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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public

~5				0	nder section 501(c), 52) of the inter t or private f			t black lur	
Ħ	Depar	tment o	f the Treasury nue Service	·	The organization may ha		•	•		a requirem	Open to Public Inspection
9					year, or tax year begin		April 1		nd ending	March	
~					C Name of organization	amig	April	, 2000, u	na chang		er identification number
器			applicable 1	use IRS	ANGEL CHRISTIAN	TELEVISION	I TRUST. IN	IC			359547
₹	_		_	label or print or	Number and street (or P				ess) Room/suite		one number
4	=	ame cl utial ref	•	type See	375 DOUGLAS AVE				1008	(407) 862-5084
က	=	ınal ret	13	Specific Instruc-	City or town, state or co	untry, and ZIP +	4		,	F Accounting	g method: Cash Z Accrual
တ	=		d return	tions	ALTAMONTE SPRIN	IGS, FL 327	14			Oth	ner (specify)
5	_		on pending	• Se	ction 501(c)(3) organization	ns and 4947(a)(1) nonexemp	t charitable			to section 527 organizations
ထ				tru	sts must attach a complet	ed Schedule A	(Form 990 or 9	990-EZ).		• •	for affiliates? Yes V No
က	G V	Vebsite	e: ► WWV	v.god	D.TV						er of affiliates ► ded? Yes No
04	J C)rganız	ation type	(check o	only one) >) ◀ (insert no)) or 527	H(c) Are all af		See instructions)
				·····	organization's gross receipts				H(d) Is this a s	eparate return	n filed by an
					return with the IRS, but if				organizati	on covered by	y a group ruling? 🔲 Yes 📈 No
	S	ure to	file a comple	ete retur	n Some states require a co	mplete return.				cemption Nu	
		eroee :	receints: A	dd line	es 6b, 8b, 9b, and 10b to	line 12 🕨	19,032	424			he organization is not required orm 990, 990-EZ, or 990-PF)
		rt I	•		cpenses, and Chan						
		1			gifts, grants, and sim	•				70 17 10 11 10 1	
		' a			upport , , , , .			1a	12,986,2	99	
					support			1b			
					ontributions (grants)			1c			
	ļ	d	Total (ad	d lines	1a through 1c) (cash	\$ 12,986	,299 nonca	sh \$)	1d	12,986,299
		2			e revenue including go				art VII, line 93)	2	4,594,985
		3	Members	ship d	ues and assessments			S	TATUTE UN	3	<u> </u>
		4	Interest of	on sav	rings and temporary c	ash investme	ents		RECEIVED	·	6,330
	24	ຸ5			interest from securities	s				5	
) 6a	Gross re					6a M/	W 63 a aa.		
	*	, p	Less: rer		•		 !! 0-\	OD (Ib	K 2 2 2012	6c	
	86V Reyenue	, с 7			me or (loss) (subtract ent income (describe		iine ba) .	ACCOUN	OGDEN	7	
	ije Jije	90			from sales of assets	(A)	Securities	*** ~	RODEN		
	é	Va	than inve			I		8a	1,425,7	85	
•	ا هُذ	b		•	ner basis and sales expe	I		8b	733,3	94	
	2	С	Gain or ((loss) (attach schedule) .			8c	692,3	91	
	e	d	Net gain	or (los	s) (combine line 8c, co	lumns (A) and	l (B)) .			8d	692,391
	عو	9	Special ev	vents a	nd activities (attach sche	dule) If any an	nount is from	gaming, ch	eck here 🕨 🗌		
	ပ္ ၂	а	Gross re	venue	(not including \$		of				
N.	3				eported on line 1a).			9a		_	
					penses other than fu			9b		00	
		100			(loss) from special ev			om line 9a) 10a		9c	
		10a			inventory, less return	s and allowa	nces .	10b	+		
		b			goods sold . loss) from sales of inven	ton: (attach co	bodulo) (cubt		h from line 10a)	10c	
		С 11			(from Part VII, line 10		neudie) (Subi	ract line rui	o nomine roa).	11	19,025
		12			(add lines 1d, 2, 3, 4,	,	c, 10c, and		1: //:= /:=	- 12	18,299,030
		13			ces (from line 44, colu		Į.	001-626		13	9,288,535
	Expenses	14	-		and general (from line		(O))		. 0	14	1,421,035
	pen	15	-		om line 44, column (C			FEB 2	7 2012	15	801,546
	X	16	Payment	ts to a	iffiliates (attach sched	ule) 0	16	
	\Box	17			es (add lines 16 and 4				<u>@</u>	17	11,511,116
	ets	18	Excess	or (def	icit) for the year (subt	ract line 17 f	rom line <u>12</u>)	UCUE	<u>N, UT</u>	18	6,787,914
	Ass	19	Net asse	ets or	fund balances at begi	nning of yea	r (from line ?	73, column	n (A))	19	-948,079
	Net Assets	20			s in net assets or fund					20	£ 020 005
		21			und balances at end of					. 21	5,839,835
	ror	rriva	cy act and	u rape	rwork Reduction Act N	ouce, see the	: separate in	structions.	Cat No 11282	2 Y	Form 990 (2005)

Form 990 (2005) Angel Christian Television Trust, Inc. 59-3359547

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (att sch)					
(cash \$ <u>156,583.</u>		j			
non-cash \$0.)	1 1				
If this amount includes		156 502	156 502		
foreign grants, check here	22	156,583.	156,583.		
23 Specific assistance to individuals (att sch) 24 Benefits paid to or for members (att sch)	24				
25 Compensation of officers, directors, etc	25	414,967.	207,484.	82,993.	124,490
26 Other salaries and wages	26	2,538,112.	2,005,109.	482,241.	50,762
27 Pension plan contributions	27	2,000,222.			
28 Other employee benefits	28	129,677.	63,542.	66,135.	0.
29 Payroll taxes	29	130,105.	79,364.	46,838.	3,903.
30 Professional fundraising fees	30	101,561.	0.	0.	101,561
31 Accounting fees	31	141,303.	1,413.	139,890.	0.
32 Legal fees .	32	70,035.	700.	69,335.	0.
33 Supplies	33	22,549.	13,304.	9,245.	0.
34 Telephone	34	152,187.	106,531.	45,656.	0.
35 Postage and shipping	35	64,354.	52,770.	11,584.	0.
36 Occupancy	36	656,834.	626,639.	30,195.	0
37 Equipment rental and maintenance	37	466,294.	438,316.	27,978.	0
38 Printing and publications	38	23,777.	16,644.	7,133.	0
39 Travel .	39	706,791.	494,754.	212,037.	0
40 Conferences, conventions, and meetings	40	15,596.	15,440.	156.	0
41 Interest	41	180,987.	73,630.	107,357.	0.
42 Depreciation, depletion, etc (attach schedule)	42	858,277.	813,191.	45,086.	0
43 Other expenses not covered above (itemize)					
a Amortization	43a	39,400.	39,400.	0.	0
b Statement_3	43ь	4,641,727.	4,083,721.	37,176.	520,830
c	43c				
d	43 d				
e	43e				
f	431				
g	43g				
44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	11,511,116.	9,288,535.	1,421,035.	801,546
Joint Costs. Check ► If you are following					
Are any joint costs from a combined education			licitation reported in(B)	Program services?	► Yes X No
If 'Yes,' enter (i) the aggregate amount of thes	•	•		mount allocated to Progr	
\$, (iii) the amount a	•	` 		; and (iv) the	

Are any joint costs t	from a combined educational campaign and fundraising solicit	tation reported in(B) Program services?	►∐ Yes X No
If 'Yes,' enter (i) the	e aggregate amount of these joint costs \$; (ii) the amount allocated to	Program services
\$, (iii) the amount allocated to Management and genera	al \$; and	(iv) the amount allocated
to Fundraising \$	·		
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Form 990 ((2005) Angel (Christian	Television	Trust,	Inc.		59-33	5954 <u>7</u>	Page :
Part III	Statement of P	rogram Ser	vice Accompl	ishments					
organizatio	n. How the nublic or	erceives an ord	apization in such	cases may	the primary or sole sole be determined by the in Part III, the organization	information pres	ented on i	its return. Thei	efore,
What is the All organiz clients sen izations an	e organization's primations must describe ved, publications iss id 4947(a)(1) nonexe	nary exempt pure their exempt pured, etc. Discusempt charitable	pose? Chi purpose achievem ss achievements t trusts must also	ristian lents in a cl that are not enter the an	Outreach Mini ear and concise mann measurable (Section nount of grants and all	er. State the nui 501(c)(3) and (ocations to other	mber of 4) organ- ers.)	Program Service (Required for 50 (4) organizate 4947(a)(1) tre- optional for	e Expenses (1(c)(3) and nons and usts, but others)
a Pro	duction and gramming wor	transmitt ldwide wi	ing of evar th the goal	ngelist: l_of_en	ic Christian abling every f Jesus Christ				
(Gran	nts and allocations	\$	156,583.		unt includes foreign gi		e ► X	9,28	8,535.
	nts and allocations	\$) If this amo	ount includes foreign g	rants, check her	e • 1		
(Gran	nts and allocations	\$) If this amo	ount includes foreign g	rants, check her			
 (Gran	nts and allocations				ount includes foreign g		e • 1		 ,
	r program services	_	• •••				. 🗀		
	nts and allocations	\$			ount includes foreign gi	rants, check her	<u>e ► </u>		
f Total	of Program Service	e Expenses (sh	ould equal line 44	, column (E), Program services)			9,28	8 <u>,535.</u>

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Form **990** (2005)

Part IV Balance Sheets (See Instructions)

Note	: Who	ere required, attached schedules and amounts within umn should be for end-of-year amounts only.	the de	scription	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing			97,960.	45	128,281.
- 1	46	Savings and temporary cash investments				46	
Ì							
	47a Accounts receivable .		47 a	319,319.			
	b Less, allowance for doubtful accounts				416,905.	47 c	319,319.
		Pledges receivable	48a			 -	
		Less: allowance for doubtful accounts	48b			48 c	
ŀ	49	Grants receivable		}-		49	
ASSETS	50	Receivables from officers, directors, trustees, and ke employees (attach schedule)	;y 	. (50	
E	51 a	Other notes & loans receivable (attach sch)		<u> </u>			
\ \ \ \	b	Less: allowance for doubtful accounts .	51 b			51 c	
	52	Inventories for sale or use .				52	
	53	Prepaid expenses and deferred charges			182,434.	53	54,996.
	54	Investments - securities (attach schedule)		► Cost FMV		54	
	55 a	Investments - land, buildings, & equipment basis	55 a				
	b	Less: accumulated depreciation (attach schedule)	55 b			55 c	
Ì	56	Investments – other (attach schedule)		Statement 4	309,447.	+	708,944.
		Land, buildings, and equipment: basis	57a	8,361,340.			
ł		Less: accumulated depreciation				L	
ł		(attach schedule) Statement 5	57 b	1,201,640.	2,254,966.	57 c	7,159,700.
	58	Other assets (describe - Statement 6)	427,705.	58	4,416,500.
	59	Total assets (must equal line 74) Add lines 45 throu	ıgh 58		3,689,417.	59	12,787,740.
	60	Accounts payable and accrued expenses			1,122,423.	60	287,765.
Ļ	61	Grants payable		[61	
A	62	Deferred revenue			1,345,397.	62	1,772,112.
֚֡֝֞֞֞֓֓֡֓֡֞֜֜֜֡֓֓֓֡֜֜֞֜֜֡֓֡֡֡֡֡֡	63	Loans from officers, directors, trustees, and key employees (attack	ı schedu	le)		63	
LIABILITIES	64 a	Tax-exempt bond liabilities (attach schedule)				64 a	
į	b	Mortgages and other notes payable (attach schedule)			779,856.	64b	81,868.
š	65	Other liabilities (describe > Statement 8)	1,389,820.	65	4,806,162.
\Box	66	Total liabilities. Add lines 60 through 65			4,637,496.	66	6,947,907.
	Organ	•	nd con	nplete lines 67		'i	
Ĕ		through 69 and lines 73 and 74				<u> </u>	
Ą	67	Unrestricted			-948,079.		5,839,833.
ANNET-S	68	Temporarily restricted .		-		68	
š	69	Permanently restricted		· }		69	
R	Organ	izations that do not follow SFAS 117, check here		and complete lines			
E	70	70 through 74 Capital stock, trust principal, or current funds				70	
Ñ	70 71	Paid-in or capital surplus, or land, building, and equi	Inmari	fund		71	
밁	71 72	Retained earnings, endowment, accumulated income		72	<u> </u>		
Ä		<u>-</u>		 '- -			
הסבס שקיקבטשט	73	Total net assets or fund balances (add lines 67 thro 72; column (A) must equal line 19; column (B) must	t equal	line 21)	-948,079.		5,839,833.
	74	Total liabilities and net assets/fund balances. Add I	ines 66	and 73	3,689,417.	74	12,787,740.

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Form 990 (2005)

For	m 990 (2005) Angel Christian	Television Trust,	Inc.		59-	335	9547	Page 5
Pa	rt IV-A Reconciliation of Revenue	e per Audited Financia	Statement	s with F	Revenue per Re	turn	(See	
	instructions.)						N / D	
_	Total courses and other support	er audited financial statemen	.			a	N/A	
a b	Total revenue, gains, and other support p Amounts included on line a but not on Pa		ıs			1		
D	1 Net unrealized gains on investments	arti, iiile iz		ы				
	2Donated services and use of facilities			b2				
				b3		1]		
	3Recoveries of prior year grants	• ••				1		
	40ther (specify):		·	ь4				
	Add lines b1 through b4					ь		
_	Subtract line b from line a					c		
C	Amounts included on Part 1, line 12, but i	not on line as				┝╇		
d	1 Investment expenses not included on Pai			d1		li		
						1 1		
	2Other (specify):			d2		1		
	Add lines d1 and d2					d		
_	Total revenue (Part I, line 12). Add lines	e and d	•		-	e		
D.	art IV-B Reconciliation of Expens	es per Audited Financi	al Stateme	nts with	Expenses per		ırn	
	ATTIV-B (Recollemation of Expens	cs per radica i manor	<u>ar otatome</u>	100 111111	Expenses per		N/A	
	Total expenses and losses per audited fil	nancial statements				a	,	
a b	Amounts included on line a but not on Pa					一十		
D	1 Donated services and use of facilities	arti, mie 17		ь1				
	2Prior year adjustments reported on Part	L. lino 20	••	b2		il		
	3Losses reported on Part I, line 20	i, iiile 20	••	b3		1 1		
			1					
	4Other (specify)		- 	b4				
	Add lines b1 through b4			<u> </u>		ь		
_	Subtract line b from line a					-		
c d	Amounts included on Part I, line 17, but	not on line a:				H		
u	1 Investment expenses not included on Part I, line 6b							
						1		
	2Other (specify):			d2		•		
	Add lines d1 and d2					d		
e	Total expenses (Part I, line 17). Add line	es c and d		•	•	e		
	art V-A Current Officers, Director		mnlovees	/List oach	norson who was a	, -,	cer director t	rustaa
نت	or key employee at any time dur	ring the year even if they were	e not compens	sated.) (Se	e the instructions)	. 0	cer, unector, t	usico,
_		(B) Title and average hours			(D) Contributions		(E) Expe	
	(A) Name and address	per week devoted to position	(if not p		employee benef		account and allowand	
	• •	to position	enter	-0-)	compensation pla		allowark	.63
Re	ory Stephen							
	ay West, Old Newnham	1						
	lymouth, Plymouth UK	President 40	13	7,383.		0.	27	,500.
	endy Stephen					Ī		
	ay West, Old Newnham	1				- 1		
	lymouth, Plymouth UK	Treasurer 40	7	7,417.		0.	27	,500.
_	tephen Beik							
	229 Earleaf Ct.	1	1					
	ongwood, FL 32779	Secretary 40	14	1,167.		0.		0.
_	rancis Frangipane	Joedfeed 1			· · · · · · · · · · · · · · · · · · ·	- 		
	25 Robins Square Dr.	1						
	obins, IA 52328	Director .25		2,000.		0.		0.
	arilyn Speirs		 	_,				
	Jillieston Terrace	1						
	atne, Eyrshire UK	Director .25		2,000.		0.	ı	0.
<u> P</u>	aciie, paraiitte ov	DITECTOI .23	<u> </u>	2,000.				
-		•[
-		1						
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Form 990 (2005) Angel Christian Telev	ision Trust, I	nc.	59-33595	47	P	age 6
Part V-A Current Officers, Directors, Tru	stees, and Key En	nployees (continued)			Yes	No
75 a Enter the total number of officers, directors, and trustees pr						
b Are any officers, directors, trustees, or key emplisted in Schedule A, Part I, or highest compens A, Part II-A or II-B, related to each other through identifies the individuals and explains the relations.	sated professional and Ih family or business re	other independent contr	actors listed in Schedule	75b	х	
c Do any officers, directors, trustees, or key emp listed in Schedule A, Part I, or highest compens A, Part II-A or II-B, receive compensation from to this organization through common supervision	loyees listed in form 99 sated professional and any other organization	other independent contr s. whether tax exempt o	actors listed in Schedule	75 c		x
Note. Related organizations include section 509						
If 'Yes,' attach a statement that identifies the in other organization(s), and describes the comperelated organization	dividuals, explains the	relationship between thi	s organization and the to each individual by each	٠		
d Does the organization have a written conflict of	interest policy?			75 d	Х	
Part V-B Former Officers, Directors, Tru Benefits (If any former officer, directo during the year, list that person below a the instructions)	stees, and Key Emor, trustee, or key emplored enter the amount of	oyee received compensation or other	ation or other benefits (des benefits in the appropriate	scribed be column	low) See	
(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Ex account a allow		her
						
				· · · · · · · · · · · · · · · · · · ·		
						<u> </u>
Part VI Other Information (See the instruct	ions.)		- 		Yes	No
76 Did the organization engage in any activity not	previously reported to	the IRS? if 'Yes,'		76		
attach a detailed description of each activity 77 Were any changes made in the organizing or g	overning documents his	 It not reported to the IRS	37	77		X
If 'Yes,' attach a conformed copy of the change	_	n not reported to the inte	•			 '
78a Did the organization have unrelated business g b If 'Yes,' has it filed a tax return on Form 990-T	ross income of \$1,000	or more during the year .	covered by this return?	78 a 78 b		х
79 Was there a liquidation, dissolution, termination year? If 'Yes,' attach a statement	n, or substantial contra	ction during the		79		х
80 a is the organization related (other than by associatements), governing bodies, trustees, office	rs, etc, to any other ex	empt or nonexempt orga	ion) through common anization?	80 a	х	
b If 'Yes,' enter the name of the organization 81 a Enter direct and indirect political expenditures	and cl	heck whether it is 🕱 e	—	ot 0.		
b Did the organization file Form 1120-POL for thi		113)	[0, 0]	81 b	 	x
BAA	- ,				990	(2005)

Form	990 (2005) Angel Christian Television Trust, Inc.	59-335954	7	F	age 7
Pa	rt VI Other Information (continued)			Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities substantially less than fair rental value?	at no charge or at	82 a		х
ŧ	olf 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b			
83 a	Did the organization comply with the public inspection requirements for returns and exemption	applications?	83 a	X	
E	Did the organization comply with the disclosure requirements relating to quid pro quo contribu	tions?	83 b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible? .		84 a		X
t	If 'Yes,' did the organization include with every solicitation an express statement that such cornot tax deductible?	ntributions or gifts were	84 b		
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?		85 a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85 b		
	If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the waiver for proxy tax owed for the prior year	e organization received a			
•	Dues, assessments, and similar amounts from members	85c			·
	Section 162(e) lobbying and political expenditures	85 d			
•	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f			
	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85 q		
ì	of section 6033(eX1XA) dues notices were sent, does the organization agree to add the amount on line 85f to its reaso dues allocable to nondeductible lobbying and political expenditures for the following tax year?	nable estimate of	85 h		
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on				
	line 12	86a .			
Ŀ	Gross receipts, included on line 12, for public use of club facilities	86b			
87	501(c)(12) organizations Enter: a Gross income from members or shareholders	87a		'	
ŀ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	87ь			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable or or an entity disregarded as separate from the organization under Regulations sections 301 77 If 'Yes,' complete Part IX	orporation or partnership, 01-2 and 301 7701-32	88	x	
89 a	501(c)(3) organizations Enter. Amount of tax imposed on the organization during the year un section 4911 ► 0. ; section 4912 ► 0. ; section 4912 ► 0.	:			
t	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 exces during the year or did it become aware of an excess benefit transaction from a prior year? If explaining each transaction	s benefit transaction Yes,' attach a statement	89b		x
•	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	e . ►			0.
•	Enter Amount of tax on line 89c, above, reimbursed by the organization	>			0.
90 a	List the states with which a copy of this return is filed FL, VA, CO				
	Number of employees employed in the pay period that includes March 12, 2005 (See instruction	ons.)	90Ь		12
91 a	The books are in care of Frankenth Hetrick Telephone null Located at Frankenth Springs				
ŀ	At any time during the calendar year, did the organization have an interest in or a signature of financial account in a foreign country (such as a bank account, securities account, or other fire	r other authority over a ancial account)?	91 b	Yes	No X
	If 'Yes,' enter the name of the foreign country				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Financial Statements $$	_			
•	At any time during the calendar year, did the organization maintain an office outside of the Ur	nited States?	91 c		<u>x</u> _
	If 'Yes,' enter the name of the foreign country				_
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check	here			▶ ∐
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 92			
BAA			Form	990	(2005)

Part V	II Analysis of Income-Producing	Activities (See	the instructions	s.)		
Note: E	inter gross amounts unless otherwise	Unrelated t	ousiness income	Excluded by s	ection 512, 513, or 514	(E)
ındicate	d.	(A) Business code	(B) Amount	(C) Exclusion cod	(D) le Amount	Related or exempt function income
	Program service revenue: Ministry Broadcasting			+		4,594,985
	ministry broadcasting	-		1		1,001,000
b.						
C .			-		<u> </u>	
d.						
e . f i	Medicare/Medicaid payments					
	Fees and contracts from government agenci					
_	Membership dues and assessments					
	interest on savings and temporary cash investmen			14	6,330	
	Dividends and interest from securities		, and the second			
	Net rental income or (loss) from real estate:					
	debt-financed property					
	not debt-financed property					
	Net rental income or (loss) from personal proper					
99	Other investment income			_	_	
100	Gain or (loss) from sales of assets other than invent	ory	-			
101	Net income or (loss) from special events .					
102	Gross profit or (loss) from sales of inventory	<i>,</i>				
	Other revenue: a		1			10.005
b .	Miscellaneous			01		19,025
C.				ļ		
d.		_		-		
е.	0 11 11/ 11 11 11 11 11 11 11 11 11 11 11		_		6,330	4,614,010
	Subtotal (add columns (B), (D), and (E)) Total (add line 104, columns (B), (D), and (B				0,330	4,620,340
	Line 105 plus line 1d, Part I, should equal ti					4,020,040
Part \				noses (See	the instructions.)	
Line N						accomplishment
Tille I	of the organization's exempt purposes (s importantly to the	docompliani
93a	Revenue from Christian ministries fo	r program slots o	on GOD TV.			
1031				h ministry.		•
Part I			isregarded Ent	i ties (See_th	e instructions.)	
	(A) Name, address, and EIN of corporation,	(B) Percentage of	(C))	_ (D)	(E) End-of-year
	partnership, or disregarded entity	ownership interest	Nature of	activities	Total income	assets
See St	atement 11	%			_	
		%			_	
		%				
	Information Deposition Transfers As	<u>%</u>	namal Damasik O		 - 46 = !==4=.=4!=== \	l
Part 2						
(b)	Did the organization, during the year, receive any funds Did the organization, during the year, pay p : If "Yes" to (b), file Form 8870 and Form	remiums, directly	or indirectly, on			☐ Yes ☑ No ☐ Yes ☑ No
	Under penalties of penury, I declare that I have exa-	mined this return, inclu	ding accompanying s	schedules and s	tatements, and to the I	pest of my knowledge
Diago	and belief, it is true, correct, and complete Declara	ation of peparer (othe	r than officer) is base	ed on all informa	ation of which prepare	r has any knowledge
Please) bolm W.	Ser.			Feb. >>	-,2012
Sign	Signature of office				Date	
Here	Stephen W. Beik, Secretary					
	Type or print name and title					
Paid Propaga	Preparer's signature		Date	Check if self- employed >		r PTIN (See Gen Inst W
Preparer Use Only	I Firm's name (or yours k			EIN		
	if self-employed), address, and ZIP + 4			Pho	one no ▶ ()	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.) ► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ. OMB No 1545-0047

2005

Name of the organization		•	Employer identification	number
Angel Christian Television Trust,	. Inc.		59-3359547	
Part I Compensation of the Five Hig	hest Paid Employees Oth	er Than Officers		Trustees
(See instructions List each one. If the (a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
Vitold Chrzanowski 2400 16TH St #523 Washington, DC	Development Mgr 40	85,000.	0.	0.
Tom Snethen 161 Taos, Aledo, TX	Affiliate Sales Mgr 40	80,000.	0.	0.
Tom Guo 43064 Hunters Green Sq, Asburn, VA	Head Editor 40	70,623.	0.	0.
Douglas Googe 9B Parkway, 101, Greenbelt, MD	Controller 40	66,875.	0.	0.
Daryl Allen 23 Litchfield Lane, Martinsburg, WV	Producer 40	66,500.	0.	0.
Total number of other employees paid over \$50,000	4			
Part II – A Compensation of the Five Hig (See instructions List each one (whet	hest Paid Independent Co her individuals or firms). If there	ontractors for Plare none, enter 'Nor	rofessional Sen	vices
(a) Name and address of each independent contra	actor paid more than \$50,000	(b) Type	of service	(c) Compensation
Holland and Simpson P.O. Box 2446, Grapevine, TX 760	99	Ministry Consult	ing, Advertising	201,693.
European Media Ventures 7 Thornhill Bridge Wharf, Caledon	nian Rd. London, UK	Consulting & Gl	obal Accounting	186,579.
Gilbert Design Company 15 Shadwell Park Ct., Leeds, Yor	kshire, UK	Production	& Design	154,443.
Cooke Pictures 1655 Euclid St., Santa Monica, Co	A 90404	Production	& Design	147,368.
Graham, Cotrill, Et. Al 110 E. Hillcrest St., Orlando, F	L 32801	Audit, Acco	unting, Tax	122,035.
Total number of others receiving over \$50,000 for professional services		, <u> </u>		
Part II – B Compensation of the Five Hig (List each contractor who performed s	•			here are none.
enter 'None ' See Instructions)		T T T T T T T T T T T T T T T T T T T	Triducis of minis in	T
(a) Name and address of each independent contr	actor paid more than \$50,000	(b) Type	of service	(c) Compensation
Inservice America 129 Vista Centre Drive, Forest,	VA 24551	Donor Mgmt &	Call Services	98,032.
Total number of other contractors receiving over \$50,000 for other services	None			
BAA For Paperwork Reduction Act Notice, see the Ir	nstructions for Form 990 and For	m 990-EZ.	Schedule A (Form 9	990 or 990·EZ) 2005

1	ť III	Statements About Activities (See Instructions.)		Yes	١
•	to ı	ing the year, has the organization attempted to influence national, state, or local legislation, including any attempt influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid			
		st equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		L
	Org org lobi	anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other anizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the bying activities.			
2	sub tax	ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any able organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal eficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)			
а	Sal	e, exchange, or leasing of property?	2a		-
b	Ler	ding of money or other extension of credit?	2b		
c	Fur	nishing of goods, services, or facilities?	2c		
d	l Pay	See Part V, Form 990 rment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	х	
	Tra	nsfer of any part of its income or assets?	2e		
	Do	you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an			T
	exp	lanation of how you determine that recipients qualify to receive payments)	3a 3b		ŀ
		you have a section 403(b) annuity plan for your employees?	3c		t
	Did	you maintain any separate account for participating donors where donors have the right to provide advice the use or distribution of funds?	4a		T
,		you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		╁
		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii) Enter the hospital's and state An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 1 (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general picture of the Support Schedule in Part IV-A.) A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and from activities related to its charitable, etc, functions — subject to certain exceptions, and (2) no more than 33-1/3% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization (1) lines 5 through 12 above, or (2) section 501(c)(4). (5) or (6) of they meet the test of section 509(a)(2).	gross its sup by the	receipport	pt
		described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) box that describes the type of supporting organization: ► Type 1 Type 2 Type 3 Provide the following information about the supported organizations (See instructions.)). Chec	k the	
		(a) Name(s) of supported organization(s)	(b) Lu	ne nu n abo	mi

(d Add: Line 27a total and line 27b total .	>	27 d	
•	e Public support (line 27c total minus line 27d total)	>	<i>2</i> 7 e	
1	f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) . • 27f			
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	-	27 g	ક
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	. ▶	27 h	8
:8	Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants dur list for your records to show, for each year, the name of the contributor, the date and amount of the grant nature of the grant. Do not file this list with your return. Do not include these grants in line 15.	ng 2001 , and a t	through the d	gh 2004, prepare a escription of the
A/	A TEEA0403 02/03/06 Sch	edule A	(Form	990 or 990-EZ) 2005

В

b Has the organization's right to such aid ever been revoked or suspended?

If you answered 'Yes' to either 34a or b, please explain using an attached statement

Schedule A (Form 990 or 990-EZ) 2005

34 b

Sche	dule A (Form 990 or 990-	EZ) 2005 Angel	Christian Tele	vision Trus	t, In	c.	59-3	3359	547 Page 5
	t.VI-A Lobbying Ex	penditures by Ele	ecting Public Char organization that filed	ities (See instru					N/A
Chec	ck ► a if the organiz	ation belongs to an aff	iliated group Chec	k ► b if you	checke	ed 'a' and 'lu	mited	contro	l' provisions apply
		imits on Lobbying	Expenditures amounts paid or incurr	ed.)		(a Affiliated tota	d grou	р	(b) To be completed for ALL electing organizations
-26	Total lobbying expenditu				36			+	Organizations
36 37	Total lobbying expenditu	•			37			 	
38	Total lobbying expenditu	•	• •	ynig)	38			-+	
39	Other exempt purpose e	•			39				
40	Total exempt purpose ex	•	 38 and 39)		40				
41	Lobbying nontaxable am			le -					
•••	If the amount on line 40		lobbying nontaxable						
	Not over \$500,000 .		6 of the amount on line		1 1			1	
	Over \$500,000 but not over \$1,		,000 plus 15% of the excess						
	Over \$1,000,000 but not over \$	•	.000 plus 10% of the excess		41				
	Over \$1,500,000 but not over \$	•	,000 plus 5% of the excess of	over \$1,500,000					
	Over \$17,000,000		000,000						
42	Grassroots nontaxable a	mount (enter 25% of l	ne 41)		42				
43	Subtract line 42 from lin	e 36 Enter -0- if line 4	2 is more than line 36		43				
44	Subtract line 41 from lin	e 38 Enter -0- if line 4	1 is more than line 38		44				
	Caution: If there is an a	mount on either line 43	3 or line 44, you must f	le Form 4720.					
	(Some organ	nizations that made a s	Averaging Period section 501(h) election for the instructions for	do not have to co	mplete 50.)	all of the fiv		imns b	elow
			TODDYING EXPE	T. T					
	Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2004	(c) 2003			1) 02		(e) Total
45	Lobbying nontaxable amount	_							
46	Lobbying ceiling amount (150% of line 45(e))	. k . s	•		é	4 *.	,	,	
47	Total lobbying expenditures								
48	Grassroots non- taxable amount								
49	Grassroots ceiling amount (150% of line 48(e))				•				
50	expenditures			1					
		nly by organizations th	at did not complete Pa	rt VI-A) (See insti				 1	N/A
atter	ng the year, did the organ mpt to influence public op	iization attempt to influ inion on a legislative n	ence national, state or natter or referendum, th	rough the use of.	inciuain	g any	Yes	No	Amount
	a Volunteers .								
	b Paid staff or manageme	nt (include compensat	ion in expenses reporte	a on lines c throt	ugn n .)	ŀ			
	c Media advertisements		• •			}		$\vdash \vdash$	
	d Mailings to members, le	= :				ŀ			
	e Publications, or published					ł			· ···
	f Grants to other organiza			enistative hodu		ŀ			
	g Direct contact with legis h Rallies, demonstrations,	· ·		= -	16	}			
	n Kailles, demonstrations, i Total lobbying expenditu	•	• •	any unter mear	13	}		╙	
ı	If 'Yes' to any of the abo			description of the	lobhvir	ا na activities	<u> </u>		
BAA		ore, also altacij a state	ment giving a detailed	accompliant of the	<u></u>		edule	A (For	m 990 or 990-EZ) 2005

•	•						
			el Christian Television		359547	F	Page (
Part VII	Information Regard Exempt Organization	ling Trans	sfers To and Transactions ar	nd Relationships With Noncl	haritable		
		·····					
51 Did th	e reporting organization of	directly or in	directly engage in any of the following inganizations) or in section 527, relat	ig with any other organization descri	bed in section	501(:)
			o a noncharitable exempt organization			Yes	No
(i)C	, •	90	o a nonemanada exempt organizatio		51 a (i)	1.03	X
	ther assets		•	•	a (ii)		X
	transactions.					 	<u> </u>
(1)S	ales or exchanges of asse	ets with a no	oncharitable exempt organization		b (i)	Ì	x
(ii)P	urchases of assets from a	noncharita	ble exempt organization		b (ii)		X
(iii)R	ental of facilities, equipme	ent, or other	assets .		b (iii)	Ī	х
(iv)R	eimbursement arrangeme	ents			b (iv)		х
(v)L	oans or loan guarantees				b (v)		Х
(vi)P	erformance of services or	membershi	p or fundraising solicitations		b (vi)		Х
			ts, other assets, or paid employees	·	С		<u> x </u>
d If the the go any tr	answer to any of the abor- oods, other assets, or sen- ansaction or sharing arra	ve is 'Yes,' o vices given l ngement, sh	complete the following schedule. Coli by the reporting organization if the conow in column (d) the value of the go	umn (b) should always show the fair organization received less than fair r oods, other assets, or services receiv	· market value i ved·	of n	
(a) Line no	(b) Amount involved		(c) noncharitable exempt organization	(d) Description of transfers, transactions,			
					 .		
		<u> </u>					
							
		ļ	<u> </u>				
				 			
				 			
				<u> </u>	·····		-
							
·							
descr	organization directly or in ibed in section 501(c) of t s,' complete the following	he Code (otl	liated with, or related to, one or more her than section 501(c)(3)) or in sect	e tax-exempt organizations lion 527?	► [] Ye	s X	No
	(a) Name of organization		(b) Type of organization	(c) Description of rela	ationship		
							
				 			
				 		_	

Schedule A (Form 990 or 990-EZ) 2005

BAA

ANGEL CHRISTIAN TELEVISION TRUST, INC. 59-3359547, FORM 990 3/31/06 PART I, REVENUES, EXPENSES AND CHANGES IN NET ASSETS STATEMENT 1, LINES 8a-8d Sale of Asset Other Than Inventory

Description

Fredericksburg House

Date Acquired

January 1, 2001

How Acquired

Purchase March 31, 2006

Date Sold To Whom Sold

Open Market, Unrelated Party

Line 8a

Gross Sales Price

\$ 1,425,785

Line 8b

Cost or Other Basis

(763, 183)

Line 8b

Depreciation

(29,789)

Line 8c & 8d

Total Net Gain from Non-inventory Sales

632,813

PART II, STATEMENT OF FUNCTIONAL EXPENSES **STATEMENT 1A, LINES 22**

Other Grants and Allocations

Angel Christian Charitable Foundation India

53,500

"Celebrity", 3rd Floor

T-49 Old No 95

Third Avenue

Anna Negar

Chennai 600-040 India

35,000 Hurricane Katrina Relief

Benny Hinn Ministries

20,000

P.O. Box 162000

Irving, TX 75016

Angel Television Africa Pty

19,333

PO Box 79

Milnerton

7435 Cape Town

South Africa

Global Pastors Network

14,000

100 Lake Hart Drive

Orlando, FL 32832

7,000

Restoration Ministry

5,000

WPER 89.9 P.O. Box 113

Kevin Max

Warrenton, VA 20188

2,500

Morning Star Youth

250

Total

\$156,583

ANGEL CHRISTIAN TELEVISION TRUST, INC. 59-3359547, FORM 990 3/31/06 PART II, STATEMENT OF FUNCTIONAL EXPENSES STATEMENT 2, LINE 42 Depreciation, depletion, etc.

	A Total	B Prog Svc	C Mgmt/Gen	D Fundraising
Buildings & Leasehold Improvements	\$63,264	\$49,978	\$13,285	\$0
Furniture, Equipment & Vehicles	795,013	763,213	31,801	0
TOTAL	\$858,277	\$813,191	\$45,086	\$0

PART II, STATEMENT OF FUNCTIONAL EXPENSES
STATEMENT 3, LINE 43
Other Expenses

		Α	В	c	D
		Total	Prog Svc	Mgt/Adm	Fundraising
43a	Vehicle Expenses	\$35,211	\$23,591	\$11,620	\$0
43b	Insurance	77,406	69,665	7,741	0
43c	Training and professional fees	15,025	13,072	1,953	0
43d	Miscellaneous Fees & Expenses	651	346	305	0
43e	Exc. Rate Differences	(286,506)	(286,506)	0	0
43f	Entertainment & Dept Refreshment	14,588	8,024	6,565	0
43g	Sales, Marketing/Advertising & Business Dev.	537,868	528,478	9,390	0
43h	Distribution & Broadcasting Contract Expenses	2,365,875	2,365,875	0	0
43i	IT & Connectivity Costs	438,257	435,012	3,244	0
43j	Library Expense	376,769	273,622	4,787	98,360
43k	Other Production Expenses	1,066,585	652,543	(8,428)	422,470
TOTAL OTHER EXPENSES		\$4,641,727	\$4,083,721	\$37,176	\$520,830

PART IV, BALANCE SHEETS STATEMENT 4, LINE 56	(A)	(B)
Investments - Other	Beginning of Year	End of Year
Investment in subsidiary (Angel Aid Airways, LLC)	\$309,447	\$708,944

PART IV, BALANCE SHEETS
STATEMENT 5, LINE 57b
Land, buildings, equipment, etc.

	Cost	Acc Depn	NBV
Land	\$72,499	\$0	\$72,499
Buildings & Leasehold Improvements	610,953	(71,920)	539,033
Furniture, Equipment & Vehicles	7,677,887	(1,129,719)	6,548,168
TOTAL	\$8,361,340	(\$1,201,640)	\$7,159,700

ÄNGEL CHRISTIAN TELEVISION TRUST, INC. 59-3359547, FORM 990 3/31/06 PART IV, BALANCE SHEETS STÄTEMENT 6, LINE 58

STATEMENT 6, LINE 58	(A)	(B)	
Other assets	Beginning of	End of	
	Year	Year	
Security deposits	\$0	\$721,152	
Due from affiliated entities	427,705	1,961,748	
Goodwill, net of amortization	O	1,733,600	
	\$427,705	\$4,416,500	
PART IV, BALANCE SHEETS STATEMENT 7, LINE 64b Mortgages and other notes payable	(A) Beginning of Year	(B) End of Year	
Capital leases	\$779,855	\$81,868	
PART IV, BALANCE SHEETS	(4)	(0)	<u> </u>
STATEMENT 8, LINE 65	(A)	(B)	
Other liabilities	Beginning of	End of	
	Year	Year	

\$1,389,820

\$4,806,162

Part V-A, Current Officers, Directors, Trustees and Key Employees STATEMENT 9, LINE 75b

75b - Rory and Wendy Alec Stephen are related through marriage.

Part VI, Other information

Due to affiliated entities

STATEMENT 10, LINE 80a		
	Exempt	Non-Exempt
Angel Foundation	X	
Angel Television Africa Pty	x	
Angel Christian Charitable Foundation India	x	
Angel Christian Television China Ltd.	x	
Angel Christian Television Australia	x	
East Coast Television LLC	x	
Angel Aid Airways, LLC		X
Dream Family Network		X
Angel Television Spain SL		X
East Coast Digital Management, Inc.		X
Angel Media Network Private Ltd.		X
Angel Technologies Private Ltd.		X
Angel Television Jerusalem Ltd.		X

ANGEL CHRISTIAN TELEVISION TRUST, INC. 59-3359547, FORM 990 3/31/06 Part IX, Information regarding taxable subsidiaries and disregarded entities STATEMENT 11, LINE 80a

(A)		(B) Percentage	(C) Nature of	(D) Total	(E) End-of-years
Name	Address and FEIN	of interest	Activities	Income	assets
Angel Aid Airways, LLC	Same as Exempt Organization FEIN 20-2625437	100%	Relief Transport	69,508	851,101
East Coast Television, LLC	Same as Exempt Organization FEIN 90-0265130	100%	Min Broadcasting	7,599,642	7,520,605
East Coast Digital Mgmt, Inc	1919 M St NW, Washington DC 20036 FFIN 20-1450114	100%	Broadcasting	115,959	163,389