.. **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2018

Department of the Treasury

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information

Open to Public

		nue Service	- do to www.iis.govii offilisso for instructions and the latest line			mapeetion					
<u> </u>	For the	e 2018 cale	ndar year, or tax year beginning JANUARY 1 , 2018, and ending	DECEME		, 20 18					
В	Check	f applicable	C Name of organization MULTIPLICATION NETWORK MINISTRIES) Employ	er identification number					
	Address	s change	Doing business as			26-0276601					
	Name c	hange	Number and street (or P O box if mail is not delivered to street address) Room/suite	E	Telepho	ne number					
	Initial re	turn	22515 TORRENCE AVE			708-414-1050					
	Final retu	rn/terminated	City or town, state or province, country, and ZIP or foreign postal code			.					
	Amende	ed return	SAUK VILLAGE, IL 60411		Gross re	eceipts \$					
	Applicat	tion pending	F Name and address of principal officer TIM MAXWELL	H(a) Is this a grou	p return for	subordinates? Yes // No					
			22515 TORRENCE AVE, SAUK VILLAGE, IL 60411			s included? Yes V.No					
	Tax-exe	empt status	✓ 501(c)(3)	If "No,	" attach a	a list (see instructions)					
J	Website		://multiplicationnetwork.org	H(c) Group e	xemption	number >					
K	Form of	organization	✓ Corporation ☐ Trust ☐ Association ☐ Other ► \ L Year of formation	2007	M State	of legal domicile IL					
Р	Part I Summary										
	1		scribe the organization's mission or most significant activities. To equip	church lead	ers witl	n tools and resources to					
ė		•	n and multiply helathy churches. Training leaders-developing a network of na								
Governance	1		anters. Providing reproducible materials-Creating textbooks, workbooks and t								
ern	2		is box $ ightharpoonup \square$ if the organization discontinued its operations or disposed of r								
Š	3		of voting members of the governing body (Part VI, line 1a)		3	5					
∞ ಶ	4		of independent voting members of the governing body (Part VI, line 1b)		4	5					
es	5		nber of individuals employed in calendar year 2018 (Part V, line 2a)		5	15					
<u>viti</u>	6		nber of volunteers (estimate if necessary)		6	100+					
Activities &	7a		elated business revenue from Part VIII, column (C), line 12		7a	100+					
_	, a		ated business taxable income from Form 990-T, line 38		7b						
_	 	ivet unier	ated business taxable income norm office of	Prior Year		Current Year					
ne	8	Contribut	ions and grants (Part VIII, line 1h)								
	9		- i - i	3,0	027,104	3,902,021					
Revenue	1	_			0.507	40.045					
æ	10 11		nt income (Part VIII, column (A), lines 3, 4, and 7d)		6,597	10,245					
	1		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)								
	12		enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		033,701	3,912,266					
	13		nd similar amounts paid (Part IX, column (A), lines 1–3)	1,4	492,073	1,710,376					
	14		paid to or for members (Part IX, column (A), line 4)								
es	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,2	248,621	1,371,807					
eus	16a		nal fundraising fees (Part IX, column (A), line 11e)								
Expenses	Ь		draising expenses (Part IX, column (D), line 25)								
	17		penses (Part IX, column (A), lines TTa-IId-11f-24e)		107,044	406,415					
	18		enses. Add lines 13-17 (must equal Part 🗷, column (4) line 25)		147,738						
	19	Revenue	less expenses. Subtract line 18 kgm line 12		14,038)						
Net Assets or Fund Balances		_	121 MAI 20 ZUIS 171 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	inning of Curre	ent Year	End of Year					
sset	20		ets (Part X, line 16)	1,7	721,689	2,169,189					
ag A	21		lities (Part X, line 26)		96,209	120,041					
			s or fund balances. Subtract line 21 from the 20 1, U	1,6	325,480	2,049,148					
Pa	art II	Signat	ure Block								
			y, I declare that I have examined this return, including accompanying schedules and statemen			my knowledge and belief, it is					
iru	e, correc	t, and comple	ete Declaration of preparer (other than officer) is based on all information of which preparer ha	s any knowled	ge	/ /					
۵.		 	In h Madwell		5]	2/2019					
Sign Signature of officer Date											
He	re		im MAXWKa								
		1.	or print name and title			1					
Pa	id	Print/Typ	pe preparer's name Preparer's signature Date		Check [if PTIN					
	epare	er 📖			self-emp						
	e Oni		ame ►	Firm's	EIN ▶						
_			ddress ►	Phone	no						
Ma	y the IF	RS discuss	this return with the preparer shown above? (see instructions)			🗸 Yes 🗌 No					

Other program services (Describe in Schedule O.)

Total program service expenses ▶

152,332 including grants of \$

(Expenses \$

101,512) (Revenue \$

2.302.752



Part IV Checklist of Required Schedules

endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V II, IVII, 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 II ab Uit, IVII, IVII, IX, or X as applicable. b Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII II					
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 In the organization expanse or direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Fes," complete Schedule C, Part II 3 J A Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f) election in effect during the tax year? If "Fes," complete Schedule C, Part III. 5 Is the organization a section 501(6)(4), 501(6)(5), or 501(6)(6) graziation that receives membership dues, assessments, or similar amounts as defined in Revenue Proceeding 98-197 If "Yes," complete Schedule C, Part III. 6 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 III. 7 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III. 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account fabrility, 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 VIII. 9 Did the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part VIII. 10 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 167 If "Yes," complete Schedule D, Part VIII. 11 Did the organization services or any of the following questions is "Yes," the interest of the tax year? If "Yes," complete Schedule D, Part XIII. 12 Did the organization report an amount for investments—other securities in Part X, l	1		1	/	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 4 5 5 5 5 5 5 5 5 5	2	·		1	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part III Is the organization as section 501(c)(4), 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 96-19? If "Yes," complete Schedule C, Part III 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? III "Yes," complete Schedule D, Part II Is Under the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Is Under the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Is Under the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Is Under the environment, section of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Is Under 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, ior provide credit counseling, debt management, credit repair, or debt negations services? If "Yes," complete Schedule D, Part IV II If the organization developed the repair and the part X is under the accounts to the part X is under the accounts to the part X is under the accounts and the part X is under the part X is		Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			1
5 Is the organization a section 501(c)(4), 501(c)(6), or 501(c)(6) 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 II 10 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 17 Did the organization receive or hold a conservation assement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 18 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 19 Did the organization orgonia 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 regionation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization report an amount for investments—other securities in Part X, line 10? If "Yes," 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 IV 12 Did the organization report an amount for investments—other securities 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 IX 19 Did the organization organization report an amount for other liabilities 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 20 Did the organization	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	4		1
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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 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 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 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 c Did the organization report an amount for other lassities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and If the organization nebuded in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization aschool described in section 170[b](1)(A)(i)? If "Yes," complete Schedule D, Part X and XII is optional is the organization aschool described in section 170[b](1)(A)(ii)? If "Yes," complete Schedule E b 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 \$10,000 or more? If "Yes," complete Schedule F, Parts II and IV. 10 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV. 10 Did the organization report more than \$15,000 tof spenses for professional fundraising services on Part IX,	10		10		1
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of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	а		11a		✓
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	b		11b		1
reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X I16	С		11c		1
In the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII . 12a Did 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 is the organization a school described in section 170([b](1)(a)(ii)? If "Yes," complete Schedule E 13	d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII soptional is 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 is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	е		11e		✓
b 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 ✓ 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. 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 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. 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 18 Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	f		11f		1
"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13	12a	Schedule D, Parts XI and XII	12a	✓	
Did the organization maintain an office, employees, or agents outside of the United States?		"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			-
b 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				./	✓
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	_		170	•	_
for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	D	fundraising, business, investment, and program service activities outside the United States, or aggregate	14b	√	
assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	15		15	✓	
Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	16		16		✓
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	17		17		✓
If "Yes," complete Schedule G, Part III	18		18		✓
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	9	If "Yes," complete Schedule G, Part III	19		✓
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20 a		_		✓
		- · · · · · · · · · · · · · · · · · · ·	20b		
	21		21		1

Part	Checklist of Required Schedules (continued)			
			Yes	No
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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
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		1
Ь	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? <i>If "Yes," complete Schedule L, Part I</i>	25a		✓
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		✓
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 disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
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		1
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		✓
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
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	✓	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
_	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		—
			n 990	(2018)

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			<u> </u>
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 15			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		✓
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		
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)?	4a		✓
ь	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).		<u> </u>	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	ļ <u>.</u> . '		
_	gifts were not tax deductible?	6b		✓
7	Organizations that may receive deductible contributions under section 170(c).			ĺ
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			1
_	and services provided to the payor?	7a 7b		-
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	/ b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		/
d	If "Yes," indicate the number of Forms 8282 filed during the year	10		 •
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		1
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
	Is the organization licensed to issue qualified health plans in more than one state?	ISA		
	·			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	- 1-		
	excess parachute payment(s) during the year?	15		1
	If "Yes," see instructions and file Form 4720, Schedule N.			
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		1
	If "Yes," complete Form 4720, Schedule O.			

Part					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change				
	Check if Schedule O contains a response or note to any line in this Part VI				
Secti	on A. Governing Body and Management			V	
4.	Enter the number of voting members of the governing hady at the and of the tay year	۔ ۔		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year.	1a 5			
	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.				
ь	Enter the number of voting members included in line 1a, above, who are independent .	1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business	`	i		1
_	any other officer, director, trustee, or key employee?		2		✓
3	Did the organization delegate control over management duties customarily performed by or		١.		,
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		√
4	Did the organization make any significant changes to its governing documents since the prior Form 99.		5		√
5 6	Did the organization become aware during the year of a significant diversion of the organization by the organization have members or stockholders?	on s assets?.	6		-
	Did the organization have members, stockholders, or other persons who had the power to	oloot or oppoint	-		_
7a	one or more members of the governing body?		7a		✓
Ь	Are any governance decisions of the organization reserved to (or subject to approva				
_	stockholders, or persons other than the governing body?		7b		✓
8	Did the organization contemporaneously document the meetings held or written actions un	idertaken during			
_	the year by the following:			<u> </u>	
a b	The governing body?		8b	∀	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be supported in the power listed in Part VII, Section A, who cannot be supported in the power listed in Part VII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed in Part VIII, Section A, who cannot be supported in the power listed i		- 60	-	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C)	9		✓_
Section	on B. Policies (This Section B requests information about policies not required by the	e Internal Reven	ue C		
10-	Did the agreement on have local charters branches as affiliates?		10-	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	✓	
Ь	If "Yes," did the organization have written policies and procedures governing the activities o		10b	/	
11a	affiliates, and branches to ensure their operations are consistent with the organization's exement that the organization provided a complete copy of this Form 990 to all members of its governing body before the organization provided as complete copy of this Form 990 to all members of its governing body before the organization provided as complete copy of this Form 990 to all members of its governing body before the organization provided as complete copy of this Form 990 to all members of its governing body before the organization provided as complete copy of this Form 990 to all members of its governing body before the organization provided as complete copy of this Form 990 to all members of its governing body before the organization provided as complete copy of this Form 990 to all members of its governing body before the organization provided as complete copy of this Form 990 to all members of its governing body before the organization provided as complete copy of this Form 990 to all members of its governing body before the organization provided as complete copy of the organization provided as complete cop		11a	V	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	_	110	•	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	✓	
. <u></u> ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?	12b	V	
C	Did the organization regularly and consistently monitor and enforce compliance with the		- <u></u>	_	
·	describe in Schedule O how this was done	•	12c	✓	
13	Did the organization have a written whistleblower policy?		13	✓	
14			14	✓	
15	Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a	1	
b	Other officers or key employees of the organization		15b	✓	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or simi	lar arrangement			
•.	with a taxable entity during the year?		16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?		16b		-
Secti	on C. Disclosure	<u> </u>	יטט	l	Ь
17	List the states with which a copy of this Form 990 is required to be filed ► Illinois				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable		(Sec	tion F	 (01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that		,060		, o i (o)
	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Sci.	· · ·			
19	Describe in Schedule O whether (and if so, how) the organization made its governing docume	•	erest	policy	, and
	financial statements available to the public during the tax year.				,
20	State the name, address, and telephone number of the person who possesses the organization	on s dooks and re	coras		

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Part VII	Compensation of Officers,	Directors, Tru	ustees, Key	Employees,	Highest Comper	nsated Employee	s, and
	Independent Contractors						

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.

Check this box if heither the organization ha	Ji aliy lelate	u viy	ai iiz	auc	/III C	Ombe	11130	ited any curren	it Officer, director	, or trustee.
				-	C)					
(A)	(B)	/do -			ition	e than o		(D)	(E)	(F)
Name and Title	Average					ıs both		Reportable	Reportable	Estimated
	hours per					or/trus		compensation	compensation from	amount of
	week (list any	25	5	0	<u>~</u>	QΞ	Ī	from	related	other
	hours for related	5 ₹	stat	Officer	Š	를	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	ect d'	탉	4	🚆	oye st	Ē	(W-2/1099-MISC)		organization
	below dotted	윽쁥	na		Key employee	l ^e S		ľ		and related
	line)	Individual trustee or director	Ę		8	per				organizations
		6	Institutional trustee		ļ	Highest compensated employee				
			L"		_	e.	ļ			
(1) Kent Devries	2									
	-	1								
(2) Mary Lynn Spears	11									
		/			ļ	ļ	<u> </u>	ļ		
(3) Dave Stravers	1	,					1			
(4)	 	-	-	_	_		├	 		
(4) Todd Benkert	1	/				İ				
(E) October Manda Washing	 	-	 -				┢			
(5) George Vande Werken	2	/								
(6) John Wagenveld, President	40	 	\vdash			. <u>-</u>		· · · · · · · · · · · · · · · · · · ·		
A John Wagenveld, Fresident	- 	1		1	✓	✓		130,920		51,844
(7) Tim Maxwell, VP Operations/CFO	40							100,020		0.701
	1	İ		1	✓			127,320		47,347
(8)										
(9)										
(10)										
(11)										
- <u></u> -		<u> </u>			_					····
(12)										
			Щ							
(13)	.	1								
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(14)										
		i								

Form **990** (2018)

	(A) Name and title	(B) Average hours per week (list any	box, office	unles er and	s per	rtion more rson irecto	e than o	an ee)	(D) Reportable compensation from	(E) Reportable compensation fron related	n a	(F) stimate mount o other	of
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	f orç ar	npensa rom the ganizati id relate anizatio	e ion ed
(15)													
(16)													
(17)													
(18)													
(19)											 		
(20)										,	<u> </u>		
							_			. ,	<u> </u>		
(21)													
(22)													
(23)													
(24)													
(25)													
1b c	Sub-total	VII, Sectio	n A					>	258,240				99,19
2	Total (add lines 1b and 1c)	not limited						<u>▶</u>	258,240 ho received m		00 of		99,19
3	Did the organization list any former of employee on line 1a? If "Yes," complete s	ficer, direc						emp	oloyee, or high	est compensal	ted 3	Yes	s No
4	For any individual listed on line 1a, is the organization and related organizations individual												
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or individ			 _
Section	on B. Independent Contractors	ii res, c	Unipi	ere.	3011	eur	iie o i	Or s	sucri persori		. 3		
1	Complete this table for your five highest compensation from the organization. Repyear.												tax
	(A) Name and business add	ress							(B) Description of s	ervices	(Compe		1
						_							
							•						
2	Total number of independent contractor	•	-					th	ose listed abo	ove) who			

Par	t VIII				5		
	<u></u>	Check if Schedule O contains a	a response or note t	o any line in this (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
its i	1a	Federated campaigns	1a				
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues	1b				
S, G	С	Fundraising events	1c	1			
ar/	d	Related organizations	1d	1			
S, E	e	Government grants (contributions)	1e	1			
io S	f	All other contributions, gifts, grants,		1			
幸		and similar amounts not included above	1f 3,897,971				
ËĢ	g	Noncash contributions included in lines 1a-		1 1	i !		:
SE	h	Total. Add lines 1a 1f .		3,902,021			
			Business Code				
le J	2a						·
æ	Ь			-			
<u>ic</u>	c						
ě	d						
Ë	e						
Program Service Revenue	f	All other program service revenue					
P	g	Total. Add lines 2a-2f					1
	3	Investment income (including					
		and other similar amounts)		10,245			10,245
	4	Income from investment of tax-exen	npt bond proceeds ▶				
	5	Royalties					
		(i) Real	(ii) Personal				1
	6a	Gross rents]			j
	ь	Less rental expenses					
	С	Rental income or (loss)					[
	d	Net rental income or (loss)					
	7a	Gross amount from sales of (i) Securities	es (ii) Other				
		assets other than inventory					
	ь	Less cost or other basis					1
		and sales expenses .				1	
	С	Gain or (loss)					
	d	Net gain or (loss)	. <u> ▶</u>				
Ð							
חַ	8a				•		
Other Revenue		events (not including \$;-				
гВ		of contributions reported on line 1c See Part IV, line 18					
the							
δ	b						
		Net income or (loss) from fundrais Gross income from gaming activiti				 	
	Ja	See Part IV, line 19					
	.	Less: direct expenses					
		Net income or (loss) from gaming		· · · · · · · · · · · · · · · · · · ·			
		Gross sales of inventory, le					i
	.00	returns and allowances					
	h	Less: cost of goods sold					
		Net income or (loss) from sales or					
		Miscellaneous Revenue	Business Code			 	
	11a		Business code				!
	b			+			-
	C			 			
	d	All other revenue					
	e	Total. Add lines 11a–11d					
	12	Total revenue. See instructions		3,912,266			10,245
				3,312,200		<u> </u>	10,243

	IX Statement of Functional Expenses									
Sectio	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).									
Check if Schedule O contains a response or note to any line in this Part IX										
	nt include amounts reported on lines 6b, 7b, n, and 10b of Part VIII.	(A) 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 individuals. See Part IV, line 22			, M, -	!					
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,710,376	1,710,376							
4 5	Benefits paid to or for members	258,240	\$129,120	51,648	77,472					
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	230,240	\$125,120	31,040	11,412					
7 8	Other salaries and wages	731,772	183,107	61,912	486,753					
_	section 401(k) and 403(b) employer contributions)	26,257	6,792	5,208	14,257					
9	Other employee benefits	281,798	49,095	26,421	206,282					
10 11	Payroll taxes	73,740	23,160	6,818	43,762					
a	Management									
b C	Legal	9.000		9.000						
ď	Lobbying	8,869		8,869						
e	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.)	57,897	19,479	144	38,274					
12	Advertising and promotion	32,745			32,745					
13	Office expenses	12,958	2,672	2,968	7,318					
14	Information technology	20,330	4,187	4,861	11,282					
15	Royaltres	,	·		· .					
16	Occupancy	·								
17 18	Travel	213,313	149,882	6,014	57,417					
19	Conferences, conventions, and meetings	26,685	17,840	1,440	7,405					
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization .									
23	Insurance	2,634		2,369	265					
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If									
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)									
a	Printing and Postage	11,998	6,405	1,326	4,267					
Ь	Subscriptions & dues	4,614	637	1,107	2,870					
С	Banking Fees	14,372		14,372						
d										
е 25	All other expenses Total functional expenses. Add lines 1 through 24e	2 222 222								
25 26	Joint costs. Complete this line only if the	3,488,598	2,302,752	195,477	990,369					
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)									

Part X Balance Sheet

Cash—non-interest-bearing 314,881 1 2 Savings and temporary cash investments 1,406,808 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 5 6 Loans and other receivables from other disqualified porcons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D 10a 10b 10c 11 Investments — publicly traded securities 11 12 Investments — program-related. See Part IV, line 11 12 13 Investments — program-related. See Part IV, line 11 13 Intancible assets 14 Intancible asse	(B) End of year 749,812 1,419,377
2 Savings and temporary cash investments	
3 Pledges and grants receivable, net	1,419,377
4 Accounts receivable, net	
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	
trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	
Complete Part II of Schedule L Loans and other receivables from other disqualified porsons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L Notes and loans receivable, net Inventories for sale or use Prepard expenses and deferred charges Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments—publicly traded securities Investments—other securities. See Part IV, line 11 Investments—program-related. See Part IV, line 11	
Loans and other receivables from other disqualified porsons (ac defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	
4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	
sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	
organizations (see instructions). Complete Part II of Schedule L	
7 Notes and loans receivable, net	
9 Prepaid expenses and deferred charges	
9 Prepaid expenses and deferred charges	
10a Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 11 Investments—publicly traded securities	
other basis. Complete Part VI of Schedule D b Less: accumulated depreciation	
b Less: accumulated depreciation	
11Investments—publicly traded securities1112Investments—other securities. See Part IV, line 111213Investments—program-related. See Part IV, line 1113	
13 Investments—program-related. See Part IV, line 11	-
4.4 Interpublic access	
15 Other assets. See Part IV, line 11	
16 Total assets. Add lines 1 through 15 (must equal line 34) 1,721,689 16	2,169,189
17 Accounts payable and accrued expenses	120,041
18 Grants payable	
19 Deferred revenue	
20 Tax-exempt bond liabilities	
21 Escrow or custodial account liability. Complete Part IV of Schedule D . 21	
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	: !
disqualified persons. Complete Part II of Schedule L	
23 Secured mortgages and notes payable to unrelated third parties	
24 Unsecured notes and loans payable to unrelated third parties	
25 Other liabilities (including federal income tax, payables to related third	
parties, and other liabilities not included on lines 17–24). Complete Part X	1
of Schedule D	1
26 Total liabilities. Add lines 17 through 25	120,041
Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and	
complete lines 27 through 29, and lines 33 and 34.	
E 27 Unrestricted net assets	2,033,485
28 Temporarily restricted net assets	15,663
Permanently restricted net assets	
complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	
2 30 Capital stock or trust principal, or current funds	
31 Paid-in or capital surplus, or land, building, or equipment fund	
32 Retained earnings, endowment, accumulated income, or other funds . 32	
	2,049,148
34 Total liabilities and net assets/fund balances	

~	4	^
rage		_

Check if Schedule O contains a response or note to any line in this Part XI	<u></u>		_
4 T 1			
1 Total revenue (must equal Part VIII, column (A), line 12)		3,91	2,266
2 Total expenses (must equal Part IX, column (A), line 25)		3,48	8,598
3 Revenue less expenses. Subtract line 2 from line 1		42	3,668
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		1,62	<u>5,480</u>
5 Net unrealized gains (losses) on investments			
6 Donated services and use of facilities			
7 Investment expenses			
8 Prior period adjustments			
9 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			
33, column (B))		2,04	9,148
Part XII Financial Statements and Reporting			
Check if Schedule O contains a response or note to any line in this Part XII			
		Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☐ Accrual ☐ Other			I
If the organization changed its method of accounting from a prior year or checked "Other," explain in			
Schedule O.			لبِ_
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	\sqcup	<u>✓</u>
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			ŀ
reviewed on a separate basis, consolidated basis, or both:			ŀ
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b Were the organization's financial statements audited by an independent accountant?	2b	✓	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			1
separate basis, consolidated basis, or both:			
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and 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?	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?	3a	\vdash	✓_
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	3b		
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		n 990	(2018)

SCHEDULE A (Form 990 or 990-EZ)

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.

2018

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Multi	olicaton Network Ministries						76601
Pa		<u>-</u>				<u> </u>	ons.
The o	organization is not a private found				-		
1	A church, convention of church						\wedge 1
2	A school described in section		-				() (
3	A hospital or a cooperative ho		_			,, ,, ,	,
4	A medical research organizat		onjunction with a hos	pital desc	cribed in	section 170(b)(1)(A)	(iii). Enter the
_	hospital's name, city, and sta						
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	ownea d	or operate	ed by a governmen	tai unit described ir
6	A federal, state, or local gove	-			•		
7	An organization that normally			port fron	n a gover	nmental unit or fron	n the general public
	described in section 170(b)(1		· ·				
8	A community trust described						
9	An agricultural research organ or university or a non-land-gra university:						
10	☐ An organization that normally						
	receipts from activities related support from gross investmen	d to its exempt fu	nctions—subject to c	ertain ex	ceptions,	and (2) no more tha	in 331/3% of its
	acquired by the organization	after June 30, 19	75. See section 509 (a	a)(2). (Co	mplete P	art III.)	Dusinesses
11	An organization organized and		-		•	•	
12	☐ An organization organized and	d operated exclus	sively for the benefit o	f, to perf	orm the f	unctions of, or to ca	rry out the purposes
	of one or more publicly supp	orted organizatio	ns described in sect	ion 509(a	a)(1) or so	ection 509(a)(2). Se	e section 509(a)(3)
	Check the box in lines 12a three	ough 12d that de:	scribes the type of sup	oporting o	organızatı	on and complete line	es 12e, 12f, and 12g
а	☐ Type I. A supporting organ	nization operated	l, supervised, or conti	rolled by	ıts suppo	rted organization(s),	typically by giving
	the supported organization					the directors or trust	ees of the
	supporting organization. Y	ou must comple	ete Part IV, Sections	A and B			
b	☐ Type II. A supporting orga						
	control or management of				e persons	that control or man	age the supported
	organization(s). You must	-	·				
С	Type III functionally integers its supported organization						ally integrated with,
d	☐ Type III non-functionally	integrated. A su	pporting organization	operate	d in conn	ection with its suppo	orted organization(s)
	that is not functionally inte						nd an attentiveness
	requirement (see instruction	ons). You must c	omplete Part IV, Sec	ctions A	and D, ar	nd Part V.	
е	Check this box if the orgain	nization received	a written determination	on from t	he IRS th	at it is a Type I, Type	e II, Type III
	functionally integrated, or			pporting	organızat	ion.	
f	Enter the number of supported	_					
g	Provide the following information					1	
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
			above (see instructions))		ment?	instructions)	instructions)
				Yes	l Na	-	
				res	No		
(A)							
(B)							
(C)							
/D\				ļ			
(D)							
E)							
Total		,		1	' .		

Part II 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.)

	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,885,165	2,904,440	2,862,104	3,027,104	3,902,021	15,580,834
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	2,003,103	2,304,440	2,002,104	3,027,104	3,302,021	13,300,034
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2,885,165	2,904,440	2,862,104	3,027,104	3,902,021	15,580,834
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						2,391,578
	on B. Total Support	l					13,189,256
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	2,885,165	2,904,440	2,862,104	3,027,104	3,902,021	15,580,834
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	5,522	5,286	6,792	6,597	10,245	34,442
11	Total support. Add lines 7 through 10			•	•		15,615,276
12	Gross receipts from related activities, etc.		•			12	
13	First five years. If the Form 990 is for the	~			•		
	organization, check this box and stop her			· · · · ·			▶ 🗀
	on C. Computation of Public Suppor	·				гт	
14	Public support percentage for 2018 (line 6		-			14	84 %
15 16a	Public support percentage from 2017 Sch 331/3% support test—2018. If the organization					15	86 %
IUa	box and stop here. The organization qual						
ь	331/3% support test—2017. If the organization						
-	this box and stop here. The organization						
17a	10%-facts-and-circumstances test—20	· ·	• •	_			
	10% or more, and if the organization me Part VI how the organization meets the "organization	ets the "facts- facts-and-circi	and-circumstaumstaumstaumstances" te	ances" test, ch st. The organiz	eck this box a zation qualifies	and stop here. s as a publicly	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	017. If the orga tion meets the neets the "fact	anization did n e "facts-and-c s-and-circums	ot check a bookircumstances" test.	x on line 13, 1 ' test, check t The organizati	6a, 16b, or 17a this box and s on qualifies as	a, and line stop here. a publicly
18	Private foundation. If the organization did instructions						see
			· · · · ·				🗀

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.)

Sacti	on A Public Support	under the te	sis listed bei	ow, piease co	omplete Fait	11.)	
	on A. Public Support dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(a) 2018	(6) Total
Calen	Gifts, grants, contributions, and membership fees	(a) 2014	(b) 2015	(6) 2016	(a) 2017	(e) 2018	(f) Total
'	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise			 		 	 /
-	sold or services performed, or facilities	İ					
	furnished in any activity that is related to the	1				/	
_	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	1					
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						i.
	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 .			ļ	/		
b	Amounts included on lines 2 and 3		ľ	/			
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from			/			
	line 6.) <u> </u>			'			
	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015 [*]	(c) 2016	(d) 2017	(e) 2018	(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	/	7		ļ		
	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.)	<u></u>					
13	Total support. (Add lines 9, 10c, 11/						
	and 12.)						
14	First five years. If the Form 990 is for the		n's first, secon	d, third, fourth	, or fifth tax ye	ear as a sect	ion 501(c)(3)
	organization, check this box and stop he			<u></u>	<u> </u>	<u> </u>	<u></u> . ▶ □
<u>Secti</u>	on C. Computation of Public/Suppor	rt Percentag	e				
15	Public support percentage for 2018 (line 8					15	%
16	Public support percentage from 2017 Sch			<u></u>	<u></u>	16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2018 (17	%
18	Investment income percentage from 2017					18	%
19a	331/3% support tests \(\frac{1}{2018} \). If the organ						
	17 is not more than 33/1/3%, check this box		_				
b	331/3% support tests—2017. If the organiz						
	line 18 is not more than 331/3%, check this l	box and stop h	ere. The organ	ızation qualifies	as a publicly s	upported org	anization 🕨 🗀
20	Private foundation. If the organization di	d not check a	box on line 14	, 19 <u>a, o</u> r 19b, o	check this box	and see inst	ructions 🕨 🗀

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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.)

Section A. All Sup	porting Organizations
--------------------	-----------------------

			Yes	No	
1	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.				
2	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.	2			
b	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	3a 3b			
С	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.	3c			i
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.	4a			
b	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.	4b			
С	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).	4с 5а			
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?	5b			
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c			
6	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 .				
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).	7			
В	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).				
9a	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 .	9a			
b	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 .	9b			
С	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 .	9c			
0a	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.	10a			
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.)	10a			

Part	Supporting Organizations (continued)		<u> </u>	
			Yes	No
11	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) below, the governing body of a supported organization?	44-		
h	A family member of a person described in (a) above?	11a 11b	<u> </u>	
	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.	11c		
	on B. Type I Supporting Organizations	1110	<u> </u>	<u> </u>
	on by type I cupper unit of guinzulione		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	Γ	1.55	
	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			ĺ
	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		ļ	ļ
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			1
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	 -		
Socti	on C. Type II Supporting Organizations	2	1	<u> </u>
Secu	on C. Type it Supporting Organizations	 .	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		,	1.40
•	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		
Secti	on 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		<u></u>
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		ŧ	-
•	significant voice in the organization's investment policies and in directing the use of the organization's	14	4.4	
	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	·	
Secti	on 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	nstru	ctions	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 (see in	$\overline{}$	
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			
	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]		
	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			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	<u> </u>		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b_		

emergency temporary reduction (see instructions).

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	<u> gani</u>	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section 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 collection of gross income or for management, conservation, or maintenance 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		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (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, see 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		
Section 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 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Part	Type III Non-Functionally Integrated 509(a)(a)	s) Supporting Organ	zations (continued)	
Sect	ion D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	orted		
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	inizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whice (provide details in Part VI). See instructions.	th the organization is res	sponsive	
9	Distributable amount for 2018 from Section C, line 6		"	
10	Line 8 amount divided by line 9 amount			
Sect	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
<u>b</u>	From 2014			
c	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			•
	Section D, line 7. \$			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			***************************************
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
_ 8	Breakdown of line 7:			
a	Excess from 2014 .			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017			
ее	Excess from 2018			

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17t III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Sec B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Sec lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)	ction 2a, 2b,
	·	
		
		
		<u> </u>
	•	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Name o	of the or	ganization		Employ	ver identification number
Multip	lication	Network Ministries			26-0276601
Par	t I	Organizations Maintaining Donor Adv	ised Funds or Other Similar Fur	nds or	Accounts.
		Complete if the organization answered	"Yes" on Form 990, Part IV, line 6.		
			(a) Donor advised funds	T	(b) Funds and other accounts
1	Total	number at end of year			
2	Aggre	egate value of contributions to (during year)			
3	Aggre	egate value of grants from (during year) .			
4		egate value at end of year			
5	Did t	he organization inform all donors and donor	advisors in writing that the assets h	neld in d	donor advised
	funds	are the organization's property, subject to the	e organization's exclusive legal contro	ol?	· · · · 🗌 Yes 🗌 No
6	Did th	ne organization inform all grantees, donors, a	and donor advisors in writing that gra	nt funds	s can be used
	only f	for charitable purposes and not for the bene-	fit of the donor or donor advisor, or f	for any	other purpose
	confe	rring impermissible private benefit?			· · · · 🗌 Yes 🗌 No
Par	t II	Conservation Easements.			
		Complete if the organization answered	"Yes" on Form 990, Part IV, line 7.	•	
1	Purpo	ose(s) of conservation easements held by the			
	☐ Pi	reservation of land for public use (e.g., recrea	tion or education) Preservation o	f a histo	orically important land area
		rotection of natural habitat			ified historic structure
	☐ Pi	reservation of open space			
2		plete lines 2a through 2d if the organization he	eld a qualified conservation contribution	on in the	e form of a conservation
	easer	ment on the last day of the tax year.		[Held at the End of the Tax Year
а	Total	number of conservation easements		[2a
b	Total	acreage restricted by conservation easement	······································	[2b
С	Numb	per of conservation easements on a certified h	nistoric structure included in (a)	[2c
d	Numb	per of conservation easements included in	(c) acquired after 7/25/06, and not	on a	
	histor	ic structure listed in the National Register .			2d
3	Numb	per of conservation easements modified, trans	sferred, released, extinguished, or teri	minated	by the organization during the
	tax ye	ear ►			
4	Numb	per of states where property subject to conse	rvation easement is located ▶		
5		the organization have a written policy reg			
		ions, and enforcement of the conservation ea			
6	Staff a	and volunteer hours devoted to monitoring, inspe	cting, handling of violations, and enforcin	ig conse	rvation easements during the year
					
7		nt of expenses incurred in monitoring, inspectin	g, handling of violations, and enforcing	conserv	ation easements during the year
	▶\$				
8	Does	each conservation easement reported on line	2(d) above satisfy the requirements of	f sectior	1 170(h)(4)(B)(i)
	and s	ection 170(h)(4)(B)(ii)?			· · · · 🗌 Yes 🗌 No
9		t XIII, describe how the organization reports of			
		ce sheet, and include, if applicable, the text of		nancial s	statements that describes the
		ization's accounting for conservation easeme			
Part		Organizations Maintaining Collection	· · · · · · · · · · · · · · · · · · ·		Similar Assets.
		Complete if the organization answered '			
1a		organization elected, as permitted under SF	• • • • • • • • • • • • • • • • • • • •		
		of art, historical treasures, or other similar			
	-	service, provide, in Part XIII, the text of the for			
b		organization elected, as permitted under S			
		of art, historical treasures, or other similar		ducation	i, or research in furtherance of
		service, provide the following amounts relati			
	(i) Re	venue included on Form 990, Part VIII, line 1 sets included in Form 990, Part X			. • \$
	(ii) As	sets included in Form 990, Part X			. • \$
2	If the	organization received or held works of art,	historical treasures, or other similar	r assets	for financial gain, provide the
		ring amounts required to be reported under S			
а	Rever	nue included on Form 990, Part VIII, line 1 .			. • \$
b	Asset	s included in Form 990, Part X			. ▶ \$

Part	Organizations Maintaining	Collections of	Art, His	torical T	reasures,	or Oth	ner Similar As	ssets (con	tinued)
3	Using the organization's acquisition, collection items (check all that apply)	accession, and ot	her reco	rds, chec	k any of the	follow	ing that are a	signıficant u	ise of its
а	☐ Public exhibition		d	☐ Loan	or exchange	e progra	ams		
b	☐ Scholarly research		е	☐ Other	•				
С	☐ Preservation for future generations	S							
4	Provide a description of the organiza XIII.	tion's collections a	and expla	ain how t	hey further t	the orga	anization's exe	mpt purpos	e in Part
5	During the year, did the organization assets to be sold to raise funds rather								□ No
Part		_							
	Complete if the organization	answered "Yes'	' on For	m 990, F	Part IV, line	9, or r	eported an ar	mount on f	- orm
	990, Part X, line 21.								
1a	Is the organization an agent, trustee included on Form 990, Part X?								□ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the fo	llowing ta	able:				
						L	<u> </u>	mount	
C	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amou								
<u>b</u>	If "Yes," explain the arrangement in P	art XIII. Check here	e if the ex	kplanatioi	n has been p	orovide	d on Part XIII .		
Par									
	Complete if the organization							. 1	
		(a) Current year	(b) Pri	or year	(c) Two years	back	(d) Three years bac	k (e) Four ye	ars back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of			e (line 1g	, column (a)) held a	s:		
а	Board designated or quasi-endowme	nt ▶	%						
b	Permanent endowment ▶	%							
С	Temporarily restricted endowment ▶	%							
	The percentages on lines 2a, 2b, and	2c should equal 10	00%.						
3a	Are there endowment funds not in th	e possession of th	e organı	zation tha	at are held a	and adr	nınıstered for tl	ne	
	organization by:							Y	es No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related of							3b	
4	Describe in Part XIII the intended use		n's endo	wment fu	unds.				
Part									
	Complete if the organization	answered "Yes"	' on For			11a. S	See Form 990	, Part X, lir	<u>ıe 10.</u>
	Description of property	(a) Cost or ot			r other basis		ccumulated	(d) Book	/alue
		(investmi	511L)	(0	ther)	ael	preciation		
1a	Land	·							
b	Buildings	·							
С	Leasehold improvements								
d	Equipment	·							
<u>е</u>	Other	·							
Total.	Add lines 1a through 1e. (Column (d) r	nust eaual Form 99	90. Part X	K. column	(B). line 10d	c)	• 1		

	Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, li				
	(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	I derivatives				
2) Closely-l	held equity interests				
3) Other					
(A)					
(B)					
(C)					
(D) (E)					
(F)					
·- <u>`` /</u> ·(G)					
(H)					
otal. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶				
Part VIII	Investments - Program Related.				
	Complete if the organization answered "Yes" or	n Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13		
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value		
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
71					
		+			
(8)					
(7) (8) (9) otal. (Column (b) must equal Form 990 Part X_col_(B) line 13.)				
(8) (9) otal. (Column (l	b) must equal Form 990, Part X, col (B) line 13) ► Other Assets.				
(8) (9)		n Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15		
(8) (9) otal. (Column (l	Other Assets.	n Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15		
(8) (9) otal. (Column (I Part IX	Other Assets. Complete if the organization answered "Yes" or	n Form 990, Part IV, line	· - · · · · · · · · · · · · · · · · · ·		
(8) (9) otal. (<i>Column</i> (I Part IX	Other Assets. Complete if the organization answered "Yes" or	n Form 990, Part IV, line	· - · · · · · · · · · · · · · · · · · ·		
(8) (9) otal. (Column (I Part IX (1) (2) (3)	Other Assets. Complete if the organization answered "Yes" or	n Form 990, Part IV, line	· - · · · · · · · · · · · · · · · · · ·		
(8) (9) otal. (Column (I Part IX (1) (2) (3)	Other Assets. Complete if the organization answered "Yes" or	n Form 990, Part IV, line	· - · · · · · · · · · · · · · · · · · ·		
(8) (9) Otal. (Column (I Part IX (1) (2) (3) (4) (5)	Other Assets. Complete if the organization answered "Yes" or	n Form 990, Part IV, line	· - · · · · · · · · · · · · · · · · · ·		
(8) (9) (1) (Column (1) (1) (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered "Yes" or	n Form 990, Part IV, line	· - · · · · · · · · · · · · · · · · · ·		
(8) 9) otal. (Column (l Part IX 1) (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered "Yes" or	n Form 990, Part IV, line	· - · · · · · · · · · · · · · · · · · ·		
(8) (9) otal. (Column (I Part IX (1) (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered "Yes" or	n Form 990, Part IV, line	· - · · · · · · · · · · · · · · · · · ·		
(8) (9) otal. (Column (l Part IX (1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered "Yes" or (a) Description		(b) Book value		
(8) 9) otal. (Column (land) Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column)	Other Assets. Complete if the organization answered "Yes" or (a) Description mn (b) must equal Form 990, Part X, col (B) line 15.)		· - · · · · · · · · · · · · · · · · · ·		
(8) 9) otal. (Column (land) Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column)	Other Assets. Complete if the organization answered "Yes" or (a) Description mn (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" or		(b) Book value		
(8) (9) otal. (Column (l Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered "Yes" or (a) Description mn (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" or line 25.		(b) Book value		
8) 9) otal. (Column (I Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Column Part X	Other Assets. Complete if the organization answered "Yes" or (a) Description mn (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" or line 25. (a) Description of liability (b) Book va	r Form 990, Part IV, line	(b) Book value		
(8) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) Federal in	Other Assets. Complete if the organization answered "Yes" or (a) Description mn (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" or line 25.	r Form 990, Part IV, line	(b) Book value		
8) 9) otal. (Column (I Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Column (I Part X	Other Assets. Complete if the organization answered "Yes" or (a) Description mn (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" or line 25. (a) Description of liability (b) Book va	r Form 990, Part IV, line	(b) Book value		
(8) 9) otal. (Column (I Part IX (1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Column (I Part X	Other Assets. Complete if the organization answered "Yes" or (a) Description mn (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" or line 25. (a) Description of liability (b) Book va	r Form 990, Part IV, line	(b) Book value		
(8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (7) (8) (9) (9) (1) Federal in (2) (3) (4) (5)	Other Assets. Complete if the organization answered "Yes" or (a) Description mn (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" or line 25. (a) Description of liability (b) Book va	r Form 990, Part IV, line	(b) Book value		
8) 9) 10tal. (Column (I Part IX 1) 2) 3) 4) 5) 6) 77) 8) 9) 1) Federal in 2) 3) 4) 5) 6) 6)	Other Assets. Complete if the organization answered "Yes" or (a) Description mn (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" or line 25. (a) Description of liability (b) Book va	r Form 990, Part IV, line	(b) Book value		
8) 9) 10tal. (Column (I Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) 1) Federal in 2) 3) 4) 5) 6) 7)	Other Assets. Complete if the organization answered "Yes" or (a) Description mn (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" or line 25. (a) Description of liability (b) Book va	r Form 990, Part IV, line	(b) Book value		
8) 9) otal. (Column (I Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Column Part X 1) Federal in 2) 3) 4) 5) 6) 77 8)	Other Assets. Complete if the organization answered "Yes" or (a) Description mn (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" or line 25. (a) Description of liability (b) Book va	r Form 990, Part IV, line	(b) Book value		
(8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) Federal in (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) Federal in (2) (8) (9) (9) (9) (1) Federal in (2) (9) (9) (9) (9) (9) (9) (9) (9	Other Assets. Complete if the organization answered "Yes" or (a) Description mn (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" or line 25. (a) Description of liability (b) Book va	r Form 990, Part IV, line	(b) Book value		

Part	•	·-	r Keturn.	
1	Complete if the organization answered "Yes" on Form 990, Total revenue, gains, and other support per audited financial statements		11	2 012 266
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		 	3,912,266
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	-	
c	Recoveries of prior year grants		-	•
d	Other (Describe in Part XIII.)		-	
e	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	3,912,266
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i i i i i i i i i i i i i i i i i i i		3,312,200
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	-	
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	3,912,266
Part	XII Reconciliation of Expenses per Audited Financial Staten	nents With Expenses	er Return.	
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.		
1 ,	Total expenses and losses per audited financial statements		1	3,488,598
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	_	
С	Other losses		_	
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	3,488,598
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	'		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	⊣	
b	Other (Describe in Part XIII.)	4b	<u> </u>	
	Add lines 4a and 4b		4c	
<u>5</u> Part	<u> </u>	<u>ie 10.) </u>	5	3,488,598
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	id 4: Part IV lines 1h and 3	b. Part V. lin	e 4: Part X line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part			c +, r arr x, inic
.,	•	•		
			,	
	,			
	·			•

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

2018

Open to Public

OMB No 1545-0047

Department of the Treasury

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

Internal Revenue Service

Name of the organization **Employer identification number Multiplication Network Ministries** 26-0276601 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to ✓ Yes
☐ No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (c) Number of (a) Region (b) Number (d) Activities conducted in the (e) If activity listed in (d) is (f) Total employees, agents, and expenditures for of offices in region (by type) (such as, a program service, describe specific type of and investments fundraising, program services, the region independent investments, grants to recipients service(s) in the region in the region contractors located in the region) in the region (1) Latin America 10 Program services Church Planter Training 1,052,606 (2) Asia 1 1 Program services Church Planter Training 744,944 (3) Africa 1 8 Church Planter Training 308,728 Program services (4) Spain/Europe 1 Church Planter Training Program services 98,043 (5) Baltics/Eurasia 2 Program services Church Planter Training 98,431 (6) (7) (8)(9) (10)(11)(12)(13) (14)(15)(16)(17)Subtotal 3a 22 2,302,752

5

22

Total from continuation sheets to Part I c Totals (add lines 3a and 3b)

2,302,752

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organizations or Entities Outside the United States. Complete if the organizations or Entities Outside the United States. Complete if the organizations or Entities Outside the United States.

	Part IV,	line 15, for ar	ny recipient who	received more than \$	5,000. Part II ca	n be duplicated if a	idditional space is	s nee
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	of
(1)			Latın America	Train Church Planters	\$688,894	Wire Transfers		
(2)			Asia	Train Church Planters	\$700,846	Wire Transfers		┷
(3)			Africa	Train Church Planters	\$216,624	Wire Transfers		ļ
(4)			Spain/Europe	Train Church Planters	\$57,345	Wire Transfers		
(5)			Baltics/Eurasia	Train Church Planters	\$44,167	Wire Transfers		
(6)								
(7)								
(8)								
(9)								
(10)								T
 (11)								
(12)								
(13)								
(14)								
(15)								
(16)				atad about that are read				

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exity by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
 Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	of r
				dispuisement	assistance	
(1)						
(2)						
(3)		,				
(4)						
(5)						
(6)						
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(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
(18)						



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Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	✓ No

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Part V	Supplemental	Information
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Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method), Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

1

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.

2018
Open to Public Inspection

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization ► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Multiplication Network Ministries 26-0276601 Form 990, Part VI, Section B, Question 11A - The review of the IRS Form 990 is performed by the governing board of the organization. Form 990, Part VI, Section B, Question 12c. The governing board reviews compliance with conflict of interest policy by excusing the related party from the discussion to determine if the transaction is in the best interest of the organization From 990, Part VI, Section B, Question 15b Annual performance reviews and market comparisons are utilized by the governing board to determine compensation. Form 990, Part VI, Section C, Question 19 - Governing documents and conflict of interest policy will be provided to the public at the discretion of management and/or board. Form 990, Part III, Section 4d - Spain/Europe - Training and resources are provided to a network of national leaders in Spain, who then train other leaders in effective church growth, church health and church planting. The processes used in Latin America and Africa have shown to be models that can accelerate growth in Spain. The MNM program results in Spain/Europe were as follows: 100 National leaders active in church planting training 100 Church planters started training 1,871 People reached with the gospel 438 New followers of Jesus 108 Bible studies meeting 686 People now in small group Bible studies Baltics/Eurasia - Training and resources are provided to a network of national leaders in the Baltic and Eurasia regions who then train other leaders in effective church growth, church health and church planting. The MNM program results were as follows: 29 National leaders were active in church planting training 1,716 People reached with the gospel 289 New followers of Jesus 25 Small group Bible studies meeting 172 People now in small group Bible studies