0	C	)	0
Danny Shelton 2954 New Lake Road West Frankfort, IL 62896	President Director 40 hrs/wk	70,944			

### THREE ANGELS BROADCASTING NETWORK, INC. 990 - SUPPLEMANTAL INFORMATION YEAR ENDED DECEMBER 31, 2005

#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

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

Line#

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 velwers to receive programming
103c	Other income is used to help offset general operating expenses

**Explanation of Activities**