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Form 990

Department of the Treasury Internal Revenue Service

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)

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 2012

Open to Public Inspection

Α	For the	2012 calend	dar year, or tax year beginning , 2012, and ending	J		,			
В	Check if a	pplicable	C	D Empl	oyer Ident	ification Number			
	Addre	ess change	WORLD CHRISTIAN BROADCASTING CORPORATION	75	-1541	354			
	Name	e change	605 BRADLEY COURT		hone num				
	Initial	l return	FRANKLIN, TN 37067-8200	61	5-371	-8707			
	Term	ınated			<u> </u>				
	H	nded return		G Gross	G Gross receipts \$ 2,348,893.				
	H	cation pending	F Name and address of principal officer: CHARLES H. CAUDILL	(a) Is this a group rel					
		cation pending	CIMALES II. CHODIEL	• •					
_	Tay ava	empt status	X 501(c)(3) 501(c) ()	I(b) Are all affiliates in If 'No,' attach a li	st (see ins	structions)			
<u>'</u>	Webs		- 						
_				(c) Group exemption					
K		organization		on 1976 IV	State of I	egal domicile TX			
P	art I	Summar		.01. 00. 11001	D. CUID	TOMEN			
	1	-		ON OF WORL					
e			TING IS TO COMMUNICATE THE GOSPEL OF JESUS CHR	rzi nzine i	MX F	DRM_OF_MASS			
חפח	<u>M</u>	EDIW 20	ITABLE FOR THE PLACE AND TIME.		· -	-			
Governance	2 CI	heck this bo	if the organization discontinued its operations or disposed of mor	e than 25% of it	s net as				
Ĝ	3 N		ting members of the governing body (Part VI, line 1a)	0 than 2070 or K	1 3 1	19			
			dependent voting members of the governing body (Part VI, line 1b)		4	19			
les	5 To	otal number	of individuals employed in calendar year 2012 (Part V, line 2a)		5	36			
Activities &	6 To	otal number	of volunteers (estimate if necessary)		6	28			
Ą			ed business revenue from Part VIII, column (C), line 12		7 a	0.			
	b No	et unrelated	business taxable income from Form 990-T, line 34 .		7 b	0.			
				Prior Yea	r	Current Year			
an an	8 C		and grants (Part VIII, line 1h)	3,063,	043.	2,076,748.			
Revenue	9 Pi	-	rice revenue (Part VIII, line 2g) .						
ě	10 In		come (Part VIII, column (A), lines 3, 4, and 7d)		478.	37,293.			
Œ	ı · · · ·		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		198.	-244.			
			e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,117,	323.	2,113,797.			
			milar amounts paid (Part IX, column (A), lines 1-3)						
			to or for members (Part IX, column (A), line 4)						
y,	15 Sa		er compensation, employee benefits (Part IX, column (A), lines 5-10)	1,283,	118.	1,309,648.			
nse	16a Pr	rofessional	fundraising fees (Part IX, column (A), line 11e)						
Expenses	b To	otal fundrais	sing expenses (Part IX, column (D), line 25) ► 553, 440.	The think is a	.	, , , , , , , , , , , , , , , , , , ,			
ப	17 O	ther expens	es (Part IX, cotumn (A), tmes-11a-11d, 11f-24e)		180.	940,112.			
			es Add lines 3-17 (nus coral Asia Column (A), line 25)	1,919,		2,249,760.			
			expenses Subtract line 18 from time 12	1,198,		-135,963.			
3 8			1 1	Beginning of Curr		End of Year			
	20 To	otal assets ((Part X, line 16) OCT 0 1 2013	12,979,		12,917,932.			
) \$°	21 To	otal liabilitie	s (Part X, line 26)	4,456,		4,552,262.			
ž	22 Ne	et assets or	fund balances Subtracting 2 Norm in 20 .	8,523,	128	8,365,670.			
P	art II	Signatur		1		3/33/33			
<i>,</i> —			··· -	e best of my knowledg	ne and beli	ef. it is true, correct, and			
con	plete Decla	aration of prepa	active that I have examined his return, including accompanying schedules and statements, and to the companying schedules and statements.			/ 15			
<i>-</i>		1	MUSTAL OUTBUILL	7	ーゴ	1-13-			
Si	gn	Signatu	re of officer	Date		·			
He	ere	CHAI	RLES H. CAUDILL	PRESIDENT	& CE	0			
. ;		Type or	print name and title		-				
;		Print/Type p	reparer's name Preparer's signature Date	Check	X ıf	PTIN			
Pa	id	SARA G	G. MOON Que V. Moon, CPA 9.23	5.13 self-emplo	oyed	P00034774			
	eparer	Firm's name				<u> </u>			
	e Only			Firm's EIN	N► 62	-1073578			
	_		NASHVILLE, TN 37203	Phone no					
Ma	y the IRS	discuss th	is return with the preparer shown above? (see instructions)	1. 110110 110	, 01.	X Yes			
				0112 12/19/12		Form 990 (2012)			

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1,436,956.		
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G'S SHORTWAVE RADIO RECEPTION		TERN_
36, 956. including grants of \$) (Revenue \$)
and section 4947(a)(1) trusts are required to report any, for each program service reported.	the amount of grants and allocations to	
accomplishments for each of its three largest	program services, as measured by exp	enses
take significant changes in how it conducts, ar e O.	y program services? Yes	∑ No
nedule O.		
	Yes [X No
program services during the year which were not li	sted on the prior	
onse to any question in this Fart ht	·	. [23
onse to any question in this Part III		. X
	/5-1541354	Page 2
	DCASTING CORPORATION Accomplishments	

Form 990 (2012) WORLD CHRISTIAN BROADCASTING CORPORATION 75-1541354 Page 3 Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A X 1 . .. 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?. 2 X Х 3 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, Part III 5 Х

6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		x
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	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
Ł	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.	11 b		х
c	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d	х	
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X .	11 f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	х	
Ь	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	12 b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
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	х	_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
20 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		
BAA	TEEA0103L 12/13/12	Form	990 (2012)

	•		Yes	No
21 `	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	. 21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on 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 employees? If 'Yes,' complete Schedule J	23		х
24	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	. 24a		х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	. 24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
	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	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26	х	1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
	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):			
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	c 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	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
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		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	
BAA		Form	990 (2	2012)

<u>Pa</u>	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			Г
			Yes	No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
١	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
(c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Х	
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return 2a 36			
J	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		المنا	
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 ь		
	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)?	4 a	Х	•
ı	of 'Yes,' enter the name of the foreign country: MADAGASCAR			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		1	
5 :	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization		х	
1	solicit any contributions that were not tax deductible as charitable contributions?	6 a		
_	not tax deductible?	6 Ь	Х	
	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?	7 a	Х	
ı	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	Х	
•	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year			
•	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		<u> X</u>
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
ģ	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ı	of the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7.		
	Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business beldings at any time during the year?	8		
c	holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.			
		9.5		
	a Did the organization make any taxable distributions under section 4966?	9 a 9 b		
	Did the organization make a distribution to a donor, donor advisor, or related person?	30		
	Section 501(c)(7) organizations. Enter:		j. U	
	a Initiation fees and capital contributions included on Part VIII, line 12		ļ	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10 b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
	o If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
í	a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
ı	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
		\vdash	-	
	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		

Form 990 (2012) WORLD CHRISTIAN BROADCASTING CORPORATION 75-1541354 Page 6 Part XIII Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI. X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 19 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent. 1 b X officer, director, trustee or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? ... 4 X X Did the organization become aware during the year of a significant diversion of the organization's assets?... 5 Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body?. b Are any governance decisions of the organization reserved to (or subject to approval by) members, Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8 a Х b Each committee with authority to act on behalf of the governing body? 8ь 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code., No Yes Х 10 a Did the organization have local chapters, branches, or affiliates?....... 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 10 b X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13. Х 12 a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise X 12b Х 12 c Х 13 Did the organization have a written whistleblower policy?... . . 13 X Did the organization have a written document retention and destruction policy? . 14 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? a The organization's CEO, Executive Director, or top management official SEE..SCHEDULE 0. 15 a Х Х **b** Other officers of key employees of the organization 15_b 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?. . 16 a Х 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ TNSection 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available. Check all that apply. Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year SEE SCHEDULE O

► CHARLES CAUDILL 605 BRADLEY COURT FRANKLIN TN 37067-8200 615-371-8707

TEEA0106L 08/08/12 Form 990 (2012)

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.												
	(C)											
Name and Title	(B) Average hours per week (list	one bo	ox. ùn	less	perso	more to n is both or/truste	h an I	- (D) - Reportable compensation from the organization	(E) Reportable compensation from related organizations	- (F) Estimated amount of other compensation		
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations		
(1) DR. BRUCE M. EVANS	0.25	1										
CHAIRPERSON	0	X		X				0.	0.	0.		
(2) J.D. ELLIOTT	0.25	1										
VICE CHAIRPERS.	0	X		X				0.	0.	0.		
(3) MARK_WILLOUGHBY	0.25	1						_	_	_		
SECRETARY	0	X		Х			\Box	0.	0.	<u> </u>		
(4) CAROLINE CROSS	0.25	ļ							_	_		
DIRECTOR	0	X						0.	0.	0.		
(5) DR. DAN DAVIDSON	0.25							_	_	_		
DIRECTOR	0	X						0.	0.	0.		
_(6) JERRY L. DENMAN	0.25	ļ										
DIRECTOR	0	Х						0.	0.	0.		
7) NEIKA STEPHENS	0.25							_	_	_		
DIRECTOR	0	X			_			0.	0.	0.		
_(8)_EARLINE_PERRY	0.25	ļ							_			
DIRECTOR	0	X						0.	0.	<u>0.</u>		
_(9)_FERRELL_HAILE	0.25	ļ .						_	_	_		
DIRECTOR	0	X						0.	0.	0.		
(10) DR. JAMES CARR	0.25	ļ						_	_	_		
DIRECTOR	0	Х						0.	0.	0.		
(11) WALT LEAVER	0.25								_	_		
DIRECTOR	0	X			_			0.	0.	0.		
(12) DR. RANDY PERRY	0.25	ļ i						_	_	_		
DIRECTOR	0	X						0.	0.	<u> </u>		
(13) DR. FRANK HARRELL	0.25							_	_	_		
DIRECTOR	0	X						0.	0.	0.		
(14) DEANE PIGG	0.25	_						_		_		
DIRECTOR	0	X						0.	0.	0.		

•	(B)		(C)						1	(00.77)
400		Position (do not check more than one				ne (D)	(E)		(E)	
(A) Name and title	Average hours	box	, unle	ess pe	erson	is both a	an Reportable	Reportable	1	(F) stimated
Name and the	per week	<u> </u>				lor/truste	e) compensation from	compensation from related organization	amou	int of other pensation
	(list any hours	or di	nst l	Officer	Key employee	Highest co	(W-2/1099-MISC)	(W-2/1099-MISC)	fre	om the anization
	for related organiza	rect à	늉	व्	<u>s</u>	oye est	Pr		and	d related
	- trons	or a	<u>a</u>		ğ	e g			J. Grad	III.Zation3
	below dotted	Individual trustee or director	nstitutional trustee		8	eng				
	line)	6	8			Highest compensated employee				
(15) LEE POWELL	0.2	-				\vdash				
DIRECTOR	0.2	x					0.	l 0		0.
(16) BUDDY RAGAN	0.2	 				╁╌┼	.		+	
DIRECTOR	0	X				[0.	0		0.
(17) DAVID RALSTON	0.2	1				 - -		1	`	
DIRECTOR	0	x			l		0.	lo		0.
(18) JOHN TYSON	0.2		\neg					<u> </u>	' 	
DIRECTOR	0-0-	х	Ì				0.	_ 0		. 0.
(19) CHUCK ALLEN	0.2	1								
DIRECTOR	0	X					0.	l o		0.
(20) DR. GEORGE BRIDGES	0.2						-		+	
DIRECTOR	1-0=	x					0.	l o		0.
(21) BILL WRIGHT	0.2						7.		`	
DIRECTOR	0	x					0.	0		0.
(22) ART DICKERSON	0.2							-	<u>-</u>	
DIRECTOR	0	1 x l					0.	l o		0.
(23) CHARLES H CAUDILL	40									
PRESIDENT & CEO	0	1 1		Х			80,061.	l 0		1,819.
(24) BENJAMIN C. POWELL	40									
CFO	0	1		Х			49,561.	0		3,663.
(25) ANDREW L. BAKER	40									
VP DEVELOPMENT	0			X			59,794.	0	.	5,776.
1 b Sub-total						►	189,416.	0		11,258.
c Total from continuation sheets to Part VII, Section						. •	74,064.	0		50,954.
d Total (add lines 1b and 1c)						·· <u> </u>	263,480.	0		62,212.
2 Total number of individuals (including but not limited to	those li	sted	abov	/e) v	vho	receive	d more than \$100,00	00 of reportable cor	npensation	
from the organization 0										· · · · ·
										Yes No
3 Did the organization list any former officer, directo on line 1a? If 'Yes,' complete Schedule J for such	r or trus	tee, I		em			highest compensat	ed employee	3	Х
·							•			^
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater	eportabl	e cor	npe	nsa If 'Y	tion ′es′	and of	ther compensation	from		
such individual		50,00			03				4	X
5 Did any person listed on line 1a receive or accrue	compen	satio	n fro	om a	any	unrela	ted organization or	ındıvıdual		
for services rendered to the organization? If 'Yes,'	comple	te Sc	hed	ule	J to	r such	person	· · · · · · · · · · · · · · · · · · ·	5	<u> </u>
Section B. Independent Contractors 1 Complete this table for your five highest compensations.	ited inde	nend	lent	COL	ntrad	ctors th	at received more t	han \$100 000 of		
compensation from the organization. Report compensa	tion for t	the ca	alenc	dar y	/ear	ending	with or within the or	ganization's tax ye	ar.	
(A) Name and business addre	22						Description		(C Comper	s) Sation
							Description	or services		
								· · · · · · · ·		
	•							-		
							 			
							1			
2 Total number of independent contractors (including but	not limit	ted to	tho	se li	sted	l above) who received more	than		
\$100,000 in compensation from the organization										
PAA		FEAN	1001	01/0	4/13				Form (990 (2012)

	Check if Schedule O contains a response to any quest	tion in this Part VIII.			
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
REVENUE AND OTHER SIMIL AR AMOUNTS!	1 a Federated campaigns b Membership dues 1 b c Fundraising events d Related organizations. e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 1 1 1,956,881. g Noncash contributions included in Ins 1a-1f: \$ 58,440. h Total. Add lines 1a-1f				
PROGRAM SERVICE REVENUE	b c d e f All other program service revenue g Total. Add lines 2a-2f				
	Investment income (including dividends, interest and other similar amounts)	13,908.			13,908.
	d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses				23,385.
OTHER REVENUE	8a Gross income from fundraising events (not including \$\frac{119,867}{0}\$. of contributions reported on line 1c). See Part IV, line 18				-844.
	9 a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities				
	10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory				
	11a MISCELLANEOUS INCOME 900099 b c	600.			600.
	d All other revenue			 	ļ <u> </u>
	e Total. Add lines 11a-11d	600.			35.015
	12 Total revenue. See instructions	2,113,797.	0.	0.	37,049.

	tion 501(c)(3) and 501(c)(4) organizations must con		ner organizations must co	omplete column (A)	
	Check if Schedule O contains a r				
Do 7b,	not include amounts reported on lines 6b, 8b, 9b, 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 governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members		-		
5	Compensation of current officers, directors, trustees, and key employees	263,480.	94,080.	69,575.	99,825.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7	Other salaries and wages	859,270.	_602,862.	76,055.	180,353.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)			-	
9	Other employee benefits	112,516.	93,426.	1,209.	17,881.
10	Payroll taxes [74,382.	44,095.	11,117.	19,170.
11	Fees for services (non-employees):				
ä	a Management				
ł	b Legal				<u></u>
(Accounting	16,000.		16,000.	
	d Lobbying				
•	Professional fundraising services. See Part IV, line 17 .				
	Investment management fees				
	other. (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch 0)	17,431.	9,469.	7,962.	
13	Office expenses	91,342.	41,176.	9,988.	40,178.
14	Information technology	1,594.	360.	450.	784.
15	Royalties	1,354.	300.	450.	704.
16	Occupancy	42,806.	35,870.	4,364.	2,572.
17	Travel	70,284.	6,845.	1,301.	63,439.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	70/2011	0,010.		307 103.
19	Conferences, conventions, and meetings .				
20	Interest	72,001.	10,620.	55,553.	5,828.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	136,774.	131,311.	2,927.	2,536.
23	Insurance	22,247.	16,747.	3,655.	1,845.
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
_	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	226,832.	226,832.	A Committee of the Comm	and the same of th
	MADAGASCAR SITE MAINT.	78,115.	220,832.		78,115.
	GUARANTEE COSTS	62, 984.	62,984.		10,113.
		52, 211.	52, 211.	-	
	RECORDINGS	49, 491.	8,068.	509.	40,914.
	Total functional expenses. Add lines 1 through 24e	2,249,760.	1,436,956.	259,364.	553,440.
	·	2,247,100.	1,430,330.	237,304.	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
BAA		TEFA01101 12/			Form 990 (2012)

Part X Balance Sheet

BAA

Form 990 (2012)

Check if Schedule O contains a response to any question in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing 172,567 1 288,556. Savings and temporary cash investments 94,605 2 8,285 Pledges and grants receivable, net 3 3 Accounts receivable, net . 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 Notes and loans receivable, net . 7 8 8 Inventories for sale or use. Prepaid expenses and deferred charges 23,812 9 1,253. 5,100,599 b Less accumulated depreciation. . . 10 b 3,908,675 10 c 1,191,924. 1,328,698 Investments - publicly traded securities 553,199. 11 496,402. 12 Investments - other securities. See Part IV, line 11. . 12 Investments - program-related. See Part IV, line 11. . . 13 14 Intangible assets . 14 Other assets. See Part IV. line 11. 15 10,807,023 10,931,512. 12,917,932. Total assets. Add lines 1 through 15 (must equal line 34) . . . 12,979,904. 16 17 Accounts payable and accrued expenses . . . 17 191,657 292,942. 18 19 19 20 20 Tax-exempt bond liabilities. 21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . 21 Loans and other payables to current and former officers, directors, trustees. 160,000. 22 160,000. 23 23 Secured mortgages and notes payable to unrelated third parties 3,998,415 3,998,415. 24 Unsecured notes and loans payable to unrelated third parties 24 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 25 106,704 25 100,905. Total liabilities. Add lines 17 through 25 4,456,776. 4,552,262. Organizations that follow SFAS 117 (ASC 958), check here > lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets ... 6,386,868 27 6,428,045. ASSETS 28 Temporarily restricted net assets. 28 1,762,568 1,563,933. 29 Permanently restricted net assets... 29 373,692 373,692. R Organizations that do not follow SFAS 117 (ASC 958), check here FUND and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances . 33 8,523,128 8,365,670. Total liabilities and net assets/fund balances 34 12,979,904 12,917,932.

Forn	990 (2012) WORLD CHRISTIAN BROADCASTING CORPORATION	75-	<u> 15413:</u>	54	Pa	ige 12	
Pai	t XI. Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI					<u>. </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)		1	2,1	13,7	<i>1</i> 97.	
`2	Total expenses (must equal Part IX, column (A), line 25)		2	2,2	49,7	760.	
3	Revenue less expenses Subtract line 2 from line 1	•	3	-1	35,9	963.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).		4	8,5	23,1	28.	
5	Net unrealized gains (losses) on investments		5	-	21,4	195.	
6	Donated services and use of facilities		6				
7	Investment expenses	•	7				
8	Prior period adjustments		8				
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	8,3	65,6	570.	
Pai	t XII Financial Statements and Reporting		•				
	Check if Schedule O contains a response to any question in this Part XII		<i>.</i>			П	
					Yes	No	
1	Accounting method used to prepare the Form 990 Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O						
2 a	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 separate basis, consolidated basis, or both:	reviewe	ed on a				
	Separate basis Consolidated basis Both consolidated and separate basis						
Ł	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 basis, consolidated basis, or both: X Separate basis	separa	ite				
C	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	e audıt,		2 c	Х		
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.							
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Audit Act and OMB Circular A-133?			. За		<u> </u>	
k	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the requi or audits, explain why in Schedule O and describe any steps taken to undergo such audits	red audi	ıt 	3 b		<u> </u>	
BAA				Form	1 990 ((2012)	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Employer identification number

OMB No 1545-0047 2012

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Dispersion

			OADCASTING CO							54135			
Par	}[Reason for Pub	lic Charity Status	(All organizations	must	compl	ete this	s part.) See	ınstruct	ions.		
The o	orga	nization is not a priva	ate foundation becaus	se it is (For lines 1 thro	ough 11,	check	only one	box)		-			
1		A church, convention	n of churches or asso	ciation of churches des	cribed i	n sectio	n 170(b)(1)(A)(i).				
2	П	A school described i	n section 170(b)(1)(A)(ii). (Attach Schedule I	E.)								
3	П			ce organization describi		ction 17	70(b)(1)(AXiii).					
4	Н			I in conjunction with a h					/0/ЬУ1У	AYiii). Fi	nter the ho	snıtal's	:
	Ш	name, city, and state		,					- (-)(-)(- p . tu. u	
5			ted for the benefit of a	college or university own	ned or op	erated b	y a gove	rnmenta	I unit de	scribed in	section		
6	П			cal government or governmental unit described in section 170(b)(1)(A)(v).									
7	X	in section 170(b)(1)(A)(vi). (Complete Pa	rmally receives a substantial part of its support from a governmental unit or from the general public described Xvi). (Complete Part II)									
8	Ш	A community trust d	escribed in section 1	70(b)(1)(A)(vi). (Comple	te Part	II.)							
9	-[]	related to its exempt f	normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities trunctions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and able income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2).										
10				exclusively to test for po									
11		An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.											
	a ☐ Type I b ☐ Type II c ☐ Type III — Functionally integrated d ☐ Type III — Non-functionally integrated												
е	e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).												
f		` , , ,	eived a written determi	nation from the IRS that i	ıs a Type	I, Type	II or Typ	e III sup	porting	organizati	on,		П
g													
•		3 . ,	,				···· •···		••9	p 0.00		Yes	No
		(i) A person who obelow, the gove	directly or indirectly of erning body of the su	ontrols, either alone or oported organization?	togethe	r with p	ersons c	lescribe 	d in (ii)	and (III)	11 g (i)	165	110
		(ii) A family memb	er of a person descri	bed in (i) above?							11 g (ii)		
		· ·	•	described in (i) or (ii) a	hove?			•			<u> </u>		
h		` '	•	e supported organization		•	• •	• • • • •	• •		11 g (iii)		
			(ii) EIN		, ``	la tha	Tax But		4.34		Adii Amauni		
		(i) Name of supported organization	(ii) Elik	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (your go	Is the zation in i) listed in overning ment?	(v) Did you notify the organization in column (i) of your support?		organiz colui organiz	ts the ration in mn (i) ed in the S ?	(vii) Amount sup	port	etary
					Yes	No	Yes	No	Yes	No			
					<u> </u>								
(A)							}	İ					
-								 	ļ ·				
(B)													
				 									
(C)						i							
					-			l					
(D)			•							1			
,						 		<u> </u>				<u>~</u>	
(E)						1	1						
<u>,</u>		· · ·							دسوس				
Total													
	For	Panerwork Reduction	n Act Notice, see the	Instructions for Form	990 or 9	90.F7			Sobodula	A (Fare	990 or 990	E 70 00	112
	٠.				VI -			,	こいにははに	: M (FUIII)	シンひ ひに ブブひ	・エム) ムリ	114

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Se	ction A. Public Support						
Cal beg	endar year (or fiscal year inning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.')	2,714,176.	2,444,091.	2,556,107.	3,063,043.	2,095,044.	12,872,461.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3 .	2,714,176.	2,444,091.	2,556,107.	3,063,043.	2,095,044.	12,872,461.
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)						812,849.
6	Public support. Subtract line 5 from line 4						12,059,612.
Sec	tion B. Total Support						
Cale beg	endar year (or fiscal year inning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4 .	2,714,176.	2,444,091.	2,556,107.	3,063,043.	2,095,044.	12,872,461.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	40,236.	37,101.	56,045.	74,657.	13,908.	221,947.
9	Net income from unrelated business activities, whether or not the business is regularly carried on					237300.	0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.). SEE, PART IV	39.	398.	515.	2,427.	600.	3,979.
11	Total support. Add lines 7 through 10						13,098,387.
12	Gross receipts from related activ	ities, etc (see inst	tructions)			12	115,589.
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	's first, second, thi	rd, fourth, or fifth to	ax year as a section	n 501(c)(3)	. ►
Sec	tion C. Computation of Pul	olic Support P	ercentage				
	Public support percentage for 20			e 11, column (f))		14	92.07%
15	Public support percentage from 2	2011 Schedule A,	Part II, line 14		•	15	93.96%
16 a	33-1/3% support test — 2012. If and stop here. The organization	the organization o qualifies as a pub	lid not check the dicly supported or	box on line 13, ar ganization .	nd the line 14 is 3	3-1/3% or more, o	check this box
t	33-1/3% support test — 2011. If t and stop here. The organization	he organization di qualifies as a pub	d not check a boo blicly supported of	x on line 13 or 16 rganization .	a, and line 15 is 3 ·	33-1/3% or more,	check this box
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts∙a	nd-circumstances	test, check this	box and stop here	e. Explain in Part	IV how
	o 10%-facts-and-circumstances te or more, and if the organization is organization meets the 'facts-and Private foundation. If the organiz	meets the 'facts-a d-circumstances' t	nd-circumstances est. The organiza	' test, check this tion qualifies as a	box and stop her o publicly supporte	e. Explain in Part ed organization	IV how the ▶ ☐
BAA	rnvate roundation. If the organiz			J, 10a, 100, 1/a,			
$\neg \sim$					Sch	edule A (Form 99	0 OF 990-E717012

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

~							
	ction A. Public Support	T	4) 6555	4 > 6010	1 40 -2-7		
Caler 1	ndar year (or fiscal yr beginning in) S Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants').	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4 5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	governmental unit to the organization without charge .						
	Total. Add lines 1 through 5 a Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support			··			
	dar year (or fiscal yr beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
10 a	Amounts from line 6						
	taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b.						
	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 IV)						
13	Total support. (Add Ins 9, 10c, 11, and 12)						
	First five years. If the Form 990 organization, check this box and	stop here .	· · · · · · · · · · · · · · · · · · ·	d, third, fourth, o	r fifth tax year as	a section 501(c)(3) <u> </u>
	tion C. Computation of Pul						
	Public support percentage for 20	• •	••	e 13, column (f))		. 15	0/0
	Public support percentage from 2					. 16	%
	tion D. Computation of Inve						
17	Investment income percentage for		7.5	•	mn (f))	17	%
	Investment income percentage fr		•		and have 15°	18	%
	33-1/3% support tests — 2012. If is not more than 33-1/3%, check	this box and stop	here. The organi	zation qualifies a	is a publicly suppo	orted organization	>
	33-1/3% support tests — 2011. If line 18 is not more than 33-1/3% Private foundation. If the organize	, check this box a	and stop here. The	e organization qua	alıfıes as a publıcl	y supported organ	ization
<u>Ζ</u> υ	riivate ioundation. II the organiz	anon did not che	ch a box on line I	+, 13a, 01 19b, C1	neck this box and	see instructions	

Schedule A	(Form 990 or 990	D-EZ) 2012	WORLD	CHRIST	IAN BRO	DADCASTI	NG CORPOR	ATION	75-1541354		Page 4
Part IV	Supplement Part II, line (See instruc	tal Informat 17a or 17b; tio∩s).	i on. Co and Pa	mplete th rt III, line	nis part to 12. Also	o provide to complete	he explana this part fo	tions requ or any add	uired by Part ditional inform	II, line 10 lation.);
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

of the organization Employer identification number

WO	RLD CHRISTIAN BROADCASTING COR	RPORATION	75-1541354
Ŗā	Organizations Maintaining Dono	or Advised Funds or Other Similar Fur	
	the organization answered 'Yes'	to Form 990, Part IV, line 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do are the organization's property, subject to the	nor advisors in writing that the assets held in do organization's exclusive legal control?	onor advised funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	ors, and donor advisors in writing that grant funct t of the donor or donor advisor, or for any other · · · · · ·	ds can be used only purpose conferring Yes No
Pa	Conservation Easements. Comp	olete if the organization answered 'Yes'	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held b	y the organization (check all that apply)	
	Preservation of land for public use (e.g., i	recreation or education) Preservation of	of an historically important land area
	Protection of natural habitat	Preservation o	of a certified historic structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization last day of the tax year.	held a qualified conservation contribution in the form	
			Held at the End of the Tax Year
	Total number of conservation easements .		. 2a
	Total acreage restricted by conservation ease		. 2b
	: Number of conservation easements on a certi		. 2c
4	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and not on a histor	ric 2 d
3	Number of conservation easements modified, trar tax year ►	nsferred, released, extinguished, or terminated by the	he organization during the
4	Number of states where property subject to conse	ervation easement is located >	_
5	Does the organization have a written policy re and enforcement of the conservation easement	garding the periodic monitoring, inspection, har	ndling of violations,
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conservation easements of	during the year
7	Amount of expenses incurred in monitoring, inspering \$ \$	ecting, and enforcing conservation easements durin	g the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of se	ction 170(h)(4)(B)(i) Yes No
9	include, if applicable, the text of the footnote conservation easements	s conservation easements in its revenue and expen- to the organization's financial statements that d	lescribes the organization's accounting for
Par	Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	Other Similar Assets. 8.
1;	If the organization elected, as permitted unde art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finar	r SFAS 116 (ASC 958), not to report in its rever eld for public exhibition, education, or research in funcial statements that describes these items.	nue statement and balance sheet works of urtherance of public service, provide,
l	If the organization elected, as permitted unde historical treasures, or other similar assets held for following amounts relating to these items	r SFAS 116 (ASC 958), to report in its revenue or public exhibition, education, or research in furthe	statement and balance sheet works of art, rance of public service, provide the
	(i) Revenues included in Form 990, Part VIII,	line 1	► \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, hamounts required to be reported under SFAS	nistorical treasures, or other similar assets for finan 116 (ASC 958) relating to these items	cial gain, provide the following
ā	Revenues included in Form 990, Part VIII, line	e 1	. ►\$
ŀ	Assets included in Form 990, Part X.		► \$

Schedule D (Form 990) 2012 WORLI					or Othor	75-154		Page 2
								ueu)
Using the organization's acquisition items (check all that apply):	i, accession, and othe		_	_	•	cant use of its o	collection	
• a Public exhibition		⊢		hange programs	•			
b Scholarly research		e Othe	r <u> </u>	 -				
c Preservation for future gener 4 Provide a description of the organize		id explain how the	y furthe	er the organization	n's exempt i	purpose in		
Part XIII.								
5 During the year, did the organiza to be sold to raise funds rather the							Yes	No
Partive Escrow and Custodial Arr	angements. Compl n Form 990, Par	ete if the organizet X, line 21.	zation	answered 'Yes' t	to Form 99	0, Part IV, line	e 9, or	
1 a Is the organization an agent, trus on Form 990, Part X?		•			ther assets	not included	Yes	No
b If 'Yes,' explain the arrangement	in Part XIII and cor	mplete the follow	ing tab	ole:	 1		Amount	
c Beginning balance					1c		Amount	
d Additions during the year			•	-	. 1d			
					. 1e			
f Ending balance			-:		1f			
2a Did the organization include an a					٠		Yes	No
b If 'Yes,' explain the arrangement	ın Part XIII. Check	here if the expla	ntion h	nas been provide	đ in Part X	an ˈ		
Part V Endowment Funds. C	omplete if the o	raanization ai	acwar	od 'Voc' to Fo	orm 000	Port IV Jun	0.10	
Pant V Endowment Funds. C	(a) Current	(b) Prior ye		(c) Two years		hree years	(e) Four ye	ars
1 a Beginning of year balance	341,582			361,85		318,425.	<u> </u>	6,661.
b Contributions	341,302	100,2	.55.	301,00		310,423.	343	,001.
		<u> </u>					 	
c Net investment earnings, gains, and losses	12,926	-66,6	551.	77,27	70.	43,427.	-227	,236.
d Grants or scholarships						 		
e Other expenditures for facilities and programs				30,88	39.	0.	1	
f Administrative expenses								
g End of year balance .	354,508.	341,5	582.	408,23	33.	361,852.	318	,425.
2 Provide the estimated percentage	e of the current year	end balance (lii	ne 1g,	column (a)) held	as:			-
a Board designated or quasi-endowm	ent ►	%						
b Permanent endowment ►	100.00%							
c Temporarily restricted endowmen		[%]						
The percentages in lines 2a, 2b,	and 2c should equa	1 100%						
3 a Are there endowment funds not in the organization by:	ne possession of the	organization that a	are held	d and administered	d for the		Yes	No
(i) unrelated organizations							3a(i)	X
(ii) related organizations					,		3a(ii)	X
b If 'Yes' to 3a(II), are the related of	rganizations listed a	as required on S	chedul	e R?			3b	
4 Describe in Part XIII the intended	uses of the organiz	zation's endowm	ent fun	ds SEE PAF	RT XIII			
Part VI Land, Buildings, and I	Equipment. See	Form 990, P	art X,	line 10.				
Description of property	(a) Co	st or other basis investment)	(b)	Cost or other asis (other)		cumulated eciation	(d) Book v	<i>r</i> alue
1 a Land				285,178.		100 mg	285	5,178.
b Buildings .				1,437,969.	1,	296,112.	141	857.
c Leasehold improvements								
d Equipment .				3,252,432.		488,642.		3,790.
e Other		000 5 111	<u> </u>	125,020.		123,921.		.,099.
Total. Add lines 1a through 1e. (Colum	n (d) must equal Fo	rm 990, Part X,	colum	n (B), line 10(c)))			, 924.
BAA						Schedu	le D (Form 99	u) 2012

(a) Description of liability (b) Book value

(1) Federal income taxes
(2) CHARITABLE ANNUITIES PAYABLE 100, 905.

(3)
(4)
(5)
(6)
(7)
(8)
(9)
(10)
(11)

Total. (Column (b) must equal Form 990, Part X, column (B) line 25)

(b) Book value

100, 905.

Schedule D (Form 990) 2012 WORLD CHRISTIAN BROADCASTING CORPORATION	75-154135	4 Page 4
Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
1 Total revenue, gains, and other support per audited financial statements	1	2,133,217.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments 2a -21, 49.	5.	
b Donated services and use of facilities 2b 2, 42.	3.	
c Recoveries of prior year grants		
d Other (Describe in Part XIII.) SEE PART XIII 2d 38,49	2.	
e Add lines 2a through 2d	2 e	19,420.
3 Subtract line 2e from line 1	3	2,113,797.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	. 4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,113,797.
PartXIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Return	
1 Total expenses and losses per audited financial statements	1	2,290,675.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	3.	
b Prior year adjustments	-	-
c Other losses 2c		
d Other (Describe in Part XIII.) . SEE. PART XIII 2d 38,492	2.	
e Add lines 2a through 2d	2 e	40,915.
3 Subtract line 2e from line 1	. 3	2,249,760.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	. 4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 5	2,249,760.
Part XIII Supplemental Information	 	
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part 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 a	IV, lines 1b an	id 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 a	any additional i	nformation
PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND		
WORLD CHRISTIAN HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR EN	IDOWMENT A	SSETS.
THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS	SUPPORTE	D BY ITS
	·	
ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE END	DOWMENT AS	SETS.
WORLD CHRISTIAN HAS A POLICY OF APPROPRIATING, NO MORE OFTEN THAN Q	UARTERLY,	DIVIDEND
	,	
AND INTEREST INCOME FROM THE ENDOWMENT FUND TO BE USED FOR OPERATION	NS AS NEE	DED.
APPROPRIATIONS SHALL NOT LEAVE THE ENDOWMENT FUND WITH LESS THAN TH	E PREVIOU	S TWELVE
MONTHS PRINCIPAL INCREASED BY THE RATE OF INFLATION AS MEASURED BY	THE AVERA	GE
BAA		(Form 990) 2012
		-

Schedule D (Form 990) 2012 WORLD CHRISTIAN BROADCASTING CORPORATION Part XIII Supplemental Information (continued)	75-1541354	Page 5
PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND (CONTINUED)		
CONSUMER PRICE INDEX FOR THE PAST THREE YEARS. PERMANENT ENDOWM	ENT_FUNDS_CANNOT_	BE
USED UNLESS APPROVED BY THE BOARD.		- .
PART X - FIN 48 FOOTNOTE		
WORLD CHRISTIAN IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION	ON 501(C)(3) OF T	HE
INTERNAL REVENUE CODE AND HAS BEEN CLASSIFIED AS OTHER THAN A PI	RIVATE FOUNDATION	<u>[</u>
ACCORDINGLY, NO PROVISION HAS BEEN MADE FOR INCOME TAXES IN THE	ACCOMPANYING	-
FINANCIAL STATEMENTS.		- -
WORLD CHRISTIAN FOLLOWS FASB ASC GUIDANCE RELATED TO UNRECOGNIZE	ED TAX BENEFITS.	THE
GUIDANCE CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXE	ES RECOGNIZED IN	AN
ORGANIZATION'S FINANCIAL STATEMENTS. THIS INTERPRETATION PRESCRI	(BES A MINIMUM	. – – – -
PROBABILITY THRESHOLD THAT A TAX POSITION MUST MEET BEFORE A FIN	NANCIAL STATEMENT	- – – – – -
BENEFIT IS RECOGNIZED. THE MINIMUM THRESHOLD IS DEFINED AS A TA	X POSITION THAT	IS
MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION BY THE APP	LICABLE TAXING	. -
AUTHORITY, INCLUDING RESOLUTION OF ANY RELATED APPEALS OR LITIGATED	ATION PROCESSES,	. -
BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFIT T	O BE RECOGNIZED	IS
MEASURED AS THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN F	TIFTY PERCENT LIK	ELY
OF BEING REALIZED UPON ULTIMATE SETTLEMENT. WORLD CHRISTIAN HAS	NO TAX PENALTIES	OR
INTEREST REPORTED IN THE ACCOMPANYING FINANCIAL STATEMENTS. TAX	YEARS THAT REMAI	N
OPEN FOR EXAMINATION INCLUDE YEARS ENDED DECEMBER 31, 2009 THROU	JGH_2012.	. -
		. -
		-
		·
		. -

Schedule F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16.
 ► Attach to Form 990.
 ► See separate instructions.

OMB No 1545-0047

2012
OpenNotPublic
Inspection

Department of the Treasury Internal Revenue Service

Vame	of the organization				Employer identif	ication number
WOI	RLD CHRISTIAN BROA	DCASTING CO	RPORATION		75-15413	54
		ion on Activiti		e United States. Comple		
1				substantiate the amount of its election criteria used to award		
2	For grantmakers. Describe in United States.	n Part V the organi	zation's procedures	s for monitoring the use of its gra	ints and other assistance	outside the
3	Activities per Region (The	following Part I, I	ine 3 table can b	e duplicated if additional space	e is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	-	-			TOWER CONSTR	
	SUB-SAHARAN				DISSEMINATE	
	AFRICA	1	18	PROGRAM SERVICES	RELIG INFO	460,858.
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
10)		-				
11)						
12)				,		
13)						
14)						
15)						_
16)						
17)		-				
<u> </u>	Sub-total	1	18	ALL DESIGNATION OF THE PARTY OF		460,858.
t	Total from continuation sheets to Part I					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

c Totals (add lines 3a and 3b)

Schedule F (Form 990) 2012

460,858.

Schedule F (Form 990) 2012 WORLD CHRISTIAN BROADCASTING CORPORATION

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(9) (9) (10) (11) (12) (13) (14) (15) (19) (19) (19) (19) (19) (19) (19) (19	1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
Eliter total number of recipient againtations listed above that are recognized as chartes by the foreign courtly, recognized as lax-exempt by the IPS, or for which the grantee or courtes has provided a section 501(c)(3) equivalency letter.	£									
Enter total number of recipient organizations listed above that are recognized as the foreign country, recognized as tax exempt by the IRS, or for which Enter total number of other organizations or entities.	(2)									
Enter total number of recipient organizations listed above that are recognized as chartnes by the foreign country, recognized as lax-exempt by the IRS, or for which Enter total number of other organizations or entitles.	(3)									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which Enter total number of other organizations or entities.	(4)									
Enter total number of recipient organizations are elecognized as charities by the foreign country, recognized as lax-exempt by the IRS, or for which Enter total number of other organizations or entities.	(2)									
Enter total number of recipient organizations or entitles Enter total number of other organizations or entitles Enter total number of other organizations or entitles Enter total number of other organizations or entitles	(9)						-			
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax exempt by the IRS, or for which Enter total number of other organizations or entities.	6									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as lax-exempt by the IRS, or for which the grantee or counsel has provided a section 501 (c)(3) equivalency letter.	(8)						- —			
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which Enter total number of other organizations or entities	6									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which Enter total number of other organizations or entities	(10)									
Enter total number of recipient organizations or entities	(11)									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. Enter total number of other organizations or entities	(12)									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities	(13)		4							
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the granitee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities	(14)		-							
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities	(15)									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.	(16)		, J4				-			
Enter total furtible of other organizations or entitles		ter total number of recipient organization in grantee or counsel has provided a	ons listed above that an section 501(c)(3) equ	re recognized as cha uivalency letter	rities by the foreig	gn country, recogniza	ed as tax-exempt by	y the IRS, or for which		0
	1-	ter total flumber of other organization	ons or enumes						Schedule F	0 (Form 990) 2012

Page 3

Schedule F (Form 990) 2012 WORLD CHRISTIAN BROADCASTING CORPORATION

75-1541354

[Park III] Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	ء ا	Nimber (a) Amount of	Manage of	20 A Language (A)		
		of recipients	cash grant	cash disbursement	cash assistance	(g) Description of non-cash assistance	(n) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)					_		
(9)							
6							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(71)							
(18)							
ВАА						Schedule F (Schedule F (Form 990) 2012

TEEA3503L 12/17/12

BAA	TEEA3505L 12/17/12	Schedule F (F	orm 990) 2012
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	<u> </u> Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualif electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	ed Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Cert Foreign Corporations (see Instructions for Form 5471)	taın X	No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Cer Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	<i>taın</i> . ∐Yes	X No
	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
_	Foreign Forms		
Sche	edule F (Form 990) 2012 WORLD CHRISTIAN BROADCASTING CORPORATION	75-1541354	Page 4

	Complete this column (f) (ac (accounting m recipients), as	counting me	thod; amou	mation requ nts of inves	uirea by P itments vs	art i, iine Z expenditure t III. columi	(monitoring es per regioi	of funds); i n); Part II,	Part I, line 3, line 1
·	recipients), as	applicable.	Also comple	ete this part	t to provide	e any additi	onal informa	ation (see i	nstructions).
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BAA			TEEA				·	Schedule F (Form 990) 2012

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047 2012

Department of the Treasury Internal Revenue Service

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

name of the organization						Employer identific	ation number
WORLD CHRISTIAN BROADCAS	TING CORPO	RATION				75-154135	4
Fundraising Activities. Com Form 990-EZ filers are not re	plete if the orga	inization a	nswered "	Yes' to Form 990, Part	IV, line	17.	
1 Indicate whether the organization	raised funds th	rough any	of the fol	lowing activities. Check	all that	apply.	
a Mail solicitations		,	е			· · ·	
b Internet and email solicitation	S		f	Solicitation of gove	_	-	
	.5		-	<u>—</u>		grants	
			g	Special fundraising	g events		
d In-person solicitations							
2 a Did the organization have a written of employees listed in Form 990, Pa	rt VII) or entity	ın connect	tion with p	rofessional fundraising	services	?	Yes X No
b If 'Yes,' list the ten highest paid indi- compensated at least \$5,000 by t	viduals or entities he organization.	s (fundraise ·	ers) pursua	nt to agreements under v	which the	fundraiser is to	be
(i) Name and address of individual	(ii) Activity	(iii) Did	fundraiser	(iv) Gross receipts	(v) Am	ount paid to	(vi) Amount paid to
or entity (fundraiser)		have custo	dy or control ibutions?	from activity	(or re	etained by) iiser listed in	(or retained by) organization
		""				olumn (i)	organization
	-	Yes	No		<u> </u>		
1							
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2							
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10							
		ļ					
Total			▶				0.
3 List all states in which the organizati or licensing.	on is registered o	or licensed	to solicit co	ontributions or has been	notified it	is exempt from	registration
					- -		
	_ _						
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	- -						

		G (Form 990 or 990-EZ) 2012 WORLD (
Pai	t'll\$	Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts gro	event contribution:	nswered 'Yes' to Fo s and gross income	orm 990, Part IV, III e on Form 990-EZ,	ne 18, or reported lines 1 and 6b.				
R		<u> </u>	(a) Event #1 FUNDRAISING DI (event type)	(b) Event #2	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))				
REVENUE	1	Gross receipts	157,515.			157,515.				
Ē	2	Less: Charitable contributions	119,867.			119,867.				
	3	Gross income (line 1 minus line 2)	37,648.			37,648.				
	4	Cash prizes								
	5	Noncash prizes				_				
DIRECT	6	Rent/facility costs	9,881.			9,881.				
Č T	7	Food and beverages	19,352.			19,352.				
E X. P	8	Entertainment								
EXPENSES	9	Other direct expenses	9,259.			9,259.				
Š	10	Direct expense summary. Add lines 4 thr	ough 9 in column (d)			38,492.				
DS	11 \$200	Net income summary. Combine line 3, co Gaming. Complete if the organiza				-844.				
i a	(diif)	\$15,000 on Form 990-EZ, line 6a.	illon answered Tes	5 (0 1 0 m 1 9 9 0 , Fai	tiv, line 19, or rep					
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))				
	1	Gross revenue .				<u> </u>				
P É		Cash prizes								
DIRECT	3	Non-cash prizes								
C S T E S	4	Rent/facility costs								
	5	Other direct expenses								
	6	Volunteer labor	Yes%	Yes%	Yes%					
	7	Direct expense summary. Add lines 2 three	ough 5 in column (d)		, . •	-				
	8	Net gaming income summary. Combine I	ines 1, column (d) and	line 7 .	<u> </u>					
	9 Enter the state(s) in which the organization operates gaming activities: a is the organization licensed to operate gaming activities in each of these states? b If 'No,' explain.									
		e any of the organization's gaming license es,' explain				Yes No				
ВАА			TEEA3702L 0	1/07/13	Schedule G (Form	1 990 or 990-EZ) 2012				

Sche	nedule G (Form 990 or 990-EZ) 2012 WORLD CHRISTIAN BROADCASTING CORPO	DRATION 7	5-1541	.354	Page 3
11	Does the organization operate gaming activities with nonmembers?			Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or oth administer charitable gaming?	her entity formed to		Yes	No
13	Indicate the percentage of gaming activity operated in:		1 1		
	a The organization's facility		13a		%
	b An outside facility		13b		
	Enter the name and address of the person who prepares the organization's gaming/special even	its books and record			
	Name •			- -	- -
	Address ►		. 		_
	a Does the organization have a contact with a third party from whom the organization received			Yes	No
t	b If 'Yes,' enter the amount of gaming revenue received by the organization▶ \$	and t	he amour	nt	_
	of gaming revenue retained by the third party ► \$	-			
C	c If 'Yes,' enter name and address of the third party:				
	Name	_ ~		_	. =
	Address >				
16					
	Name •				
	Gaming manager compensation ► \$				
	Description of services provided >				
	Director/officer Employee Independent contract				
		itor			
17	Mandatory distributions				
а	a Is the organization required under state law to make charitable distributions from the gaming pro- state gaming license?	ceeds to retain the		Yes	No
b	b Enter the amount of distributions required under state law to be distributed to other exempt organ	nizations or spent in	the	_	_
	organization's own exempt activities during the tax year ► \$				
Par	Supplemental Information. Complete this part to provide the explar columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and this part to provide any additional information (see instructions).	nations required d 17b, as applic	able. A	t 1, line 2 Iso comp	2b, lete
					
				•	
BAA	TEEA37031 01/07/13	Schedule	G (Form 9	90 or 990-F	7) 2012

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization Employer ide

Employer identification number

75-1541354

	Nigge of decouplified access	(b) Deleterates between descripted	
	Complete if the organization a	nswered 'Yes' on Form 990, Part IV, line	25a or 25b, or Form 990-EZ, Part V, line 40b
Partl	Excess Benefit Transa	ictions (section 501(c)(3) and s	section 501(c)(4) organizations only).

1	(a) Name of disqualified person	(b) Relationship between disqualified	(c) Description of transaction	(d) Corrected?		
		person and organization		Yes	No	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

2	Enter the amoun section 4958	t of tax incurred l	by the organia	zatıon m			squalified pe		nder	► \$	
3	Enter the amoun	t of₋tax, if any, oi	n line 2, abov	e, reimb	oursed-b	y the	organization	 		► \$ ⁻	

Part U Loans to and/or From Interested Persons.

WORLD CHRISTIAN BROADCASTING CORPORATION

Complete if the organization answered 'Yes' on Form 990-EZ, Page V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			То	From			Yes	No	Yes	No	Yes	No
(1) CHARLES H. (AUDILL											
(2)	PRES/CEO	OPS	X		136,000.	135,000.		Х	X		Х	
(3) BEN C. POWE	L, INC.		Î									
(4)	CFO	OPS	Х		25,000.	25,000.		Х	Х		Х	
(5)												
(6)												
(7)						· · · · · · · · · · · · · · · · · · ·						
(8)												
(9)							l					
(10)]					
Total		•			►\$	160 000						

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of Assistance	(e) Purpose of assistance
(1)					<u> </u>
(2)	· · · · · · · · · · · · · · · · · · ·				
(3)					
(4)					
(5)					
(6)	•				
(7)					
(8)					
(9) (10)					
(10)				Ţ	T

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2012

Occupant to provide additional information for responses to questions on Schedule L (see instructions).		Business Transactions Inv Complete if the organization answe (a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh organi reve	aring o
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions).	•		organization	u ansaction			т
(2) (3) (4) (5) (6) (7) (8) (9) (10) Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions).	(1)					1es	No
(4) (5) (6) (7) (8) (9) (10) Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions).							
(5) (6) (7) (8) (9) (10) Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions).							
(6) (7) (8) (9) (10) Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions).							-
(8) (9) (10) Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions).							
(8) (9) (10) Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions).							
Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions).	(8)						
Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions).	(9)						
	(10)	Supplemental Information				ļ	
	<u>, </u>	Complete this part to provide addition	nal information for response	es to questions on Sched	dule L (see instructions).		
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SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No 1545-0047

2012

Openito Publications Inspection III

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

WORLD CHRISTIAN BROADCASTING CORPORATION 75-1541354

Part Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash	(d od of d contrib	letermı	ning imounts
1	Art — Works of art		, , , , , , , , , , , , , , , , , , , ,					
2	Art — Historical treasures	_						
3	Art – Fractional interests							
4	Books and publications	-						
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property		=====================================		· · · · · ·			
9	Securities – Publicly traded	X	6	58,440.	FMV			
10	Securities - Closely held stock							
11	Securities — Partnership, LLC, or trust interests.							
12	Securities - Miscellaneous							,
13	Qualified conservation contribution — Historic structures							
14	Qualified conservation contribution — Other						•	
15	Real estate – Residential			,,,				
16	Real estate — Commercial				-			
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens				-			
24	Archeological artifacts							
25	Other ► ()							
26	Other ► () .							
27	Other ► ()							
28	Other► ()							
29	Number of Forms 8283 received by the organization d organization completed Form 8283, Part IV, Done				29			
							Yes	No
30a	During the year, did the organization receive by co- hold for at least three years from the date of the initia purposes for the entire holding period?				it must	30 a		X
b	If 'Yes,' describe the arrangement in Part II.				ļ.			T 18
31	Does the organization have a gift acceptance police	cy that requi	res the review of any n	on-standard contribution		31		X
32a	Does the organization hire or use third parties or noncash contributions?	related organ	nizations to solicit, prod	cess, or sell	Ī	32 a		X
b	If 'Yes,' describe in Part II				ļ.	7,387	H. L. L.	<u> </u>
	If the organization did not report an amount in column	(c) for a type	e of property for which co	olumn (a) is checked.				1 to 1
	describe in Part II		· · ·	• •			是过程	1986 F.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2012

Schedule	M (Form 990) 2012	WORLD CHE	<u>RISTIAN</u>	BROADCAS	TING CO	RPORATIO	ON	75-1	541354	Page 2
Part II	Supplemental In and 33, and whe number of items	formation. (ther the organized or	Complete anization a combi	this part to is reporting nation of b	provide g in Part oth, Also	the inform I, column complete	nation req (b), the n this part	uired by Pa umber of co for any add	irt I, lines 301 ontributions, itional inform	b, 32b, the nation.
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BAA				TEEA460	D2L 12/10/12			Sch	edule M (Form 99	90) 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

OMB No 1545-0047

75-1541354

WORLD CHRISTIAN BROADCASTING CORPORATION /5-1541354
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION
WORLD_CHRISTIAN_BROADCASTING_EXISTS_SO_THAT_PEOPLE_IN_PLACES_BEST_SERVED_BY
BROADCAST MEDIA BECOME AWARE OF THE GOOD NEWS OF JESUS CHRIST AND WANT TO KNOW MORE.
ACCORDINGLY: 1) GEOGRAPHIC AREAS THAT CANNOT BE EASILY SERVED BY MISSIONARIES ARE A
PRIORITY; 2) THE ISLAMIC WORLD WILL BE THE NEXT TARGET FOR MINISTRY.
FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.
CFO BEN POWELL AND BOARD OF DIRECTOR'S MEMBER, LEE POWELL - FAMILY RELATIONSHIP
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS
THE PRESIDENT AND CFO REVIEW THE FORM FOR ACCURACY, THEN SEND A COPY TO ALL THE
BOARD MEMBERS FOR REVIEW. ONCE EVERYONE HAS HAD AN OPPORTUNITY TO SUGGEST CHANGES,
THE OFFICERS SIGN IT AND IT'S READY TO BE FILED.
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS
QUESTIONNAIRES REGARDING CONFLICTS OF INTEREST ARE SENT TO ALL BOARD MEMBERS
ANNUALLY. THEY ARE REQUIRED TO BE COMPLETED AND RETURNED TO THE PRESIDENT AND ARE
KEPT IN THE ORGANIZATION'S RECORDS.
IF A CONFLICT ARISES THE REMAINING BOARD MEMBERS WOULD BE INFORMED. THEY WOULD THEN
ASSESS THE NATURE OF THE CONFLICT AND DETERMINE ITS MATERIALITY. IF A PROBLEM WAS
IDENTIFIED, THEN MEASURES WOULD BE TAKEN TO ELIMINATE EITHER THE CONFLICT OR THE
RELATIONSHIP.
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO, TOP MANAGEMENT
THE COMPENSATION OF THE PRESIDENT/CEO IS REVIEWED ANNUALLY BY THE BOARD OF DIRECTORS
AT THEIR SPRING MEETING. THEIR DECISION IS BASED ON PERFORMANCE AND COMPARABLE
SALARY INFORMATION. ANY CHANGES ARE SUBJECT TO MAJORITY VOTE.

Schedule O (Form 990 or 990-EZ) 2012	Page 2
Name of the organization	Employer identification number
WORLD CHRISTIAN BROADCASTING CORPORATION	75-1541354
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY A	/AILABLE
UPON REQUEST; HOWEVER, A SUMMARY OF THE AUDITED FINANCIAL STATE	EMENTS IS PUBLISHED
ANNUALLY IN THE ORGANIZATION'S NEWSLETTER AND IS ALSO MADE AVA	ILABLE ON THE COMPANY
WEBSITE.	
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2012

SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

WORLD CHRISTIAN BROADCASTING CORPORATION

75-1541354

PART II, L	.INE 10 -	OTHER	INCOME
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NATURE AND SOURCE		2012	 2011	2010		2009		2008	
OTHER INCOME TOTA	\$	600.	\$ 2,427.	\$	515.	\$	398.	\$	39.
	L \$	600.	\$ 2,427.	\$	515.	\$	398.	\$	39.

2012

SCHEDULE D, PART XIII - SUPPLEMENTAL INFORMATION PAGE 4

75-1541354

SCHEDULE D, PART XI, LINE 2D OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990

SPECIAL EVENTS EXPENSES

TOTAL \$ 38,492.

SCHEDULE D, PART XII, LINE 2D OTHER EXPENSES AND LOSSES PER AUDITED F/S

SPECIAL EVENTS EXPENSES

\$ 38,492. TOTAL \$ 38,492.

Form 990

Continuation Sheet for Form 990

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

WORLD CHRISTIAN BROADCASTING CORPORATION

Part VII³ Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Employees										
(A)	(B)	(C)				(D)	(E)	(F)		
Name and Title	Average	Position (check all that apply)				Reportable	1	Estimated amount of other		
	Average hours per week (list any hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
	organiza- tions below dotted line)	trustee	Il trustee		yee	mpensated				Organization3
GAYLE M. CROWE VP PROGRAMMING	- <u>40</u> -			Х				15,770.	0.	45,173.
KEVIN CHAMBERS VP ENGINEERING	$-\frac{40}{0}$			х				58,294.	0.	5,781.
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Form 886	8 (Rev 1-2013)					Page 2			
• If you	are filing for an Additional (Not Automatic) 3-Mo	onth Extension	n, complete only Part	II and check th	ns box				
Note. Only	y complete Part II if you have already been gran	ited an automa	atic 3-month extension	n on a previous	sly filed Form 8868	_			
_	are filing for an Automatic 3-Month Extension, o			•					
	Additional (Not Automatic) 3-Month			the original	(no copies poede	<u></u>			
P. CHO III	Additional (Not Automatic) 5-Month	Extension	Of Tillie. Offig file		<u> </u>				
				Enter filer's id	lentifying number, see i				
	Name of exempt organization or other filer, see instructions				Employer identification numb	er (EIN) or			
Type or				1					
print	WORLD CHRISTIAN BROADCASTING	75-1541354							
	Number, street, and room or suite number. If a P.O. box, see	instructions.			Social security number (SSN))			
File by the extended									
due date for	ling your 1605 BRADLEY COURT								
return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions.									
mad decoma.	EDANIZI IN THE 27067-0200								
	FRANKLIN, TN 37067-8200		··-						
	D. L	- f (f-laa				[EZT]			
Enter the	Return code for the return that this application is	s for (file a se	parate application for	each return)		01			
									
Application	on	Return	Application Is For-			Return			
Is For		Code	IS FOR			Code			
Form 990 c	or Form 990-EZ	01							
Form 990-	BL	02	Form 1041-A			08			
Form 4720	(individual)	03	Form 4720			09			
Form 990-	PF	04	Form 5227			10			
Form 990-	T (section 401(a) or 408(a) trust)	05	Form 6069			11			
Form 990-	T (trust other than above)	06	Form 8870		12				
			<u></u>						
If the cIf this iwhole group	one No. ► 615-371-8707 organization does not have an office or place of is for a Group Return, enter the organization's foup, check this box ►	our digit Group	e United States, chec Exemption Number	(GEN)	. If th	is is for the			
Thembers i	THE EXTENSION IS IOI.								
4 I requ	uest an additional 3-month extension of time un	til <u>11/15</u> _	, 20 <u>13</u> .						
5 For c	alendar year 2012 , or other tax year begine tax year entered in line 5 is for less than 12 mo	ning	<u>, 20</u> ,	and ending	, 20	- - ·			
	e tax year entered in line 5 is for less than 12 mo Change in accounting period	onths, check r	eason: Initial re	eturn (Final return				
7 State in detail why you need the extension . TAXPAYER RESPECTFULLY REQUESTS ADDITIONAL TIME TO									
	HER INFORMATION NECESSARY TO E					· <u>v</u>			
ρΩi	THEY INCOMMITTON MECESSMIT TO T		GITTETE VED VOC	OIGIT IW					
				<u> </u>					
nonre	s application is for Form 990-BL, 990-PF, 990-T, efundable credits. See instructions		· · · · · · · · · · · · · · · · · · ·						
paym	s application is for Form 990-PF, 990-T, 4720, or tents made. Include any prior year overpayment Form 8868	allowed as a	credit and any amoun	it paid previous	sly				
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions									
	Signature and Verifi				<u> </u>				
Under penaltie	s of perjury, I declare that I have examined this form, including a	accompanying sche	edules and statements, and to	the best of my kno	wledge and belief, it is true.				
correct, and co	implete, and that I am authorized to prepare this form.	11	2 A_	22 21 119 1210	Date > 8/	13/13			
Signature ► BAA	MANUAL INCOME	FIFZ0502L	01/21/13	-	Form 8868	(Rev 1-2013)			
		1 11 203021	·		, 0,111 0000	(1.04 1-2013)			