Form 9	9	0
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Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2016

Dena	artment of t	he Treasury	Do not er	ter social security numbers on	this form a	s it may be ma	de public.		Open to Public
	nal Revenu	•	► Informat	ion about Form 990 and its ins	tructions is	s at www.irs.go	ov/form990.		Inspection
Α	For the	2016 calenda	ar year, or tax year begin	ning	10-01	, 2016, and en	ding 0	9-30	,2017
в	Check if ap	pplicable:	C Name of organization Chil	drens Bible Hour Mini	lstries			D En	nployer identification no.
	Address cl	hange	Doing business as Keys	for Kids Ministries,	, Inc			38-	-1675000
	Name cha	nge	Number and street (or P.O. bo	x if mail is not delivered to street address)			Room/suite	E Te	elephone number
	Initial retur	'n	2060 43rd Stre	et SE				(61	L6)647-4500
	Final returi	n/terminated	City or town, state or province	, country, and ZIP or foreign postal code					1,139,599
	Amended	return	Grand Rapids, 1	MI 49508				G Gr	oss receipts\$
	Application	n pending	F Name and address of principa	l officer: Greg Yoder			H(a) Is this a group return	for subor	dinates? 🗌 Yes 🔀 No
			Same as C above	9			H(b) Are all subordina	tes inclu	ded? Yes No
I	Tax-exemp	pt status: 🛛 🕅	501(c)(3) 501(c) () < (insert no.) 4947(a)(1) or	527		If "No," attacl	n a list. (s	see instructions)
J	Website:	► www	.keysforkids.org				H(c) Group exemption	n numbe	er 🕨
к	Form of or	ganization: X	Corporation Trust Ass	ociation 🗌 Other 🕨	L Ye	ar of formation: 19	M State of le	gal domi	cile: MI
Pa	art I	Summary	У				·		
	1	Briefly descri	be the organization's miss	ion or most significant activities:	Keys f	or Kids Mi	nistries is a	n in	ternational
				on the Gospel of Jesu					
nce		excellent	t media resources	to ignite a passion	for Chr.	ist in kid	s and their f	amil	.ies.
Governance									
ove	2	Check this bo	ox ► _ if the organization	n discontinued its operations or dis	sposed of m	ore than 25% o	f its net assets.		
ğ	3	Number of vo	oting members of the gove	erning body (Part VI, line 1a)			3		8
Activities &				s of the governing body (Part VI,					8
itie			-	n calendar year 2016 (Part V, line					19
Ę				necessary)					10
◄				Part VIII, column (C), line 12				a	0
				from Form 990-T, line 34				0	0
				· · · · · · · · · · · · · · · · · · ·			Prior Year		Current Year
	8	Contributions	and grants (Part VIII, line	1h)		[975,2	93	960,963
ē			•	e 2g)			36,7		26,364
Revenue		-		A), lines 3, 4, and 7d)			(13,5)		419
Rev				nes 5, 6d, 8c, 9c, 10c, and 11e)			29,9		114,996
_				must equal Part VIII, column (A),			1,028,3		1,102,742
				IX, column (A), lines 1-3)	,		4,5		0
			• •	X, column (A), line 4)		-	1,5	10	0
				e benefits (Part IX, column (A), lin			540,2	28	547,561
es.				column (A), line 11e)			54072	20	0
xpense			sing expenses (Part IX, co			4,125			
ц. В				nes 11a-11d, 11f-24e)			451,5	25	525,109
_				equal Part IX, column (A), line 25			996,3		1,072,670
		•	(18 from line 12	,		32,04		30,072
					• • • • • •		Beginning of Current Yea		End of Year
Net Assets or	20	Total assets	(Part X line 16)				870,74		894,822
Asse			,				58,2		57,772
Vet	22		(line 21 from line 20					
	art II		re Block		• • • • • •	••••	812,5	55	837,050
·				rn, including accompanying schedules and	statements and	to the best of my kr	nowledge and belief it is		
				icer) is based on all information of which pre-			iomougo ana bonon, k io		
		\ ~	1						
Sig	ın		Yoder e of officer					u ate	7-12-2018
-				_ .					
He	ie		Yoder, Executive print name and title	Director					
		,			Da	to			
D -1	ا م ا	Print/Type pre		Preparer's signature			Check X if	PTIN	
Pai				James H Quist CPA	07	-12-2018	self-employed	P	00958612
	eparer			Quist CPA, PLC			Firm's EIN 🕨		_
Us	e Only	Firm's address		on Ave SW			Phone no.		
		1	Wyoming	MI 49519			616-	443-	5344

	wyoming MI 49519	616-443-5344
May the IRS	discuss this return with the preparer shown above? (see instructions)	

No

Form	990 (2016) Childrens Bible Hour Ministries	38-1675000	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		🗌
1	Briefly describe the organization's mission: Keys for Kids Ministries is an international Christian ministry based on the Christ, producing and distributing excellent media resources to ignite a pass in kids and their families.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
-	prior Form 990 or 990-EZ?	Yes	x No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.	Yes	<u>x</u> No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot the total expenses, and revenue, if any, for each program service reported.	-	
4a	(Code:) (Expenses \$ 739,075 including grants of \$) (Revenue KFK produces and distributes Christ centered radio programs as well as audio	visual mate	<u>,360</u>) rials
	for the evangelization and discipleship of children around the world. Keys for broadcast on over 900 stations in the United States. Translations of Keys for		
	broadcast on over 900 stations in the united states. Translations of keys for broadcast around the world with TransWorld Radio. The website had over 2 mill during the year. Other books and audio stories have wide distribution by radi	lion visits	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$	
40		Ψ	/
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 739,075	/	
EEA		Form	n 990 (2016)

Form	990 (2016) Childrens Bible Hour Ministries 38-1675	000	Р	age 3
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			37
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		v
6	Part III	5		X
U	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	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а				
	complete Schedule D, Part VI	11a	X	
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	11b		X
С	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	11c		X
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	44-1		v
~	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X X
e f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			- 25
124	Schedule D, Parts XI and XII	12a	x	
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	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
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	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4-		T 7
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40		v
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	If "Yes," complete Schedule G, Part III.	19		х
FFA			990 (2016)

Form **990** (2016)

Form	1990 (2016) Childrens Bible Hour Ministries 38-1675	000	P	age 4
Pa	rt IV Checklist of Required Schedules (continued)			1
			Yes	No
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			37
~~	domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			37
~~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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	00		v
240	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	240		v
h	through 24d and complete Schedule K. If "No," go to line 25a	24a 24b		Х
b		240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	240		
A		24c 24d		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24u		
25a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h		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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	230		Λ
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		21
	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		Х
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		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
с	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	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
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		Х
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		Х
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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		Х
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		Х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	

Form **990** (2016)

	990 (2016) Childrens Bible Hour Ministries	38-1675000	F	Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	6		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1-	37	
20	reportable gaming (gambling) winnings to prize winners?	· · · · · · · 10	Х	
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	19		
b		<u> </u>	Х	
D.			21	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			х
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>			
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		Х
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?			Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7 c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е		7e		Х
f		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as requir			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	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		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L.	Note. See the instructions for additional information the organization must report on Schedule O.			
b	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			
~	the organization is licensed to issue qualified health plans			
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			- 22

 b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13	Form	990 (2016) Childrens Bible Hour Ministries 38-1675	000	P	age 6
Check If Schedule O contrains a response or note to any line in this Part VI Image: Contraint C	Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for	a "No"		
Section A. Coverning Body and Management Yes No 1a Entit the number of voting members of the governing body at the end of the tax yes? 1a 5 1 fiftero are multical differences of two products and authority to an executive committee or similar committee, explain in Schedule 0. 1b 8 2 Did any officer, director, trustee, or key enployee? 1a 5 X 3 Did the organization directs included in line 1a, above, who are independent 1b 8 X 4 Did the organization directs included in line 1a, above, who are independent 3 X 3 Did the organization directs averagement duries customarkly performed by or under the effect supervision of theorignization bacers average during the year or a significant diverse members or stochholders? 6 X 4 Did the organization have members subcholders or other person? 7a X 5 Did the organization have members subcholders? 7b X 6 Did the organization notion reserved to for subject to approval by members, subcholders or the organization notion reserved to for subject to approval by members, subcholders or the organization notion reserved to for subject to approval by members, subcholders or the organization notion reserved to for subject to any orbit organization notion reserved to for subject to any orbit organization notion reserved to for subject to any orbit organization neaver any orbit organization reserved t		response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructio	ns.		
In Enter the number of voling members of the governing body at the end of the tax year In the governing body designed to and automity to an executive committee or aimfar the governing body designed to advance of the governing body. If the governing body designed to advance of the governing body. The governing body designed to advance of the governing body. The governing body designed to advance of the governing body. The governing body designed to advance of the governing body. The governing body designed to advance of the governing body at the end to advance of the governing body. The governing body designed to advance of the governing body at the end to advance of the governing body. The governing body designed to advance of the governing body. The governing body designed to advance of the governing body. The governing body designed to advance of the governing body. The governing body designed to advance of the governing body. The governing body designed to advance of the governing body. The governing body?		Check if Schedule O contains a response or note to any line in this Part VI			. X
1a Enter the number of voling members of the governing body, or the preserving body delegated tread autority to an executive committee or similar committee serving host methods in the governing body. or the preserving body delegated tread autority to an executive committee or similar committee serving in Stababide 0. 1b 8 2 Did any officer, dieactin, russies, or key employee have a family relationship or a business relationship with any other officer, dieactin, russies, or key employee to a significant diversement due to cubin rain periods of the organization delegate cortrol over imagement dues cubinnarily performed by or under the direct supervision of diress, directors, or transee, or key employees a name segment company or other person? 3 X 2 Did the organization have members or stabilization as set of the comparization base and the organization have members as stabilization for the person set berief. 6 X 3 Did the organization name members are stabilization for the organization have members as stabilization for the organization have members. 5 X 4 Did the organization name members are stabilization for the organization have members. 5 X 5 Did the organization have members are stabilization for the organization have members. 5 X 6 Did the organization have members are stabilization for the organization have mature of the organization. 7b X 8 Did the organization have del	Sec	tion A. Governing Body and Management			
If the governing body disgusted broads at/bothy to an executive committee or similar committee, explain in Schodule 0. Ib Ib B Ib Ener the number of volting members included in line 1a, above, who are independent				Yes	No
if the governing body delegated broad authority to an executive committee or similar 1b 8 committee organian is Schedule 0. 1b 8 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any offacer director, trustee, or key employees to an anagement officer, director, trustee, or two yeo employee to an anagement officer, director, trustee, or key employees to an anagement officer, director, trustee, or key employees to an anagement officer, director, trustee, or key employees to an anagement officer, director, trustee, or key employees to an anagement officer, director, trustee, or key employees to an anagement officer, director, trustee, or key employees to an anagement officialization assets? 3 X 4 Did the organization have any significant changes to its governing body or under the direct anagement officialization asset due to the organization have members, sockholders? 6 X 5 Did the organization have members, sockholders? 6 X 6 Did the organization have members, sockholders? 7 X 8 Did the organization have members, sockholders? 7 X 9 Did the organization have members, sockholders? 7 X 8 Did the organization have members, sockholders? 7 X 9 Did the organization have members, sockholders? 7 X <	1a	Enter the number of voting members of the governing body at the end of the tax year 1a 8			
committee explain in Schedule 0. It B 2 Did any officer, director, trustee, or key employee? 2 X 3 Did any officer, director, trustee, or key employee? 2 X 3 Did the organization delegate control over management dutes customarily performed by or under the direct 3 X 4 Did the organization become aware during the year of a significant delegate control over management dutes customarily performed by or under the direct 3 X 5 Did the organization become aware during the year of a significant delegate control over management dutes customarily performed by or under the direct 3 X 6 Did the organization baceme aware during the year of a significant delegate control over management dutes customarily performed by or under the direct control over management dutes customarily performed by or under the direct control over management dutes customarily performed by or under the direct customarily customaria. 7 X 6 Did the organization networm powering body? 7 X X 8 Did the organization networm powering body? 8a X 9 Is the arg my difficant delagate bid or written actions undertaken during the organization networm organization networm organization networm dis and addresses? 7 X		If there are material differences in voting rights among members of the governing body, or			
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14 X 15 Did the organization have a written document retention and destruction policy? 14 X 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 X a The organization's CEO, Executive Director, or top management official 15a X 15a X b Other officers or key employees of the organization 15b X 15b X 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16a X 17 List the states with which a copy of this Form 990 is required to be filed lead tax law, and 990. T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. 16b X 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990. T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these		describe in Schedule O how this was done	12c	Х	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 15a X a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b X 16a X 15b X 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b X Section C. Disclosure 16b X 17 List the states with which a copy of this Form 900 is required to be filed >	13	Did the organization have a written whistleblower policy?	13	Х	
independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15/2 a The organization's CEO, Executive Director, or top management official 15/a X b Other officers or key employees of the organization 15/b X 15/b 15/b X 16/a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16/a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16/b X Section C. Disclosure 16/b X 17 List the states with which a copy of this Form 990 is required to be filed	14	Did the organization have a written document retention and destruction policy?	14		X
 a The organization's CEO, Executive Director, or top management official	15				
b Other officers or key employees of the organization 15b X If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a 16b X b Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b X Section C. Disclosure 16b X 17 List the states with which a copy of this Form 990 is required to be filed					
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16a X Section C. Disclosure 16b X 17 List the states with which a copy of this Form 990 is required to be filed ► 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Ohne website Image: Check all that apply. 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: ►				X	
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16a X Section C. Disclosure 16b X 17 List the states with which a copy of this Form 990 is required to be filed	b		15b		X
 with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? C. Disclosure 16b X Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 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's books and records:					
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participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b X Section C. Disclosure 16b X 17 List the states with which a copy of this Form 990 is required to be filed ▶			16a		X
organization's exempt status with respect to such arrangements? 16b X Section C. Disclosure 16b X 17 List the states with which a copy of this Form 990 is required to be filed ▶ ▶ 17 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ○ ○ 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 10 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ ▶	b				
Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. □ Own website X X Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 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's books and records:			4.01		37
 17 List the states with which a copy of this Form 990 is required to be filed ► 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Opon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 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's books and records: ► 	<u> </u>		160		X
 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 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's books and records: 					
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 Own website X Another's website X Upon request Other (<i>explain in Schedule O</i>) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: ► 	10				
 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 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's books and records: 					
 financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: 	10				
20 State the name, address, and telephone number of the person who possesses the organization's books and records:	13				
	20				

Form 990 (201	6) Childrens Bible Hour Ministries	38-1675000	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co Independent Contractors	ompensated Employee	es, and
	• • • • • • • • • • • • • • • • • • • •		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete to organization's	his table for all persons required to be listed. Report compensation for the calendar year ending with or tax year.	within the	

• 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

					(C)					
(A) Name and Title	(B) Average hours per week (list any	box,	unles	Po: eck m ss pei	sition nore th rson is	nan one s both ar /trustee)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	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)	compensation from the organization and related organizations
(1) Seth_Getz Member	1.00	x						(0 0	0
(2) Scott_Cousino Member	<u> </u>	x							0 0	0
(3) Gary_Feenstra Member	<u> </u>	x							0 0	0
(4) Scott_VanderVeen Member	<u> </u>	x							0 0	0
(5) Duane Culver President	2.00	x		Х					0 0	0
(6) Libby Knepper-Muller Vice President	2.00	x		Х					0 0	0
(7) Lee Geysbeek Secretary	<u>2.00</u>	x		Х					0 0	0
(8) Joe Moss Treasurer	<u>2.00</u>	x		Х					0 0	0
(9) Greg_Yoder Executive Director	40.00_			Х				62,678	3 0	11,856
<u>(10)</u>										
(11)										
(12)										
(13)										
<u>(14)</u>										
								1	1	Eorm 000 (2016)

Porm 9	VII Section A. Officers, Directors, Trustees					hos	t Con			38-1675	000	F	age 8
Fait	Section A. Onicers, Directors, Trustees	, Key Emplo	yees,	anu	<u>пі</u> (С			iper		(continued)			
	(A) Name and title		(B) Position (do not check more than one box, unless person is both an officer and a director/trustee) week (list any							(E) Reportable compensation from related		(F) Estimated amount of other	
		hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Hignest compensated	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	or	npensati from the ganizatic nd relate ganizatio	on ed
(15)													
<u>(17)</u>													
<u>(18)</u>													
<u>(19)</u>													
(20)													
(21)													
(23)													
(24)													
(25)													
1b	Sub-total		•••	•••	•••		• • •	►					
C	Total from continuation sheets to Part VII, Section							►					
d 2	Total (add lines 1b and 1c) Total number of individuals (including but not limited)							► mor	62,678	0		11,	856
2	reportable compensation from the organization	a to those list	eu abc	ove)	who	rec	erved	more	e man \$100,000 of	0			
	· · · · · · · · · · · · · · · · · · ·											Yes	No
3	Did the organization list any former officer, directo		-		-		-						
	employee on line 1a? If "Yes," complete Schedule										3		X
4	For any individual listed on line 1a, is the sum of rep organization and related organizations greater than												
	individual			5, 00	omp		Scried	uue			4		X
5	Did any person listed on line 1a receive or accrue of			ny u	nrela	ated	l orgar	nizat	ion or individual		-		
	for services rendered to the organization? If "Yes,"	' complete So	chedul	e J f	or si	uch	perso	n			5		Х
Secti	on B. Independent Contractors												
1	Complete this table for your five highest compensate compensation from the organization. Report compen- year.												
	(A)								(B)			(C)	
	Name and business address								Description of	services	Com	pensatio	'n

2	Total number of independent contractors (including but not limited to those listed above) who	
	received more than \$100,000 of compensation from the organization	

Form 99	90 (20	16) Children	ns Bible	Hour	Ministries			38-1675	000 Page 9
Part V	VIII	Statement of Revenu	he						
		Check if Schedule O contair	ns a response	e or no	te to any line in thi	s Part VIII			[]
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated campaigns		1a					
unt	b			1b					
ມີຍິ	c	Fundraising events		1c					
fts, ar A				1d					
Other Revenue Contributions, Gifts, Grants and Other Similar Amounts and Other Similar Amounts	d			1u 1e					
ons r Si	e	•		ie					
buti	f			45					
id of		and similar amounts not includ		1f	960,963				
a õ	g	Noncash contributions include							
	h	Total. Add lines 1a-1f		· · · ·		960,963			
¢)				-	Business Code				
enue	2a				511190	26,364	26,364		
Rev	b								
/ice	C								
Serv	d								
am	е								
rog	f	All other program service reven	nue	[
	g	Total. Add lines 2a-2f				26,364			
	3	Investment income (including d	lividends, inte	erest.					
		and other similar amounts) .			►	419	419		
	4	Income from investment of tax-	exempt bond	l procee	eds►				
	5	Royalties							
			(i) Real		(ii) Personal				
	6a	Gross rents							
	b	Less: rental expenses							
		Rental income or (loss)							
	1	Net rental income or (loss) .							
			(i) Securitie		(ii) Other				
		Gross amount from sales of assets other than inventory			(.) 01.01				
	b	Less: cost or other basis and sales expenses							
	c	Gain or (loss)							
	d	Net gain or (loss)		· · · <u>·</u>					
iue	8a	Gross income from fundraising							
ven		events (not including \$							
Re		of contributions reported on line	e 1c).						
ler		See Part IV, line 18		. a					
₹	b	Less: direct expenses		. b					
	c	Net income or (loss) from fund	raising events	s					
	9a	Gross income from gaming act	tivities.	Γ					
		See Part IV, line 19		. a					
	b	Less: direct expenses		F					
		Net income or (loss) from gami							
		Gross sales of inventory, less	5	ſ					
	IVa	returns and allowances		. a	151,853				
	Ь	Less: cost of goods sold		-	36,857	1 1			
		Net income or (loss) from sales		_		114,996	114,996		
		Miscellaneous Revenue		<u> </u>	Business Code	114,550	114,550		
	11a				Succession of the				
	b								
	c b								
		All other revenue							
		Total. Add lines 11a-11d		-					
		Total revenue. See instructions				1,102,742	141,779		0 0
	1 1 4						<i>_//></i>		м U

016) Childrens Bible Hour Ministries

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

38-1675000

sp. 4	not include amounts reported on lines 6b, 7b, Db, 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		0.000	general expended	caponoca
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	75,305	18,826	18,826	37,65
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	400,319	313,056	73,734	13,52
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	37,009	29,698	6,497	81
0	Payroll taxes	34,928	24,789	6,598	3,54
1	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	7,075		7,075	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 .				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	56,012	39,608	6,704	9,700
2	Advertising and promotion	55,111	24,025	938	30,148
3	Office expenses	81,605	32,487	15,323	33,79
4	Information technology	64,185	32,365	20,811	11,00
5	Royalties				
6		27,133	8,765	12,060	6,308
7	Travel	9,854	1,766	1,747	6,34
8	Payments of travel or entertainment expenses		-		
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	6,603	2,571	3,372	66
20		.,			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,871	11,903	3,650	31
23		6,175	4,631	1,235	30
24	Other expenses. Itemize expenses not covered	07175	1,031	1/200	
	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.)				
2	Production Costs	105 / 95	104 595	900	
a b		195,485	194,585	900	
с С					
d					
e	All other expenses	1 000 000			
5	Total functional expenses. Add lines 1 through 24e . Joint costs. Complete this line only if the	1,072,670	739,075	179,470	154,12
26	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here				

Form 990	(2016)	Chil
Part X	Balance	Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	1,485	1	1,031
	2	Savings and temporary cash investments	296,060	2	355,175
	3	Pledges and grants receivable, net	•	3	
	4	Accounts receivable, net	15,517	4	20,212
	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	
	6	Loans and other receivables from other disqualified persons (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	
Assets	8	Inventories for sale or use	50,139	8	26,283
As	9	Prepaid expenses and deferred charges	1,000	9	1,450
	10a	Land, buildings, and equipment: cost or	_,		
		other basis. Complete Part VI of Schedule D 10a 629,400			
	b	Less: accumulated depreciation	506,542	10c	490,671
	11	Investments - publicly traded securities	,	11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14			14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	870,743	16	894,822
	17	Accounts payable and accrued expenses	58,210	17	57,772
	18	Grants payable	•	18	
	19			19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ŝ	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
iabi		disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	58,210	26	57,772
		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔀 and			
ŝ		complete lines 27 through 29, and lines 33 and 34.			
nce	27	Unrestricted net assets	666,664	27	682,790
ala	28	Temporarily restricted net assets	145,869	28	154,260
В	29	Permanently restricted net assets		29	
Fun		Organizations that do not follow SFAS 117 (ASC 958), check here 🕨 🗋 and			
ŗ		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
~	33	Total net assets or fund balances	812,533	33	837,050
	34	Total liabilities and net assets/fund balances	870,743	34	894,822

Form 990 (2016)

Form	990 (2016) Childrens Bible Hour Ministries 3	8-167	75000)	Pa	age 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,1	.02,	742
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,0)72,	670
3	Revenue less expenses. Subtract line 2 from line 1	3			30,	072
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		8	312,	533
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8			(5,	555)
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		8	337,	050
Pa	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII	• • • •		•••		<u>. </u>
			г		Yes	No
1	Accounting method used to prepare the Form 990: 📋 Cash 🛛 🖾 Accrual 📋 Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	•••	•••	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?	•••	•••	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	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	X	
	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		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>		3b		L
EEA				Form	990 (2016)

SCI	IEDU	JLE A
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Public Charity Status and Public Support

OMB No. 1545-0047

SCI	HED	DULE A	Complete if the organiz	ation is a section 50	2016				
•		0 or 990-EZ)		► Atta	Open to Public				
		of the Treasury renue Service	 Information at 		rm 990 or 990-EZ) and its		s is at www	.irs.gov/form990.	Inspection
Name	of th	e organization		•				Employer identific	ation number
hi	ldr	ens Bible	Hour Ministrie	s				38-16750	00
Pa	rt I	Reason	for Public Charity	y Status (All or	ganizations must c	omplete	this part	.) See instruction	S.
The	orga		•	,	s 1 through 12, check onl		,		
1					rches described in sect				
2	Ц				Schedule E (Form 990 c				
3		•		•	n described in section 1				
4			• ·	rated in conjunctio	n with a hospital describ	ed in sect	ion 170(b))(1)(A)(III). Enter the	
F		•	e, city, and state:		university owned or oner	otod by o d		tal unit described in	
5		-)(1)(A)(iv). (Complete	-	iniversity owned or operation	aled by a g	jovernmen	lai unit described in	
6		•		,	nit described in section	170(b)(1)	(A)(y)		
7	X		•	•	of its support from a gov			m the general public	
•	27	•	ection 170(b)(1)(A)(vi			verninenta		in the general public	
8	\square		rust described in secti		,				
9	Π	-			ion 170(b)(1)(A)(ix) ope	rated in co	njunction	with a land-grant colle	ede
		•	•		ee instructions). Enter th		•	•	0
		university:	-	·			-	-	
0		An organizatio	n that normally receive	s: (1) more than 33	1/3% of its support from	n contributi	ons, memb	pership fees, and gros	6
		receipts from a	ctivities related to its e	exempt functions - s	subject to certain excepti	ons, and (2	2) no more	than 33 1/3% of its	
		support from g	ross investment incom	e and unrelated bu	siness taxable income (le	ess sectior	n 511 tax) f	from businesses	
		acquired by th	e organization after Ju	ne 30, 1975.See s	section 509(a)(2). (Com	plete Part	III.)		
1		•	•		test for public safety. Se				
12		•	•	•	he benefit of, to perform				
				-	bed in section 509(a)(1)			, , , , , , , , , , , , , , , , , , , ,	.,
	_		•		e type of supporting org				•
	а				ised, or controlled by its		-	.,	ing
			• • • •		r appoint or elect a major IV, Sections A and B.			liusiees of the	
	b	•	•	-	introlled in connection w	ith its sunr	orted ora:	anization(s) by having	r
				•	on vested in the same pe		-	.,	
			on(s). You must comp						
	с		•	-	anization operated in co	nnection w	ith, and fu	nctionally integrated v	vith,
					u must complete Part I				
	d	Type III no	on-functionally integr	rated. A supporting	organization operated i	in connect	ion with its	supported organizati	on(s)
		that is not	functionally integrated.	The organization g	enerally must satisfy a d	istribution	requiremer	nt and an attentiveness	5
		requireme	nt (see instructions). Y	ou must complet	e Part IV, Sections A a	nd D, and	Part V.		
	е		0		determination from the IF		a Type I,	Type II, Type III	
				-	ntegrated supporting orga				
	f				• • • • • • • • • • • •	• • • • •	• • • • •	•••••	••••
	g		owing information abo		- · · ·				
	(Name of supported 	organization	(ii) EIN	(iii) Type of organization (described on lines 1-10)	(iv) Is the c	rganization Ir governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
					above (see instructions))	docum	• •	instructions)	instructions)
						Yes	No		
						103	110		
A)									
D)									
В)									
\sim									
C)									
(D)									
-,									
(E)									

Total

Sched		drens Bible				38-1675000	
Pa	rt II Support Schedule for Org						
	(Complete only if you chec						under
	Part III. If the organization	fails to qualify ι	under the tests	listed below, p	lease complete	e Part III.)	
Sec	tion A. Public Support	1			1		
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
•	membership fees received. (Do not						
	include any "unusual grants.")	716,152	720,050	843,774	975,293	960,963	4,216,232
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities fumished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	716,152	720,050	843,774	975,293	960,963	4,216,232
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)						394,773
6	Public support. Subtract line 5 from line 4						3,821,459
Sec	tion B. Total Support	-					
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	716,152	720,050	843,774	975,293	960,963	4,216,232
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						1 500
	sources	299	567	226	191	419	1,702
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.)						
11	Total support. Add lines 7 through 10						4,217,934
12	Gross receipts from related activities, etc. (s	see instructions)				12	990,432
13	First five years. If the Form 990 is for the organization, check this box and stop here	organization's first,					
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2016 (line 6, o))		14	90.60 %
15	Public support percentage from 2015 Sched						90.41 %
16a	33 1/3% support test - 2016. If the organiz	zation did not chec	k the box on line 1	3, and line 14 is 33	3 1/3% or more, cł	neck this	
	box and stop here. The organization qualit						► 🛛
b	33 1/3% support test - 2015. If the organiz	zation did not chec	k a box on line 13	or 16a, and line 15	5 is 33 1/3% or mo	re, check	
	this box and stop here. The organization of	ualifies as a public	ly supported orgar	nization			▶□
17a	10%-facts-and-circumstances test - 2010	6. If the organization	on did not check a l	oox on line 13, 16a	a, or 16b, and line	14 is	
	10% or more, and if the organization meets	s the "facts-and-cir	cumstances" test, o	check this box and	l stop here. Expla	in in	
	Part VI how the organization meets the "fac	ts-and-circumstand	es" test. The organ	nization qualifies as	a publicly suppor	ted	
	organization						· · · ► 🗌
b	10%-facts-and-circumstances test - 201	5. If the organization	on did not check a l	box on line 13, 16a	a, 16b, or 17a, and	lline	
	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization meet	ets the "facts-and-c	ircumstances" test.	The organization of	qualifies as a publi	cly	
	supported organization						· · · ► 🗌
18	Private foundation. If the organization did	not check a box o	n line 13, 16a, 16b	, 17a, or 17b, cheo	ck this box and se	9	
	instructions						· · · ▶ □
EEA						Schedule A (Form 9	990 or 990-EZ) 2016

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.) Section A. Public Support Calendar year (or fiscal year beginning in) ► (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total Once receipt non-advisor, and metanization failes (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total Once receipt non-advisor, and metanization failes (a) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total Out an once intermating them combands (a) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total Instruction devisors intermating them combands (a) 2012 (b) 2013 (c) 2014 (d) 2016 (f) Total Instruction devisors intermating them combands (a) 2012 (b) 2013 (c) 2014 (d) 2016 (f) Total Instruction devisors intermating them combands (a) 2012 (b) 2013 (c) 2014 (d) 2016 (f) Total Instruction devisors intermating them combands (a) 2012 (b) 2013 (c) 2014 (d) 2016 (f) Total Instruction devisors				Hour Minist			38-1675000	Page 3
If the organization fails to qualify under the tests listed below, please complete Part II.) Section A Public Support Gelendry year (or fiscal year beginning in) + (a) 2012 (b) 2013 (c) 2014 (d) 2015 (Pa							
Section A. Public Support Cellandary part (initial years beginning in) + (a) 2012 (b) 2013 (c) 2014 (c) 2015 (e) 2016 (f) Total Cellandary part (initial years) and methods free methods (in the fields any human grants) Cellandary part (initial years) and the field of the cells o								Part II.
Calendary yare (or fiscal yare beginning in) v (a) 2012 (b) 2013 (c) 2014 (c) 2016 (c) 2016 (f) Total 1 Gibs grants, diversity in a diversity in trade of the second of	<u> </u>		uality under th	e tests listed b	elow, please co	omplete Part II.)	
1 Gits parent, contributions, and marchanolity formalization of the second participant of the data with a second participant. Image: Control of the second participant of the second partipant of the second participant of t			(a) 2012	(b) 2013	(c) 2014	(d) 2015	(a) 2016	(f) Total
received from a damages. Recretandage grafters in a section of the section o	-		(4) 2012	(6) 2013	(0) 2014	(0) 2013	(0) 2010	
subtraction spectrum, or ballies	'							
B cross receipts from activates that are not an unrelated fractions tha	2							
uncleated trade of both or the opportation benefit and effect pad by dependent on its benefit and effect pad by dependent on the benefit pad by dependent on the trad dependent by dependent for infriend on the trad by dependent for infriend by trading by dependent for infriend by dependent by dependent for infriend by dependent by dependent for infriend by dependent for infriend by dependent by dependent for infriend by depende		furnished in any activity that is related to the						
cognization's benefit and either paid	3	•						
trailed by a governmental with to the organization whost charge is a section 51 model. Add lines 1, 2, and 3 resized from degaalide presents charge and 3 resized from detry than degaalide presents charge and 3 resized from detry than degaalide presents charge and 3 resized from detry than degaalide presents charge and 3 resized from detry than degaalide presents charge and 3 resized from detry than degaalide presents charge and 3 resized from detry than degaalide presents charge and 3 resized from the resized of 55,000 or 1% of the amount on line 13 for the year . c Add lines 7 and 7b	4	organization's benefit and either paid						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	5	furnished by a governmental unit to the						
b Amounts included on lines 2 and 3 received from other than disquified persons that exceed the greater of \$5.000 or 1% of the amount on line 16 for the year . Image: Comparison of the the greater of \$5.000 or 1% of the amount on line 16 for the year . c Add lines 7 and 7b Image: Comparison of the the greater of \$5.000 or 1% of the amount on line 16 for the year . Section B. Total Support Image: Comparison of the comparison of	6	Total. Add lines 1 through 5						
received from other than dequalified persons that exceed the greater of \$5.000 i i c Add lines 7a and 7b i i c Add lines 7a and 7b i i d Public support: (Subtrat line 7c from line 6.) i i Section B. Total Support Calendar year (or fiscal year beginning in) * (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 9 Amounts from line 6 i<	7a							
c Add lines 7a and 7b	b	received from other than disqualified persons that exceed the greater of \$5,000						
Imme 6.) Imme 6.) Imme 6.) Section B. Total Support Calendar year (or fiscal year beginning in) > (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 9 Amounts from line 6 Imme 6.) Imme 6.) <td< td=""><td>с</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	с							
Imme 6.) Imme 6.) Imme 6.) Section B. Total Support Calendar year (or fiscal year beginning in) > (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 9 Amounts from line 6 Imme 6.) Imme 6.) <td< td=""><td>8</td><td>Public support. (Subtract line 7c from</td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	8	Public support. (Subtract line 7c from						
Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 9 Amounts from line 6		line 6.)						
9 Amounts from line 6 Image: Construction of the second of the seco			() 00/0	(1) 00/0	() 22/4	()) = = (=	()	(A) =
10a Gross income from interest, dividends, payments received on securities loans, rents, royalites and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated businesse acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated businesse acquired after June 30, 1975 activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or looss from the sale of capital assets (Explain in Part VI.) (Explain in Part VI.) 13 Total support, (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) 16 % <t< td=""><td></td><td></td><td>(a) 2012</td><td>(b) 2013</td><td>(c) 2014</td><td>(d) 2015</td><td>(e) 2016</td><td>(f) Total</td></t<>			(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b c Add lines 10a and 10b 11 Net income from unrelated businesses acquired after June 30, 1975 activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 5 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) 15 % 6 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) 16 % 5 Public support percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) 16 % 17 Investment income per	9							
section 511 taxes) from businesses acquired after June 30, 1975	10a	payments received on securities loans, rents,						
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.)	b	section 511 taxes) from businesses						
activities not included in line 10b, whether or not the business is regularly carried on Image: Constraint of the sale of capital assets (Explain in Part VI.)	С	Add lines 10a and 10b						
loss from the sale of capital assets (Explain in Part VI.) Image: constraint of the same of	11	activities not included in line 10b, whether						
and 12.)	12	loss from the sale of capital assets						
organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2015 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2015 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ □ b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ □	13							
Section C. Computation of Public Support Percentage 15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2015 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2015 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10	14							
16 Public support percentage from 2015 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2015 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶	See	ction C. Computation of Public Su	pport Percen	tage				
Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2015 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶	15		.,		i))		15	
 17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))							16	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		•					47	
 19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			.,	•	.,,			
b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		33 1/3% support tests - 2016. If the organiz	zation did not che	ck the box on line	14, and line 15 is n	nore than 33 1/3%,	and line	
	b	33 1/3% support tests - 2015. If the organiz	zation did not che	ck a box on line 14	or line 19a, and li	ne 16 is more than	33 1/3%, and	
	20							

	IV Supporting Organizations (Complete only if you checked a box in line 12 of Part I. If you checked 12a of Part I, complete S and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, co			
	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Pa	•	,	
ecti	on A. All Supporting Organizations			
			Yes	N
	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.	1		
	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).	2		
а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below.	3a		
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.	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		
а	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.	4c		
а	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).	5a		
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		
;	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.	6		
,	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
;	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).	8		
а	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		
)a	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.)	10b		

Childrens Bible Hour Ministries

38-1675000

Page 4

Schedule A (Form 990 or 990-EZ) 2016

Scher	ule A (Form 990 or 990-EZ) 2016 Childrens Bible Hour Ministries 38-16750	00	Р	age 5
	rt IV Supporting Organizations (continued)			<u></u>
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	110		
h	below, the governing body of a supported organization? A family member of a person described in (a) above?	11a 11b		
	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		
	tion B. Type I Supporting Organizations			
000			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
-	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II 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			
	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	1		
500	the supported organization(s). tion D. All Type III Supporting Organizations	1		
Jet	tion D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	110
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior ta	x		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
-				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section 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 instructions):
- a 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.*
- c 🗌 The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2 Activities Test. Answer (a) and (b) below.
- a 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.
- **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.*
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a 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.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

3a

2a

2b

Yes No

Chedule A (Form 990 or 990-EZ) 2016 Childrens Bible Hour Ministries		38-16	75000 Pag
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org			
1 Check here if the organization satisfied the Integral Part Test as a qualifying			
instructions. All other Type III non-functionally integrated supporting organiz	zations	must complete Section	ons A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (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		
ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (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		
ection 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-	-integra	ated Type III supportin	g organization (see
instructions).	-		

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016 Childrens Bible Hour Ministries 38-1675000 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Section D - Distributions Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 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. Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. Distributable amount for 2016 from Section C, line 6 9 10 Line 8 amount divided by Line 9 amount (ii) (iii) (i) Section E - Distribution Allocations (see instructions) Underdistributions Distributable Excess Distributions Pre-2016 Amount for 2016 Distributable amount for 2016 from Section C, line 6 2 Underdistributions, if any, for years prior to 2016 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2016: а b **c** From 2013 **d** From 2014 e From 2015 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2016 distributable amount i Carryover from 2011 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2016 from Section D, line 7: \$ **a** Applied to underdistributions of prior years **b** Applied to 2016 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2017. Add lines 3j and 4c. Breakdown of line 7: 8 а **b** Excess from 2013 c Excess from 2014 d Excess from 2015 e Excess from 2016

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Schedule A (Form 990 or 990-EZ) 2016

Schedule A (For	m 990 or 990-EZ) 2016 Page o
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part 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, Section
	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, 2a, 2b,
	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, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCI	IEDULE D	Supplemental Financial Statements	ļ	OMB No. 1545-0047
		 Complete if the organization answered "Yes" on Form 990, 		2016
Deres		► Attach to Form 990.		Open to Public
	ment of the Treasury al Revenue Service	Information about Schedule D (Form 990) and its instructions is at www.irs.gov/for	rm990.	Inspection
	of the organization		mployer identific	
			38-167	5000
Pa		tions Maintaining Donor Advised Funds or Other Similar Funds or Accounts.		
	Complete	if the organization answered "Yes" on Form 990, Part IV, line 6.		
4	Total number at ar		(b) Funds and ot	her accounts
1 2		nd of year		
2		f grants from (during year) .		
4		t end of year		
5		on inform all donors and donor advisors in writing that the assets held in donor advised		
•	-	nization's property, subject to the organization's exclusive legal control?		🗌 Yes 🗌 No
6	•	on inform all grantees, donors, and donor advisors in writing that grant funds can be used		
	-	purposes and not for the benefit of the donor or donor advisor, or for any other purpose		
	conferring impermi	ssible private benefit?		🗌 Yes 🗌 No
Pa		vation Easements.		
	Complete	e if the organization answered "Yes" on Form 990, Part IV, line 7.		
1	Purpose(s) of cons	servation easements held by the organization (check all that apply).		
	Preservation c	of land for public use (e.g., recreation or education) Preservation of a historically impo	ortant land are	ea
	Protection of r	atural habitat Preservation of a certified historic	c structure	
	Preservation c	if open space		
2	Complete lines 2a	through 2d if the organization held a qualified conservation contribution in the form of a conservation	ation	
	easement on the la	ast day of the tax year.	Held at th	e End of the Tax Year
а	Total number of co	onservation easements	a	
b	-	ricted by conservation easements	b	
С		vation easements on a certified historic structure included in (a)	C	
d		vation easements included in (c) acquired after 8/17/06, and not on a		
_				
3		vation easements modified, transferred, released, extinguished, or terminated by the organizatio	on during the	
	tax year ►			
4		where property subject to conservation easement is located		
5	•	tion have a written policy regarding the periodic monitoring, inspection, handling of		🗌 Yes 🗌 No
e		orcement of the conservation easements it holds?		
6		Tious devoted to monitoring, inspecting, nandling of violations, and enforcing conservation ease		i i le year
7		— es incurred in monitoring, inspecting, handling of violations, and enforcing conservation easemer	nte durina the	Vear
•	► \$			ycai
8		vation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)		
-	and section 170(h)			🗌 Yes 🗌 No
9	.,	be how the organization reports conservation easements in its revenue and expense statement,		
	balance sheet, and	include, if applicable, the text of the footnote to the organization's financial statements that desc	ribes the	
	organization's acco	ounting for conservation easements.		
Pa	rt III Organi	zations Maintaining Collections of Art, Historical Treasures, or Other S	Similar As	sets.
	Comple	te if the organization answered "Yes" on Form 990, Part IV, line 8.		
1a	If the organization	elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and bal	lance sheet	
	works of art, histor	ical treasures, or other similar assets held for public exhibition, education, or research in furthera	ance of	
	public service, pro	vide, in Part XIII, the text of the footnote to its financial statements that describes these items.		
b	-	elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance		
		ical treasures, or other similar assets held for public exhibition, education, or research in furthera	ance of	
	•	vide the following amounts relating to these items:		
		ded on Form 990, Part VIII, line 1		
-		ad in Form 990, Part X		
2		received or held works of art, historical treasures, or other similar assets for financial gain, provi	ide the	
	-	required to be reported under SFAS 116 (ASC 958) relating to these items:		
a		on Form 990, Part VIII, line 1	-	
b		Form 990, Part X		· · · · · · · · · · · · · · · ·
-or h	-aperwork Reducti	on Act Notice, see the Instructions for Form 990.	5	Schedule D (Form 990) 2016

Sched	ule D (Form 990) 2016 Childrens Bible							38-167			age 2
Pa	rt III Organizations Maintaining C	Collection	ons of	f Art, Histe	orical Tr	easures,	or Othe	er Similar As	sets (cor	ntinue	d)
3	Using the organization's acquisition, accession,	and other	records	s, check any o	of the follow	ving that are a	a significa	ant use of its			
	collection items (check all that apply):										
а	Public exhibition	d	I 🗌 I	Loan or exch	ange progra	ams					
b	Scholarly research	e	; 🗌 (Other							
с	Preservation for future generations										
4	Provide a description of the organization's collect	ctions and	l explair	n how they fu	ther the or	ganization's e	exempt pu	urpose in Part			
	XIII.			-		-					
5	During the year, did the organization solicit or re	ceive dor	nations (of art. historica	al treasures	s. or other sin	nilar				
	assets to be sold to raise funds rather than to be								D	/es	No
Pa	rt IV Escrow and Custodial Arrange									<u> </u>	
	Complete if the organization ar			" on Form	990. Par	t IV. line 9	or rep	orted an amo	unt on Fo	orm	
	990, Part X, line 21.	10110100			000, i ui		, 0 0p			,,,,,	
1a	Is the organization an agent, trustee, custodian of	or other in	tormodi	ary for contrib	utions or o	ther assets r	ot				
Ia				-					Dy	/es	No
h					• • • • •	• • • • • •			•• 🗆 י	63	
b	If "Yes," explain the arrangement in Part XIII and	a complet	e the to	nowing table.				•			
_	De site de se la la sec								nount		
C	Beginning balance										
d	Additions during the year										
е	Distributions during the year		• • •		• • • • •	• • • • • •					
f	Ending balance						L				
2a	Did the organization include an amount on Form						-		۱ 🗌	/es	_ No
b	If "Yes," explain the arrangement in Part XIII. Cl	heck here	if the e	xplanation ha	s been prov	vided on Part	XIII .				
Pa	rt V Endowment Funds.										
	Complete if the organization ar	nswered	l "Yes'	on Form	990, Par	<u>t IV, line 1</u>	0.				
		(a) Cur	rrent year	(b) P	rior year	(c) Two year	s back	(d) Three years back	(e) Fou	r years ba	ack
1a	Beginning of year balance										
b	Contributions										
с	Net investment earnings, gains, and										
	losses										
d	Grants or scholarships										
e	Other expenditures for facilities and										
C	•										
4											
1	Administrative expenses										
g	End of year balance			- //		1.1					
2	Provide the estimated percentage of the current	year end		e (line 1g, col	umn (a)) ne	ad as:					
a	Board designated or quasi-endowment		%								
b	Permanent endowment %										
С	Temporarily restricted endowment		%								
	The percentages in lines 2a, 2b, and 2c should e										
3a	Are there endowment funds not in the possessi	on of the	organiza	ation that are	held and a	dministered f	or the				
	organization by:									Yes	No
	(i) unrelated organizations								. 3a(i)		
	(ii) related organizations								. 3a(ii)		
b	If "Yes" on 3a(ii), are the related organizations I	isted as re	equired	on Schedule	R?				. 3b		
4	Describe in Part XIII the intended uses of the or	rganizatio	n's ende	owment funds	5.						
Pa	rt VI Land, Buildings, and Equipm	ient.									
	Complete if the organization ar		l "Yes'	" on Form	990, Par	t IV, line 1	1a. See	e Form 990, F	art X, lin	e 10.	
	Description of property			or other basis		or other basis		Accumulated	(d) Boo		
	,,,	`		estment)		(other)		preciation	(4) 200		
1a	Land				<u> </u>	50,000				50,0	100
		· · · -						30 104			
b	Buildings	· · · -				445,363		30,194		415,1	צט.
с С	Leasehold improvements	•••				124 025		100 535		<u>-</u>	
d		· · · _				134,037		108,535		25,5	102
e			000 5		(D) "	0-1					
l ota	 Add lines 1a through 1e. (Column (d) must eq 	quai ⊢orm	990, Pi	art X, column	(B), line 1	UC.)		· · · · ▶		490,6	o71

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Schedule D (Form 990) 2016

Schedule D (Form	· · ·	e Hour Ministries	38-1675000	Page 3
Part VII	Investments - Other Securities.			V line 10
	Complete if the organization answere	d "Yes" on Form 990, Pa	art IV, line 11b. See Form 990, Part	X, line 12.
(1) Financial ((a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
,				
(2) Closely-he (3) Other	eld equity interests			
(A) (B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b)	must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.			
	Complete if the organization answere	<u>d "Yes" on Form 990, Pa</u>	art IV, line 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)				
(7)				
(8)				
(9)				
	must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.		with V line 11d See Farm 000 Dart	V line 15
	Complete if the organization answere			
(1)	(a) L	Description	(b) Book value
<u>(1)</u> (2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 1	5.)		
	Other Liabilities.			
Part X	Other Liabilities. Complete if the organization answere	d "Yes" on Form 990, Pa	art IV, line 11e or 11f. See Form 990	J, Part A,
	Other Liabilities. Complete if the organization answere line 25.	d "Yes" on Form 990, Pa	art IV, line 11e or 11f. See Form 990	J, Part A,
	Complete if the organization answere	d "Yes" on Form 990, Pa	art IV, line 11e or 11f. See Form 990	
Part X	Complete if the organization answere line 25.	1	art IV, line 11e or 11f. See Form 990	
Part X 1. (1) Federal i	Complete if the organization answere line 25. (a) Description of liability	1	art IV, line 11e or 11f. See Form 990	J, Part A,
Part X	Complete if the organization answere line 25. (a) Description of liability	1	art IV, line 11e or 11f. See Form 990	J, Part A,
Part X 1. (1) Federal i (2)	Complete if the organization answere line 25. (a) Description of liability	1	art IV, line 11e or 11f. See Form 990	J, Part X,
Part X 1. (1) Federal i (2) (3)	Complete if the organization answere line 25. (a) Description of liability	1	art IV, line 11e or 11f. See Form 990	J, Part A,
Part X 1. (1) Federal i (2) (3) (4)	Complete if the organization answere line 25. (a) Description of liability	1	art IV, line 11e or 11f. See Form 990	J, Part A,
Part X 1. (1) Federal i (2) (3) (4) (5)	Complete if the organization answere line 25. (a) Description of liability	1	art IV, line 11e or 11f. See Form 990	J, Part A,
Part X 1. (1) Federal i (2) (3) (4) (5) (6)	Complete if the organization answere line 25. (a) Description of liability	1	art IV, line 11e or 11f. See Form 990	J, Part X,
Part X 1. (1) Federal i (2) (3) (4) (5) (6) (7)	Complete if the organization answere line 25. (a) Description of liability	1	art IV, line 11e or 11f. See Form 990	J, Part X,

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

	ule D (Form 990) 2016 Childrens Bible Hour Ministries	38-1675000	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	1,102,742
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	. 3	1,102,742
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	. 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,102,742
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	. 1	1,072,670
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	. 3	1,072,670
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.)		
С	Add lines 4a and 4b	. 4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,072,670
Pa	rt XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE L		т	ransactio	ns Wi	th Int	ereste	d Per	sons			I	OMB No	o. 1545-I	0047
(Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	-	► Attach to Form 990 or Form 990-EZ. Ope									2016 Open To Public Inspection			
Name of the organization						/			yer iden			er		
Childrens Bible			/						16750					
								1(c)(29) organiz or 25b, or Form				line 4	06	
Complet									1 990-1	ΞΖ, Γά	an v,	line 4		rected?
1 (a) Name of disqua	alified person		(b) Relationship between disqualified person and organization					(c) Description	of transa	ction			Yes	No
(1)														
(2)														
(3)														
2 Enter the amount of under section 495			•		•	•	-	•		▶ ⊄				
3 Enter the amount										• 9	, S			
					<u> </u>									
			ted Persons.						-		~~			
			iswered "Yes" nt on Form 99					8a or Form 990	, Part	IV, lin	ie 26;	or if t	ne	
		(b) Relationship	(c) Purpose of	1		(e) Ori		(f) Balance due	(a) In (lofoult?	(b) An	proved	(i) W	ritton
(a) Name of interested pe	Name of interested person (b) Relationship with organization		loan from the principa		principal a			(9)			oard or agreement			
				organi	zation?				со		comn	mmittee?		T
				То	From				Yes	No	Yes	No	Yes	No
(1)														
(2)														
(0)														
(3)														
(4)														
<u>(5)</u>								<u> </u>						
Total	or Assist		ting Intereste				. ► ٩	>						
			nswered "Yes			Part IV,	line 27.							
(a) Name of interested p	person	.,	ip between interested d the organization	d (c)	Amount of	assistance	(0	I) Type of assistance		(e) Purpos	se of ass	sistance	
(1)														
(2)														
(3)														
	1						-							

(5)

Complete if the organization an	swered "Yes" on Form 99	0, Part IV, line 28a,	28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	zation's
				Yes	No
(1) Duane Culver	Board President	1,555	Payroll services		Х
(2)					
_(3)					
_ (4)					
(5)					

Part IV

Schedule L (Form 990 or 990-EZ) 2016 Childrens Bible Hour Ministries

Business Transactions Involving Interested Persons.

Provide additional information for responses to questions on Schedule L (see instructions).

EEA

Page 2

38-1675000

Supplemental Information to Form 990 or 990-EZ

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

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

Department of the Treasury Internal Revenue Service Name of the organization 2016 Open to Public

OMB No. 1545-0047

n990. Inspection

Childrens Bible Hour Ministries

38-1675000

01. Form 990 governing body review (Part VI, line 11)

The 990 is reviewed and approved by the finance committee. A copy of the 990 is provided

to each board member with a recommendation for filing.

02. Conflict of interest policy compliance (Part VI, line 12c)

The organization has a conflict of interest policy that requires each board member to sign

the document annually.

03. CEO, executive director, top management comp (Part VI, line 15a)

Annually, the board reviews the compensation package for the executive director. The

review consists of analyzing the financial health of the organization, the current

economic conditions, a review of the executive director's performance, and a review of

salaries for individuals in similar management positions. The deliberations and

discussions take place among the board members without the executive director and are

documented.

04. Governing documents, etc, available to public (Part VI, line 19)

Governing documents are available to the public upon request to and approval by the board.

Form	8868
(Rev. Jar	nuary 2017)

Application for Automatic Extension of Time To File an Exempt Organization Return

f the
l trusts mber, see instruction
n number (EIN) or
er (SSN)
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Return
Code
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For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2017)

EEA

Form	8879	-EO
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IRS *e-file* Signature Authorization for an Exempt Organization

For calendar year 2016, or fiscal year beginning 10-01-2016 , and ending 09-30-2017

D . II.

0.1.)

Do not send to the IRS. Keep for your records.

OMB No. 1545-1878

Department of the Treasury Internal Revenue Service Name of exempt organization Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

Employer identification number

38-1675000

Childrens Bible Hour Ministries Name and title of officer

Greg Yoder, Executive Director (Det I D - (

Part I I ype of Return and Return Information (whole Dollars Only)				
Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you				
check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then				
leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on				
the applicable line below. Do not complete more than 1 line in Part I.				
1a Form 990 check here N	1h	1 10		

- L.

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- 4 *

	Form 990 check here 🕨 🗴 b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1,102,742
2a	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	
3a	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b	
5a	Form 8868 check here ► 🗌 b Balance Due (Form 8868, line 3c)	

Declaration and Signature Authorization of Officer Part II

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2016 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this retum, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X lauthorize James H Quist CPA, PLC ERO firm name	to enter my PIN <u>40415</u> as my signature Enter five numbers, but			
	do not enter all zeros			
on the organization's tax year 2016 electronically filed return. If I has being filed with a state agency(ies) regulating charities as part of t ERO to enter my PIN on the return's disclosure consent screen.	1,			
As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2016 electronically filed retum. If I have indicated within this retum that a copy of the retum is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the retum's disclosure consent screen.				
Officer's signature	Date 🕨			
Part III Certification and Authentication				
ERO's EFIN/PIN. Enter your six-digit electronic filing identification				
number (EFIN) followed by your five-digit self-selected PIN.	403423 40415			
	do not enter all zeros			
I certify that the above numeric entry is my PIN, which is my signature on the 2016 electronically filed retum for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163 , Modernized e-File (MeF) Information for Authorized IRS <i>e-file</i> Providers for Business Returns.				
ERO's signature	Date > 07-12-2018			
ERO Must Retain This Form - See Instructions				

Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions.

Form 8879-EO (2016)

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