Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public
Inspection

2016

Department of the Treasury Internal Revenue Service

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

<u>A</u>	For the	e 2016 calend	lar year, or tax year beginning	07-01	, 2016, and e	nding		-30 ,2017
В	Check if	applicable	C Name of organization CHRISTIAN ACTION NETWORK				□□□	Employer identification no.
	Address	change	Doing business as					54-1756470
	Name ch	ange	Number and street (or P O box if mail is not delivered to street address)			Room/suite	E	Telephone number
	Initial reti	urn	РО Вож 606				ı	(434)237-8201
	Final retu	rn/terminated	City or town, state or province, country, and ZIP or foreign postal code					1,098,170
\equiv	Amended		Forest, VA 24551					Gross receipts\$
\equiv		on pending	F Name and address of principal officer MARTIN MAWYER			H(a) Is this a group		
	тррпоат.	on penumg	Same as C above		2.5	H(b) Are all subor		
	Tay ayar	npt status X	501(c)(3)	527				list (see instructions)
			v.christianaction.org	527		 -		•
	Website:			T		H(c) Group exer		
			Corporation Trust Association Other	L Ye	ear of formation 1	1995 M State	of legal	domicile VA
	rt [Summar		m				
	1	•						via multimedia
9			tions, public forums & meetings, pamphl					
Activities & Governance	- }		political & religious topics & issues,	and th	err errec	ts on the p	1DI1	c's peace,
Je.			ty, freedoms & inalienable rights.					
ő	2		xxx ► ☐ if the organization discontinued its operations or disp	osea of m	iore than 25% (of its net assets	_ 1	_
~8	3		oting members of the governing body (Part VI, line 1a)		•	}	3	4
ies	4		ndependent voting members of the governing body (Part VI, lin				4	3
₹	5		er of individuals employed in calendar year 2016 (Part V, line 2	≘) .			5	7
Ş	6		er of volunteers (estimate if necessary)	•			6	
	- 1		ted business revenue from Part VIII, column (C), line 12	•			7a	0
	b	Net unrelate	d business taxable income from Form 990-T, line 34				7b	0
					1	Prior Year		Current Year
	8	Contribution	s and grants (Part VIII, line 1h)			875	,880	997,495
Revenue	9	Program ser	vice revenue (Part VIII, line 2g)					0
ĕ	10	Investment i	ncome (Part VIII, column (A), lines 3, 4, and 7d)		Ĺ			0
æ	11	Other reven	ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		[67	,282	100,675
	12	Total revenu	ie - add lines 8 through 11 (must equal Part VIII, column (A), lir	ne 12) 📌 .	:	943	,162	1,098,170
	13	Grants and	similar amounts paid (Part IX, column (A), lines 1-3) .' 🦟			1		0
	14	Benefits paid	d to or for members (Part IX, column (A), line 4)	ور برايس	. 17. SAJIA [0
10	15	Salaries, oth	er compensation, employee benefits (Part IX, column (A), Jine	s 5-10)	[441	,954	336,004
Expenses	16a	Professiona	I fundraising fees (Part IX, column (A), line 11e)	. 4	- · · · · · · · · · · · · · · · · · · ·			0
- De	b	Total fundra	ısıng expenses (Part IX, column (D), line 25) ► ;	17	1,747			
ŭ	17	Other exper	ises (Part IX, column (A), lines 11a-11d, 11f-24e)			578	,828	623,575
	18	Total expens	ses Add lines 13-17 (must equal Part IX, column (A), line 25)		T	1,020	,782	
	19	· · · · · · · · · · · · · · · · · · ·	ss expenses Subtract line 18 from line 12				,620	
·	3					Beginning of Current		End of Year
gg.	20	Total assets	(Part X, line 16)				, 282	422,048
Ass	21		es (Part X, line 26)				,283	341,458
Net Assets or	22	Net assets of	or fund balances Subtract line 21 from line 20		t	(58	,001	
	rt II	Signatu	ire Block					
Und	er nenalt	es of periury I d	eclare that I have examined this return, including accompanying schedules and s	tatements, a	ind to the best of my	y knowledge and belief,	ıt ıs	
true		and complete De	eclaration of pre-parer (other than officer) is based on all information of which pre-	arer has any	/ knowledge			-,,
	5.		$Q_{0} \setminus I \setminus Q_{0} \setminus Q_{0}$				la	1/25/18
Sig	n -	Signate	re of officer				Date	·+
He	re.	M	artin Mawyer Preside	4				
	· - ;	Type or	print name and title					
	~7	Print/Type pr	eparer's name Proparer's signature/,	Da	ate /	Check X	ıf P	
Pai	$\mathbf{d}^{(i)}$	Robert	1/2/1-1/1/1/1/1/		2//1//	self-employe		P01074516
	pare	ļ	744	& TAY	711	Firm's EIN	<u>- 1 -</u>	23,0,13,0
	e Onl			~ 24344	'	Phone no		
-	J	J innis addres	Lynchburg VA 24505			1	14-84	45-1626 /
May	the IR	S discuss this	s return with the preparer shown above? (see instructions)					Yes No
····			the property and the property					

If "Yes," complete Schedule G, Part III

EEA

Page 3

X

Checklist of Required Schedules Part IV is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," . . complete Schedule A Χ 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 X 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Χ Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Χ Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues. assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C. Part III . Χ Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I . . . Χ 7 Did the organization receive or hold a conservation easement, including easements to preserve open space. the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II Χ Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." Χ Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV X 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 X 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," . . . complete Schedule D. Part VI . . 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII X 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Χ 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Χ_ the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a 12a Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 Did the organization maintain an office, employees, or agents outside of the United States? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes." complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or Χ for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Χ 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19

Part IV

Checklist of Required Schedules (continued)

					Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or					
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on					
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the					1
	organization's current and former officers, directors, trustees, key employees, and highest compensated			} i		}
	employees? If "Yes," complete Schedule J			23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than					
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b					
	through 24d and complete Schedule K. If "No," go to line 25a			24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year					
	to defease any tax-exempt bonds?			24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit					
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I			25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior					
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?					
	If "Yes," complete Schedule L, Part I			25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any				_	[
	current or former officers, directors, trustees, key employees, highest compensated employees, or					ŀ
	disqualified persons? If "Yes," complete Schedule L, Part II			26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,					
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled					}
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III			27	····	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,					
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)					
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	•		28a	X	ļ
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete					}
	Schedule L, Part IV			28b	<u>X</u>	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			1		{
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	•		28c	X	ļ - <u></u> -
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified					
	conservation contributions? If "Yes," complete Schedule M			30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,					37
	Part I	•		31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			20		v
22	complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			32		X
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I			33		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,		•	33		X
34	or IV, and Part V, line 1			34	į	Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	•		35a		X
ooa b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	•		55a		-12
.,	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	•		555		
~	related organization? If "Yes," complete Schedule R, Part V, line 2			36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	•				- 22
··	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			1		ĺ
	Part VI			37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and					
	19? Note. All Form 990 filers are required to complete Schedule O			38	Х	
EEA				Form		2016)

Ether the number reported in Box 3 of Form 1996. Enter 0-4 in this policible Ether the number of Forms W-50 an Individual for 1996. Enter 0-4 in this applicable Different the number of Forms W-50 annubled in line 1. Enter-0-4 in the applicable Different the number of Forms W-50 annubled in line 1. Enter-0-4 in the applicable Different the number of Forms W-50 annubled in line 1. Enter-0-4 in the applicable Different the number of Forms W-50 annubled in line 1. Enter-0-4 in the applicable payments to vendors and reportable gaining (gambrilley) amongs to prize without the year of the applicable payments to vendors and reportable gaining (gambrilley) amongs to prize without the year of year of the Statements (line of the calcined year ending with or within the year overprid by this relum If a least one is reported on line 2a, did the organization five all required before its entructions) Note, it the sum of lines 1 and 2a, greater than 25 (30,000 are one during the year? 10 If "Yes," I see that field a Form 990-17 for the year? "If "Yes I line a Statements (10 to 19 annual year) 11 If "Yes," I see that field a Form 990-17 for the year? "If "Yes I line a Statement of the organization have an interest in, or a signature or other authority over, a internal account in a foreign country (yes Info Internal account in a foreign country (yes Internal accountry) 10 If "Yes," a dist the organization in the form 8886.1" (Yes Internal accountry of yes Intern	Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			<u></u>	<u>:</u>	ugo .
1a Enter the number reported in Box 3 of Form 1096. Enter -0 -1 and applicable 1a		* Check if Schedule O contains a response or note to any line in this Part V .		<u>. </u>			
b Einer the number of Forms W-SG included in line 1a. Einer -0- If not applicable 10	•					Yes	No
c Dit the organization comptly with backup withholding rules for reportable payments to vendors and reportable gamma (gainthaigh) uniminates to praw without a second process. The process of the process	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .	1a		9		
reportable garming (garmbing) winnings to prize winners? Either the number of employees reported on Form W.3. Trainsmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. Statements, filed for the calendar year ending with or within the year covered by this return. It is a statements, filed for the calendar year ending with or within the year covered by this returns? Note. If the sum of lines Is and 2s is greater than 250, you may be required to e-file (see instructions). B Od the organization have unreaded this uness gross encore of \$3.00 of more during the year? If "Yes," has it field is Form 990-T for this year? If "No" to line 30, provide an explanation in Schedule O. A Tay time during the calendar year, did the organization thave an interest in, or a signature or other authority over, a framenal account in a foreign country (section see a bank account, countries account.) If "Yes," enter the name of the foreign country is explained as a bank account, countries account. Find the grequirements for FindCIN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country." Sae instructions for thing requirements for FindCIN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," explained party notify the organization that it was or is a party to a prohibited tax sheller transaction? 5a Uses the organization aparty to a prohibited tax sheller transaction? 5b Uses the organization and party to a prohibited tax sheller transaction? 5c Uses the organization and party to a prohibited tax sheller transaction? 5b Uses the organization school and the were not tax deductible as charitable contributions or gifts were not tax deductibles? 11 "Yes," of the organization that was received that were not tax deductible as charitable contributions or gifts were not tax deductibility. 12 The organization shell was accounted to the proper statement of the organization shell and the organ	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b]		
2a Eiter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the catendar year ending with or within the year covered by this return b I al heast one is reported on line 2a, did the organization file all required feedwale employment as returns? Note: If the sum of lines Is and 2b is greater than 50,00 rum yeb required to e-file (see instructions) a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X b If Yes, This if filed a form 890-1 for this year? If No to line 30, provide an explanation in Soleholde O 3b A any time during the calendar year, of the organization have an intestion, or a significant or other authority over, a transcult account in a foreign country: 5a Note: If the during the calendar year, of the organization have a minetes in, or a significant or other authority over, a transcult account in a foreign country: 5a Note: If Yes, if one is one of the foreign country: 5a Note: If Yes, if one is organized in the foreign country: 5b Note: If Yes, if one is organized in the organization that it was or is a party to a prohibited tax sheller transaction of the organization and party to a prohibited tax sheller transaction at any time during the tax year? 5b D any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 5c Notes the organization have annual gross receipts that are normally greater than \$100,000, and did the organization in the foreign 886-T? 6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization receive an organization to tax deductible contributions or gifts where not tax deductible as chantable contributions? 6c Does the organization that may receive deductible contributions under section 178(e). 7c Organizations that may receive deductible contributions under section 178(e). 8d Did the organization receive a payment in excess of 375 made partly as a contribution or organi	С	Did the organization comply with backup withholding rules for reportable payments to vendors and				<u> </u>	
Statements, field for the calendar year ending with or within the year covered by this return 2a		reportable gaming (gambling) winnings to prize winners?		•	1c	X	
b II al least one is reported on line 2a, did the organization the all required federal employment tax returns? Note, If the sum of lines it and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unreliated business gross income of \$1,000 or more during the year? b If Yes, "has it field a Form 990-Ti for this year? If You're to line 3b, provide an explanation or Shedular O At any time during the calendar year, at the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. If Yes, "reter the name of the foreign country is one of the country over, a financial account in a foreign country. If Yes, "reter the name of the foreign country. If Yes, the organization are provided in the country over, a financial account in a foreign country. If Yes, the organization are provided in the organization and provided in the organization include with every solicitation an explose statement that such contributions or gifts were not tax deductibles or contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1	ľ			
Note. If the sum of lines 14 and 2a is greater than 250, you may be required to e-file (see instructions) 3		Statements, filed for the calendar year ending with or within the year covered by this return	2a	·	4		
3a Dut the organization have unrelated business gross income of \$1,000 or more during the year? 4b If "Yes," has filled a Form \$90. The tink year of "No" to lime \$80. growtos are registration or Schedule 0 4c 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 ≥ 1 bit "Yes," enter the name of the foreign country ≥ 1 bit "Yes," enter the name of the foreign country ≥ 1 bit "Yes," enter the name of the foreign country ≥ 1 bit in year to the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 bit of any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 bit of any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 bit if "Yes," did the organization and the Form 8889-1. 5 coses the organization have annual gross receipts that are normally greater than \$100,000, and did the organization there form 8889-1. 5 bit "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles contributions under section 170(c). 5 bit "Yes," did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7 bit "Yes," did the organization notify the donor of the value of the goods or services provided? 7 bit of the organization receive a payment in excess of \$75 made party as a contribution of party for which it was required to the Form 8829 as required? 7 bit of the organization received a contribution of undertoty, to pay premiums on a personal benefit contract? 7 bit of the organization received a contribution of qualified intellectual property, did the organization few payments of the promises of the form 8899 as required? 7 bit the organization received a contribution of outlified intellectual property, d	þ	· · · · · · · · · · · · · · · · · · ·			2b	X	
b If "Yes," has it field a Form 990-T for this year? If "Not 10 line 30, provide an explanation in Schedule O A hany time during the calendary year, did the organization have an interest in, or a signature or other durinority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts over, a financial account in a foreign country See instructions for fifing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," did the organization aparty to a prohibited tax shelter transaction at my time during the tax year? 5a Was the organization aparty to a prohibited tax shelter transaction at my time during the tax year? 5b Was the organization aparty to a prohibited tax shelter transaction at my time during the tax year? 5c Unit "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c Unit "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c Unit "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c Unit "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c Unit "Yes" to line 5a or 5b, did the organization in clude with every solicitation an express statement that such contributions or gits were not tax deductible? 6c Unit "Yes" to the organization include with every solicitation an express statement that such contributions or gits were not tax deductible? 6c Did the organization shat may receive deductible contributions under section 170(c). 6c Did the organization shat may receive deductible contributions under section 170(c). 6c Did the organization shall exchange, or otherwise dispose of tangible personal property for which it was required to life Form 8282? 6c Did the organization shall exchange, or otherwise dispose of tangible personal property for which it		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
4a 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 in a foreign country ► 5a in Yes; enter the name of the foreign country ► 5a country Frest, enter the name of the foreign country ► 5a country Frest, enter the name of the foreign country ► 5a was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? .			3a		X
over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts? b If "Yes," enter the name of the foreign country See instructions for fifting requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 52 Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 53 Was the organization a party to a prohibited tax sheller transaction? 54 b X 56 Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 55 b X 56 If "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 56 b X 57 Organization solicit any contributions the Form 8886-17 68 Did the organization include with every solicitation an express statement that such contributions or gits were not tax deductible? 69 Did the organization that may receive deductible contributions under section 170(c). 60 Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 60 Did the organization notify the donor of the value of the goods or services provided? 61 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to life Form 8282? 62 Did the organization received a contribution of qualified intellectual property, did the organization for payment in the value of the goods or services provided? 75 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8282 are equired? 76 If the organization received a contribution of qualified intellectual property, did the organization file Form 8294 are equired? 77 Did the organization received a contribution of advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organi	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O			3b		
b If "Yes," enter the name of the foreign country. b If "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Saw the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a	4a	-	•				
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Par	t Vi Governance, Management, and Disclosure For each "Yes" response to lines 2 through	7b below, and for	a "No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule	O See instruction	s.		
•	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>			. 🗓
Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	4		
	If there are material differences in voting rights among members of the governing body, or				
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	3	1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			1	[
	any other officer, director, trustee, or key employee?		2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct				
	supervision of officers, directors, or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed	l? .	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		. 5	<u> </u>	X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint		į		1
	one or more members of the governing body?		7a	ļ	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,)	}	}
	stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during				
	the year by the following.				
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		İ	}	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	de)		,	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	ļ	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		[ĺ
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		. 10b	+	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	g the form?	11a	X	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990		1		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		. 12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	se to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		1	.]	Ì
	describe in Schedule O how this was done	•	. 12c	X	\ , . -
13	Did the organization have a written whistleblower policy?		13		X
14	Did the organization have a written document retention and destruction policy?	•	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			}	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				17
а	The organization's CEO, Executive Director, or top management official	•	15a		X
b	Other officers or key employees of the organization	•	15b	 	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			}	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		40.		3.7
	with a taxable entity during the year?	•	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		466		
	organization's exempt status with respect to such arrangements?		16b		L
	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed Statement #17 Control of 1022 (or 1024 if applicable), 200 and 200 T (Scatton 6	01/01/210 05/11			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5	or(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply.	.,			
	Own website Another's website Upon request Other (explain in Schedule C				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte	rest policy, and			
	financial statements available to the public during the tax year.	auda -			
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	orus P			
	Bonnie Mawyer (434)237-8201, Corporate Address, Forest, VA 24551				

حر≃	rm?	990	(201	16)

5	4	_	1	7	5	6	4	7	0	
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Page 7

			1730470	
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest C	Compensat	ed Emp	loyees, and
	Independent Contractors		•	•

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors; institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles	Pos eck m ss per	son :	ne de Highest compensated employee	n)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) MARTIN MAWYER	40.00	.,		7,7		7.7			_	
PRESIDENT (2) DAVID CARROLL	1.00	X		X		X		133,374	0	0
BOARD CHAIRMAN		x		X				C	o	O
(3) TIMOTHY DEANE DIRECTOR	1.00	Х						0	0	0
(4) JERRY SKIRVEN DIRECTOR	1.00	Х							0	0
(5)										<u> </u>
(6)										,
(7)			 							
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part	Section A. Officers, Directors, Trustees,	Key Employ	ees, a	nd l	High	est	Comp	ens	ated Employees	(continued)			_
•	(A) Name and title	(B) Average hours per week (list any hours for	box, u	unles: er and	s pers	ore the	an one both an trustee)	Fc	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	an	(F) trmated tount of other pensation	
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	fr org an	om the anization of related inizations	
(15)	~								 				
(16)					-								
(17)													
(18)													
(19)													
(20)					-								
(21)													
(22)					-								
(23)									,				
(24)													
(25)													
1b c d	Sub-total Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c)	on A			l		ا ا ا	* *	133,374	0			0
2	Total number of individuals (including but not limited			ve)	who	rece	eived m	nore			L		
	reportable compensation from the organization			_						1_		Yes I	No
3	Did the organization list any former officer, director, employee on line 1a? <i>If "Yes," complete Schedule Jo</i>		-			or hi	_	com	pensated		3		X
4	For any individual listed on line 1a, is the sum of reporganization and related organizations greater than	ortable comp	oensat	ion a									
_	ındıvıdual										4		<u>X</u>
5	Did any person listed on line 1a receive or accrue c for services rendered to the organization? If "Yes,"						_	nizat	ion or individual		5		X_
Secti 1	on B. Independent Contractors Complete this table for your five highest compensat	ed independe	ent cor	ntrac		that	receiv	ed r	more than \$100.00	 O of			
•	compensation from the organization Report compe												
	(A) Name and business address								(B) Description of	services		C) ensation	
													_
2	Total number of independent contractors (including received more than \$100,000 of compensation from			ose •	liste	d ab	ove) w	/ho				00 (004	

Check if Schedule O contains a response or note to any kine in this Part VIII Tod leverus Plates or Plate	Part \	/111	Statement of Revenu	ie						
Total revenue Patients or Section 1 Total revenue Patients or Sect			Check if Schedule O contain	s a respons	e or no	ote to any line in this	s Part VIII	<u></u>		
b Membership dues 1b								Related or exempt function	Unrelated business	Revenue excluded from tax under sections
Total. Add lines 1a:11	ις (S	1a	Federated campaigns	. ,	1a					
Total. Add lines 1a:11	oun	ь	Membership dues		1b					
Total. Add lines 1a:11	A,G	c	Fundraising events .		1c			j		
Total. Add lines 1a-11	⊒ ≣a:	d	Related organizations	· · · · · i	1d			ļ		
Total. Add lines 1a-11	Sir	е	-		1e			1		
Total. Add lines 1a-11	utio	f				,				
Total. Add lines 1a-11	ë Q	1				997,495				
Business Code Business Code	ည် ရှိ	g		d in lines 1a-	·1f. \$			ļ		
22a b b c d d c d d d d d d d d d d d d d d		h	Total. Add lines 1a-1f		· · ·		997,495			
Total. Add lines 2a-2f 3 Investment more (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6a Gross rents 6b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) for ontributions reported on line 1c) See Part IV, line 18 a b Less direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 a b Less cost of goods sold c Not income of (loss) from gaming activities a Less direct expenses d All other revenue e Total. Add lines 11a-11d	e					Business Code	1	ļ		
Total. Add lines 2a-2f 3 Investment more (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6a Gross rents 6b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) for ontributions reported on line 1c) See Part IV, line 18 a b Less direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 a b Less cost of goods sold c Not income of (loss) from gaming activities a Less direct expenses d All other revenue e Total. Add lines 11a-11d	venu									+
Total. Add lines 2a-2f	ě	b								+
Total. Add lines 2a-2f	2	C							 	+
Total. Add lines 2a-2f	n Se	0								-
Total. Add lines 2a-2f 3 Investment more (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6a Gross rents 6b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) for ontributions reported on line 1c) See Part IV, line 18 a b Less direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 a b Less cost of goods sold c Not income of (loss) from gaming activities a Less direct expenses d All other revenue e Total. Add lines 11a-11d	gra		All other program service rever							
3 Investment income (including dividends, interest, and other similar amounts)	ą.	1								
and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalites 6a Gross rents 6b Less: rental expenses c Rental income or (loss) 4 Income from or (loss) 67, 825 67,										
A Income from investment of tax-exempt bond proceeds Royalties Royalties Ga Gross rents Ga Gross rents Ga Gross rental expenses Ga Rental income or (loss) Ga Gross amount from sales of assets other than inventory Gan or (loss) Gan or (loss		3			eresi,		}	l		
Second S		4			proce	eeds 🕨				
10 Personal 10 Persona		1				_				
Description Description			,	(ı) Real		(II) Personal				
Description Description		6a	Gross rents			67,825				
d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 c Net income or (loss) from gaming activities lose of inventory, less returns and allowances returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a A/P write-offs b c d All other revenue e Total. Add lines 11a-11d Other Securities Securi		Ь	Less: rental expenses					ł		
Ta Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) see Part IV, line 18 b Less, direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 b Less direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a A/P write-offs b c d All other revenue e Total. Add lines 11a-11d Securhies (i) Other (ii) Other (iii) Other		c	Rental income or (loss)			67,825				
assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$		d	Net rental income or (loss) .	· · · · · ·		>	67,825	67,825		
b Less cost or other basis and sales expenses		7a		(ı) Securiti	es	(II) Other				
and sales expenses c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		ļ		ļ	·					
c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 . a b Less. direct expenses b c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 . a b Less direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 . a b Less direct expenses b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a A/P write-offs 561439 32,850 All other revenue e Total. Add lines 11a-11d 32,850		b								
d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		_					1			
Ba Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		1		L		L		}		
events (not including \$ of contributions reported on line 1c) See Part IV, line 18 . a b Less. direct expenses . b c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses . b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances . a b Less cost of goods sold . b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a A/P write-offs 561439 32,850 a All other revenue	<u> </u>	1				<u> </u>				
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a A/P write-offs 561439 32,850 c d All other revenue e Total. Add lines 11a-11d ▶ 32,850	ē	"								
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a A/P write-offs 561439 32,850 c d All other revenue e Total. Add lines 11a-11d ▶ 32,850	Re	1	· · · · · · · · · · · · · · · · · · ·	e 1c)		}	}	i		
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a A/P write-offs 561439 32,850 c d All other revenue e Total. Add lines 11a-11d ▶ 32,850	Ē				a	į		}		
9a Gross income from gaming activities See Part IV, line 19	₹	ь	Less. direct expenses		b]			
See Part IV, line 19		C	Net income or (loss) from fund	raising event	s	. •				
b Less direct expenses b Companies b Compa		9a	Gross income from gaming act	ivities						
c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a A/P write-offs 561439 32,850 32,850 b c d All other revenue e Total. Add lines 11a-11d		{	See Part IV, line 19		а			ļ		
10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory		b	Less direct expenses		b	L				
returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a A/P write-offs 561439 32,850 b c d All other revenue e Total. Add lines 11a-11d . > 32,850		C	Net income or (loss) from gam	ing activities						
b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a A/P write-offs 561439 32,850 b c d All other revenue e Total. Add lines 11a-11d > 32,850		10a						j		
c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a A/P write-offs 561439 32,850 c d All other revenue e Total. Add lines 11a-11d 32,850							}			
Miscellaneous Revenue Business Code 11a A/P write-offs 561439 32,850 b c d All other revenue e Total. Add lines 11a-11d 32,850			_			L	1			
11a A/P write-offs 561439 32,850 32,850 c d All other revenue e Total. Add lines 11a-11d . > 32,850		c				<u> </u>				
b		-				 	22.05	22.056		
c d All other revenue						561439	32,850	32,850		+
d All other revenue e Total. Add lines 11a-11d ▶ 32,850		1				<u> </u>	 			+
e Total. Add lines 11a-11d . ▶ 32,850		1	All other reserve				 		 	+
							32 850			
		1					1,098,170			d o

Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A).

nc -	Check if Schedule O contains a response or note to	(A)	(B)	(C)	
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic		,		
	ındıvıduals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	133,374	105,392	6,669	21,31
6	Compensation not included above, to disqualified		}		
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	178,763	42,596	134,515	1,65
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions) .				
9	Other employee benefits				
0	Payroll taxes	23,867	11,969	10,442	1,45
1	Fees for services (non-employees)				
а	Management		į		
b	Legal	1,090		1,090	
С	Accounting	5,800		5,800	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	29,593	26,125		3,46
2	Advertising and promotion				
3	Office expenses	11,946	5,991	5,226	72
4	Information technology	12,794	10,022	1,506	1,26
5	Royalties				
6	Occupancy				
	Travel	9,421	4,724	3,803	89
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
20	Interest	34,460		34,460	
	Payments to affiliates	· · · · · ·			
2	Depreciation, depletion, and amortization	23,254	15,708	6,661	88
:3	Insurance	41,568	20,846	18,186	2,53
	Other expenses Itemize expenses not covered				
•	above (List miscellaneous expenses in line 24e If		,		
	line 24e amount exceeds 10% of line 25, column		ł		
	(A) amount, list line 24e expenses on Schedule O.)				
а	Printing	149,669	93,613		56,05
	Postage and freight	153,191	82,335		70,85
	Media productions and showin	63,902	59,557		4,34
d	Telephone & communications	9,892	4,961	4,328	60
_	All other expenses	76,995	52,417	18,890	5,68
е 5	Total functional expenses. Add lines 1 through 24e	959,579	536,256	251,576	171,74
<u></u> 6	Joint costs. Complete this line only if the	333,313	330,230	231,370	1/1,/4
	organization reported in column (B) joint costs	1			
	from a combined educational campaign and				
	fundraising solicitation. Check here 🕨 🖾 if	1		1	

Part X Balance Sheet

		Check it Schedule O contains a response or note to any	ine in	this Part X		,	_ <u></u> <u>-</u>
					(A)]]	(B)
					Beginning of year	 	End of year
	1	Cash - non-interest-bearing	• •		33,359	11	51,664
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net	• •	[_		3	
	4	Accounts receivable, net	•	· · [4	
,	5	Loans and other receivables from current and former off		· · · · · · · · · · · · · · · · · · ·			
}		trustees, key employees, and highest compensated emp	oloyees	5			
)		Complete Part II of Schedule L				5	
,	6	Loans and other receivables from other disqualified persons (as	s define	d under section		1	
ļ		4958(f)(1)), persons described in section 4958(c)(3)(B), and co	ntributir	ng employers and		1	
,		sponsoring organizations of section 501(c)(9) voluntary employ		neficiary		1	
ļ		organizations (see instructions) Complete Part II of Schedule L				6	
\$	7	Notes and loans receivable, net		[7	
Assets	8	Inventories for sale or use		[8	
Ä	9	Prepaid expenses and deferred charges		[2,321	9	2,365
1	10a	Land, buildings, and equipment. cost or) }	1		1 1	
)		other basis Complete Part VI of Schedule D .	10a	564,327		1	
}	b	Less. accumulated depreciation	10b	220,520	367,061	10c	343,807
]	11	Investments - publicly traded securities		.]		11	
ļ	12	Investments - other securities See Part IV, line 11	16,068	12	16,068		
Į	13	Investments - program-related See Part IV, line 11		13			
į	14	Intangible assets		14			
į	15	Other assets See Part IV, line 11		[7,473	15	8,144
i	16	Total assets. Add lines 1 through 15 (must equal line 34	1) .		426,282	16	422,048
l	17	Accounts payable and accrued expenses		. 1	200,879	17	82,935
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete Part IV o		21			
es	22	Loans and other payables to current and former officers,					
Liabilities		trustees, key employees, highest compensated employee	es, an	d			
jab		disqualified persons. Complete Part II of Schedule L		. ,	10,462	22	8,129
-	23	Secured mortgages and notes payable to unrelated third	l partie	s	272,942	23	250,394
	24	Unsecured notes and loans payable to unrelated third pa	arties	[24	
	25	Other liabilities (including federal income tax, payables to	o relate	ed third			
		parties, and other liabilities not included on lines 17-24).	Compl	lete Part X		1 1	
		of Schedule D		, , , , [25	
	26	Total liabilities. Add lines 17 through 25			484,283	26	341,458
		Organizations that follow SFAS 117 (ASC 958), chec	k here	▶ 🗓 and			
Ses		complete lines 27 through 29, and lines 33 and 34.					
anc	27	Unrestricted net assets			(58,001)	27	80,590
Bal	28	Temporarily restricted net assets	[28		
פַ	29	Permanently restricted net assets				29	
卫		Organizations that do not follow SFAS 117 (ASC 958	3), che	ck here ▶ 🗌 and		- T	
0.		complete lines 30 through 34.		1			
sets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment	t fund	. [31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or	r other	funds .		32	
~	33	Total net assets or fund balances			(58,001)	33	80,590
	34_	Total liabilities and net assets/fund balances	<u></u>	<u> </u>	426,282	34	422,048

	990 (2016) CHRISTIAN ACTION NETWORK	54-1756470	Page 12
Pal	rt XI Reconciliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI		🗆
ì	Total revenue (must equal Part VIII, column (A), line 12)	1	1,098,170
2	Total expenses (must equal Part IX, column (A), line 25)	2	959,579
3	Revenue less expenses Subtract line 2 from line 1	3	138,591
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	(58,001)
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment avnences	7	

Prior period adjustments

EEA

Other changes in net assets or fund balances (explain in Schedule O)

Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line

Form 990 (2016)

9

10 80,590 Part XII **Financial Statements and Reporting** Check if Schedule O contains a response or note to any line in this Part XII Yes No Accounting method used to prepare the Form 990. Cash X Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? Χ 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. Consolidated basis Both consolidated and separate basis Separate basis b Were the organization's financial statements audited by an independent accountant? Χ 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Consolidated basis Both consolidated and separate basis X Separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? X 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? За Χ b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b

SCHEDULE A (Form 990 or 990-EZ)

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2016

Department of the Treasury ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization

Employer identification number

i
L
(vi) Amount of
ther support (see
instructions)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	1,033,162	1,240,577	907,310	875,880	997,495	5,054,424
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge .						
4	Total. Add lines 1 through 3	1,033,162	1,240,577	907,310	875,880	997,495	5,054,424
5	The portion of total contributions by			}			
	each person (other than a			į			
	governmental unit or publicly			ĺ			
	supported organization) included on			1			
	line 1 that exceeds 2% of the amount	,					
	shown on line 11, column (f)			<u> </u>			
6	Public support. Subtract line 5 from line 4 .						5,054,424
	tion B. Total Support	/ \ 0040 T	#1 0040 T				
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends,	1,033,162	1,240,577	907,310	875,880	997,495	5,054,424
	payments received on securities loans, rents, royalties and income from similar sources	827		(576)) 205		461
9	Net income from unrelated business activities, whether or not the business is regularly carried on	3 2.		(3,9,	303		401
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	121,795	140,551	148,456	67,077	100,675	578,554
11	Total support. Add lines 7 through 10			ļ			5,633,439
12	Gross receipts from related activities, etc. (s	see instructions)				12	
13	First five years. If the Form 990 is for the o organization, check this box and stop here	<u> </u>		, or fifth tax year as	a section 501(c)(3)	▶ □
	tion C. Computation of Public Su						
14	Public support percentage for 2016 (line 6, c						39.72 %
15	Public support percentage from 2015 Scheo				- (00.08 %
16a	33 1/3% support test - 2016. If the organization				3% or more, check	c this	679
	box and stop here. The organization qualific						. ▶ 🛚
b	33 1/3% support test - 2015. If the organization have the beautiful to the company of the compan				33 1/3% or more,	check	. 🗂
17-	this box and stop here. The organization qu				4 Ch	_	▶ 📋
17a	10%-facts-and-circumstances test - 2016 10% or more, and if the organization meets	-			· ·		
	Part VI how the organization meets the "fac				•		
		เอ-ฉกษะเกษนการเสกเห	oo loot me urgan	nzation qualifies as	a publicly support	zu	▶ □
b	10%-facts-and-circumstances test - 2015	If the organization	did not check a bo	v on line 13 16a 1	 6b or 17a and line		- U
D	15 is 10% or more, and if the organization m					-	
	Explain in Part VI how the organization mee			•	•	lv	
	supported organization				adimes as a public	עי	. • 🗇
18	Private foundation. If the organization did			7a, or 17b. check t	his box and see	•	· · · L
	instructions						▶ □

Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				/		
5	The value of services or facilities furnished by a governmental unit to the organization without charge .						
6	Total. Add lines 1 through 5					· — — — — —	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .				<i>f</i>		
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)			,			4
Sec	ction B. Total Support			Red.	<u></u> _		
_	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6		· ·				
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b		/				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the of organization, check this box and stop here		<u> </u>	-	a section 501(c)(3	i) 	> []
Sec	ction C. Computation of Public S						
15	Public support percentage for 2016 (line 8, c))	•	15	%
16	Public support percentage from 2015 Sched				- -	16	%
	ction D. Computation of Investme			(0)			
17	Investment income percentage for 2016 (line			lumn (t))	• 1	17	
18	Investment income percentage from 2015 Sc				• (18	%
19a	33 1/3% support tests - 2016. If the organiz 17 is not more than 33 1/3%, check this box						▶ □
b 20	33 1/3% support tests - 2015. If the organiz line 18 is not more than 33 1/3%, check this Private foundation. If the organization did not seem to the organization of the organization o	box and stop here	. The organization	qualifies as a public	cly supported organ	1/3%, and nization	▶ □
	Trace realisation in the organization die	3.133.1 & DOX 011		, 5.10511 1.110 507 (1)	Joo mondonollo		

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

occuon.	л.	\sim 11	Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
4		
1		
2		
3a		
Ja		
3b		
3c		
4a		
4b		
4c		
100		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
"		
9с		
10a		
10b		
(Form 990	or 990-	EZ) 2016

Pai	Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
L	below, the governing body of a supported organization? A family member of a person described in (a) above?	11a	L	
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11b		
	tion B. Type I Supporting Organizations	11c		
	www		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	1	
Sec	tion C. Type II Supporting Organizations	<u></u> _1		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	- (
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3	j	
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s):
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity			
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1 1		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,		- (
	how the organization was responsive to those supported organizations, and how the organization determined		1	
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	1 1		
	reasons for the organization's position that its supported organization(s) would have engaged in these	25	1	
2	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below</i> . Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	1		
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a	1	
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
-	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	1	
		'		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Or							
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust	on Nov 20, 1970 (exp	lain in Part VI) See				
•	instructions. All other Type III non-functionally integrated supporting organi	zatio	ns must complete Sect	ons A through E.				
Sec	tion A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)					
1	Net short-term capital gain	1						
2	Recoveries of prior-year distributions	2						
3	Other gross income (see instructions)	3						
4	Add lines 1 through 3	4						
5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or							
co	llection of gross income or for management, conservation, or	1 1						
ma	aintenance of property held for production of income (see instructions)	6						
7	Other expenses (see instructions)	7						
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8						
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see	T						
ins	structions for short tax year or assets held for part of year):	}						
а	Average monthly value of securities	1a						
b	Average monthly cash balances	1b						
С	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
е	Discount claimed for blockage or other	T						
fa	actors (explain in detail in Part VI):	-						
2	Acquisition indebtedness applicable to non-exempt-use assets	2						
3	Subtract line 2 from line 1d	3						
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,							
se	e instructions).	4						
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by .035	6						
7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
Sec	tion C - Distributable Amount			Current Year				
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1						
2	Enter 85% of line 1	2						
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3						
4	Enter greater of line 2 or line 3	4						
5_	Income tax imposed in prior year	5						
6	6 Distributable Amount. Subtract line 5 from line 4, unless subject to							
_en	emergency temporary reduction (see instructions) 6							
7	Check here if the current year is the organization's first as a non-functionally instructions).	/-inte	grated Type III supporti	ng organization (see				
								

Schede	t V Type III Non-Functionally Integrated 509(a)(54-175	66470 Page 7
	tion D - Distributions	3) Supporting Organ	izations (continued)	Current Year
	Amounts paid to supported organizations to accomplish exe	mpt purposes		Current real
	Amounts paid to supported organizations to accomplish exemples and to perform activity that directly furthers exemple activity that directly furthers exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations are supported organizations.			
2	organizations, in excess of income from activity	' }		
	Administrative expenses paid to accomplish exempt purpos	oc of ourported organiza	tions	
		es of supported organiza	itions	
	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which to	ne organization is respon	sive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount		(1)	/:::\
S	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6		110 2010	Allount for 2010
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required - explain in Part VI). See			
	Instructions.	Į.		
3	Excess distributions carryover, if any, to 2016	-		······································
	Excess distributions carryover, it arry, to 2010	-		
a b		-		······································
	From 2013			
				······································
	From 2014			
	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
<u> </u>	Carryover from 2011 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	 		
4	Distributions for 2016 from			
	Section D, line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.	<u> </u>		
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2 For result		1	
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in		}	
	Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c.	<u> </u>		
8_	Breakdown of line 7:			
a				********************************
	Excess from 2013		 	
	Excess from 2014	<u> </u>		······································
	Excess from 2015			
e	Excess from 2016			

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number

_	RISTIAN ACTION NETWORK				54-1/56	4 / U	
Pa	Organizations Maintaining Donor Advis			or Accounts.			
	Complete if the organization answered "Y	es" on Form 990	D, Part IV, line 6.				
		(a) Do	onor advised funds		b) Funds and other	raccounts	
1	Total number at end of year						
2	Aggregate value of contributions to (during year)		· _ · _ · _ · _ · _ · _ · _ · _ · _ · _				
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisor	rs in writing that the	e assets held in donor a	dvised			
	funds are the organization's property, subject to the organization	anızatıon's exclusiv	ve legal control?			🗌 Yes	☐ No
6	Did the organization inform all grantees, donors, and do	nor advisors in writ	ting that grant funds can	be used			
	only for charitable purposes and not for the benefit of the	e donor or donor a	dvisor, or for any other p	ourpose			
	conferring impermissible private benefit?	<u></u>	<u>·</u>		<u> </u>	Yes	☐ No
Pa	rt II Conservation Easements.						
	Complete if the organization answered "	Yes" on Form 99	00, Part IV, line 7				
1	Purpose(s) of conservation easements held by the orga	ınızatıon (check all	that apply).			-	
	Preservation of land for public use (e.g., recreation	or education)	Preservation of a	historically impoi	rtant land area		
	Protection of natural habitat		Preservation of a	certified historic	structure		
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a	qualified conservat	ion contribution in the fo	rm of a conservat	ion		
	easement on the last day of the tax year				Held at the	End of the Ta	ax Year
а	Total number of conservation easements	•		2a			
b	Total acreage restricted by conservation easements			2b	7		
С	Number of conservation easements on a certified histor	ic structure include	ed in (a)	. 2c			
d	Number of conservation easements included in (c) acqu	ured after 8/17/06,	and not on a				
	historic structure listed in the National Register			. 2d	1		
3	Number of conservation easements modified, transferre	ed, released, exting	uished, or terminated by	the organization	during the		
	tax year ▶	· ·	•	•	•		
4	Number of states where property subject to conservation	n easement is loca	nted ▶				
5	Does the organization have a written policy regarding th			of			
	violations, and enforcement of the conservation easeme	-			•	. Tyes	☐ No
6	Staff and volunteer hours devoted to monitoring, inspec-		plations, and enforcing c	onservation ease	ments durina t	he vear	
	•				J	•	
7	Amount of expenses incurred in monitoring, inspecting,	handling of violatio	ons, and enforcing conse	ervation easement	s during the ye	ear	
	▶\$	Ū	,				
8	Does each conservation easement reported on line 2(d)) above satisfy the	requirements of section	170(h)(4)(B)(ı)			
	and section 170(h)(4)(B)(ii)?					Yes	□ No
9	In Part XIII, describe how the organization reports conse	ervation easement	s in its revenue and exp	ense statement, a	ınd		
-	balance sheet, and include, if applicable, the text of the						
	organization's accounting for conservation easements	•					
Pa	rt III Organizations Maintaining Collec	tions of Art, F	listorical Treasure	es, or Other	Similar Ass	sets.	
	Complete if the organization answered '			•			
1a	If the organization elected, as permitted under SFAS 11			atement and bala	nce sheet		
	works of art, historical treasures, or other similar assets		•				
	public service, provide, in Part XIII, the text of the footnot						
b	If the organization elected, as permitted under SFAS 11				sheet		
b	works of art, historical treasures, or other similar assets						
	public service, provide the following amounts relating to		iibition, education, or res	search in lutilicial	106 01		
		111000 1101110			⊾ ¢		•
	(i) Revenue included on Form 990, Part V		• •	•			7
^	(ii) Assets included in Form 990, Part X			noist dain provid	. ▶ Ф		
2	If the organization received or held works of art, historic			anciai gain, provid	e me		
	following amounts required to be reported under SFAS				. .		
a	Revenue included on Form 990, Part VIII, line 1				▶ \$		
b	Assets included in Form 990, Part X				▶ \$		

Schedu	le D (Form 990) 2016 CHRISTIAN ACTIO					54-1756	
Par							ets (continued)
3	Using the organization's acquisition, accession,	and other records, cl	heck any of the folio	wing that are a	a signific	ant use of its	
•	collection items (check all that apply).						
а	Public exhibition	d 🗌 Loai	n or exchange progr	rams			
b	Scholarly research	e 🗌 Othe	er				
С	Preservation for future generations						
4	Provide a description of the organization's collect XIII.	ctions and explain ho	w they further the or	rganization's ex	xempt pi	urpose in Part	
5	During the year, did the organization solicit or re	eceive donations of ar	t. historical treasure	s. or other sim	ular		
	assets to be sold to raise funds rather than to be						🗌 Yes 📗 No
Par	t IV Escrow and Custodial Arran		<u> </u>				
Lincia	Complete if the organization ar 990, Part X, line 21.		n Form 990, Pa	rt IV, line 9,	or rep	orted an amou	nt on Form
1a	Is the organization an agent, trustee, custodian	or other intermedian	for contributions or	other assets n			
14	included on Form 990, Part X?	or other intermediary	ior continuations of	Other assets in	Oi		☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part XIII and	 d complete the follow		• •	•	•	∐ les ∐ No
U	tes, explain the analigement in art Am air	a complete the follow	ing table		[Amo	unt
С	Beginning balance				1c		,uni
d	Additions during the year		•		1d		
•	Distributions during the year		• •	•	1e	· 	
f	Ending balance	•			1f		
2a	Did the organization include an amount on Form	990 Part X line 21	for escrow or custo	. , . Idial account lia			Yes No
	If "Yes," explain the arrangement in Part XIII Cl						
	t V Endowment Funds.	neok here ii the expla	nation has been pre	vided off i dit		 -	
	Complete if the organization ar	nswered "Yes" or	n Form 990. Pa	rt IV. line 10).		
	<u>g</u>	(a) Current year	(b) Prior year	(c) Two years		(d) Three years back	(e) Four years back
1a	Beginning of year balance			10, 110,000	-	(a) moo youro baen	(e) Todi youro paore
b	Contributions			 			
c	Net investment earnings, gains, and			 			
•	losses			ł			
d	Grants or scholarships	 		 			
e	Other expenditures for facilities and	 		 			
Ū	programs			1	[
f	Administrative expenses			 			
a a	End of year balance			 			
2	Provide the estimated percentage of the current	t vear end balance (li	ne 1g. column (a)) h	eld as			1
a	Board designated or quasi-endowment	%	3, (,				
b	Permanent endowment > %						
c	Temporarily restricted endowment	%					
	The percentages in lines 2a, 2b, and 2c should						
3a	Are there endowment funds not in the possessi		that are held and a	dministered for	r the		
-	organization by						Yes No
	(i) unrelated organizations .						3a(i)
	(ii) related organizations						3a(ii)
ь	If "Yes" on 3a(II), are the related organizations I	sted as required on S	Schedule R?				3b
4	Describe in Part XIII the intended uses of the or						L
Pa	t VI Land, Buildings, and Equipr						
نتيستن	Complete if the organization at		n Form 990, Pa	rt IV, line 11	1a. Se	e Form 990, Pa	rt X, line 10.
	Description of property	(a) Cost or oth		or other basis		Accumulated	(d) Book value
	. , . ,	(investm		(other)		epreciation	
1a	Land						
b	Buildings			275,511		19,721	255,790
c	Leasehold improvements .			41,489		18,593	22,896
d	Equipment			192,889		170,634	22,259
e	Other			54,438		11,572	42,866
	1. Add lines 1a through 1e (Column (d) must equ	ual Form 990, Part X,	column (B), line 10			. ▶	343,807

Schedule D (Form		TION NETWORK	54-1756470	Page 3
Part VII	Investments - Other Securities.			
	Complete if the organization answer	ered "Yes" on Form 990, Part IV,	line 11b. See Form 990, Part X	, line 12.
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financial	derivatives			
(2) Closely-he	eld equity interests			
(3) Other				
(A) Edwar	d Jones Money Market account	114	FMV	
(B) Iraqi	Dinar	15,954	FMV	
(C)				
(D)				
(E)				
(F)				
(G)				
(H)		-		
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	16,068		
Part VIII	Investments - Program Related. Complete if the organization answer	ered "Yes" on Form 990, Part IV	, line 11c. See Form 990, Part X	, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation	
(1)			Cost or end-of-year market value	
<u>(1)</u> (2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n) must equal Form 990, Part X, col (B) line 13)	>		
Part IX	Other Assets.			
	Complete if the organization answer	ered "Yes" on Form 990, Part IV	, line 11d. See Form 990, Part X	, line 15.
		a) Description	(b) E	Book value
(1) Due f	from employees			8,14
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line	15)		8,14
Part X	Other Liabilities. Complete if the organization answers	ered "Yes" on Form 990, Part IV	, line 11e or 11f. See Form 990,	Part X,
	line 25.			
1.	(a) Description of liability	(b) Book value		
	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				_
(7)				¥ .
(8)				4
(9)	A)			
	b) must equal Form 990, Part X, col (B) line 25) or uncertain tax positions in Part XIII, provide th	e text of the footnote to the organization's	financial statements that reports the	
e. Liability IO	s liability for uncertain tax positions under FIN 4	8 (ASC 740). Check here if the text of the	footnote has been provided in Part XIII	, , г
organization	a nationally for uncertaint tax positions under 1 114 4	5 (7.05 7 10). Check hold if the text of the	TOTAL STORAGE TOTAL STORAGE THE CONTROL OF THE CONT	

Sched	dule D (Form 990) 2016 CHRISTIAN ACTION NETWORK	54-1756470	Page 4
Pa	Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return.	<u>_</u> _
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	1,098,170
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
, e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1		1,098,170
4	Amounts included on Form 990, Part Vill, line 12, but not on line 1		.,,
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	. 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	 	1,098,170
	Reconciliation of Expenses per Audited Financial Statements With Expense		1,030,170
1 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	es per neturn.	
1	Total expenses and losses per audited financial statements	. [1]	050 570
-	Amounts included on line 1 but not on Form 990, Part IX, line 25	· - •	959,579
2	1 1		
a			
b	Prior year adjustments		
C	Other losses		
d			
е		2e	
3	Subtract line 2e from line 1	3	959,579
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.		
а		_	
b	Other (Describe in Part XIII)		
С		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	1 - 1	
		5	959,579
	art XIII Supplemental Information.	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	art XIII Supplemental Information.	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579
Prov	Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4,	, - , - , - , - , - , - , - , - , - , 	959,579

SCHEDULE L

(Form 990-or 990-EZ)

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury ▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization

OMB No 1545-0047

2016

Open To Public Inspection

lame of the organization								Employ	er ident	ification	numbe	r		
HRISTIAN AC	TION NET	work						54-1	7564	70_				
		t Transactions						_						
Con	plete if the	organization a	nswered "Yes'	on Fo	orm 990,	Part IV,	line 25a	or 25b, or Forn	990	-EZ, I	Part V	', line	40b.	
1 (a) Name o	1 (a) Name of disqualified person		(b) Relationship bet	ween dis	qualified pers	on and		(c) Description of	of tranca	ction			(d) Corrected?	
- (a) Name o	uisquainieo pers		OI	rganizatio	on 			(c) Description C	n iiansa				Yes	No
		l												}
(1)														
		ļ											[1
(2)							ļ							
(2)		į												
(3) 2 Enter the am	ount of tax in	curred by the orga	anization manage	ore or o	liegualified	L parcone a	turing the	VOOR					L	L
under section		curred by the orga	ariization managi	CIS 01 0	iisquaiiileu	r persons c	ruinig ine	year		_ 0				
		any, on line 2, ab	ove reimbursed	l hv the	 organizati	on .				- \$				
• Enter the am	ount or tax, ir	arry, or time 2, as	ove, reimbarsea	i by inc	organizati	011		•		- 4				
Part II Loa	ns to and/	or From Intere	sted Persons	 ì.										
		organization a			orm 990-	EZ, Part	V, line 3	8a or Form 990), Par	t IV, I	ıne 26	à, or i	f the	
		ported an amou										•		
(a) Name of interes	ted person	(b) Relationship	(c) Purpose of	(d) L	oan to or	(e) On	ginal	(f) Balance due	(g) In d	efault?	(h) App	oroved	(ı) Wr	ıtten
		with organization loan from the principal amount		(,, = = = = = = = = = = = = = = = = = =	(19)		by board or		agreement?					
			{	orga	inization?	}	ŀ				comm	ittee?		
			j	To	From]			Yes	No	Yes	No	Yes	No
		Director/O	Cash								,			
(1) Martin M	awyer	fficer	shortfall	X	<u> </u>		8,000	8,129		X		Χ		X
				}	}	Ì						i		
(2)			 	∔	4	 								
			Ì			}					; }			
(3)				 										
(4)			Ì	}	}	Ì						ı		
(4)		 		 		 								
(5)			-	Ì	Ì	ļ						,		
Total		· 	·				▶ \$	8,129			 		ļ	l
	ants or Ass	sistance Bene	fitina Interest	ted Pe	rsons.	<u> </u>								
		e organization), Part IV,	line 27.							
(a) Name of inte	rested nerson	(h) Relations	hip between intereste	ed ((c) Amount of	assistance	(4)	Type of assistance		(e)) Purpos	e of ass	stance	
(a) Name of the	calca person		nd the organization	,	,0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	accidianico	(-/	7,50 0. 200/0/20100	- 1	(0.	·· uipou	0 01 000	10101100	
					<u></u>		1		7					
(1)	<u>. </u>													
			_				j						_	
(2)														
		1					}		1					
(3)							 		-+					
		1					1		1					

	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization revenues?	
				Yes	No
	Board Chairman &		į	Ì	
(1) David W. T. Carroll	vendor	2,556	legal services		X
	daughter of		contract labor: mail	-	
(2) Carmen Mawyer	president	2,427	sorting & fulfilment		X
(0)	ļ		{	- ({
(3)			 		
(4)	}		1		
<u> </u>					+-
(5)			}	}	
Part V Supplemental Information					
Provide additional informat	ion for responses to questions	on Schedule L (see	e instructions)		
					
					

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

OMB No 1545-0047

CHRISTIAN ACTION NETWORK	54-1756470
01. Officer, directors, etc. family relationship (Part VI, line 2)	
The wife of the president of the Organization is employeed by the Organiza	tion as a
manager. The son and two daughters of the president of the Organization cu	rrently are, or
were, employeed by the Organization during the fiscal year.	
The president of the Organization loaned funds to the Organization and has	an outstanding
balanced owed to him by the Organization (see Schedule L).	
A Board member, Mr. David W.T. Carroll, is a partner in a law firm that pro-	ovides legal
services to the Organization (see Schedule L).	
02. Form 990 governing body review (Part VI, line 11)	
Currently, The Form 990 is reviewed by the Board Chairman (a licensed, practical contents)	cticing
attorney) and/or the president of the Organization prior to filing.	
03. Conflict of interest policy compliance (Part VI, line 12c)	
Disclosure of any known conflicts of interest (suspected or actual) are rec	quired to be
reported at the annual Board meeting. At that time all conflicts of interest	st (if any) are
addressed, discussed and resolved.	
04. Governing documents, etc, available to public (Part VI, line 19)	
A copy of Form 990 is available for public inspection at the Organization's	s corporate
office located in Lynchburg, Virginia. Other governing documents, certain	written
policies, Board Minutes, and audited financial statements may also be view	ed and read at
the same location. However, due to the sometimes antagonistic, hostile, and	d violent nature