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### 990-PF

### **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation
▶ Do not enter Social Security numbers on this form as it may be made public.

**ÓMB No 1545-0052** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCANNED APR 2 1 2018

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

		lendar year 2013 or tax year beginning		, 2013	, and ending	· · · · · · · · · · · · · · · · · · ·	, 20		
	Name	of foundation				A Employer identific	ation number		
	BUR	NT FORK MINISTRY			-	20-0065328	3		
	Numb	er and street (or P O box number if mail is not deliver	ed to street address)		Room/suite	B Telephone number (see instructions)			
						(40)	6) 777-1670		
	PO :	BOX 29							
	_	r town, state or province, country, and ZIP or foreign	postal code						
	,					C If exemption applicat	ion is		
-	STE	VENSVILLE, MT 59870				pending, check here			
		ck all that apply Initial return	Initial return	of a former r	ublic charity	i <u>.</u>			
Ŭ	0	Final return	Amended re	•	odbiio chanty	D 1. Foreign organization			
		Address change	Name chang			2. Foreign organizati 85% test, check he	ere and attach		
_	Cha	eck type of organization: X Section 50			-	computation	▶ □		
7			· — · ·		4	E If private foundation	status was terminated		
÷		ection 4947(a)(1) nonexempt charitable trust	Other taxable pr			under section 507(b)	(1)(A), check here . P		
ı			ounting method: X C	asn Acc	crual	F If the foundation is i			
		· · · · · · · · · · · · · · · · · · ·	Other (specify)		<b></b>	under section 507(b)	(1)(B), check here .		
_			I, column (d) must be or	r cash basis.)	· · · · · · · · · · · · · · · · · · ·		(d) Diahumamanta		
Ŀ	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) November and	(b) Net inve	estment	(c) Adjusted net	(d) Disbursements for charitable		
		may not necessarily equal the amounts in	expenses per	incon		income	purposes		
_		column (a) (see instructions) )	books				(cash basis only)		
	1	Contributions, gifts, grants, etc., received (attach schedule)	174,135.						
	2	Check ► if the foundation is not required to attach Sch B							
	3	Interest on savings and temporary cash investments							
	4	Dividends and interest from securities	,						
	5a	Gross rents							
	b	Net rental income or (loss)							
•	6a	Net gain or (loss) from sale of assets not on line 10							
Ē		Gross sales pnce for all assets on line 6a							
Revenue	7	Capital gain net income (from Part IV, line 2)							
œ	8	Net short-term capital gain							
	9	Income modifications · · · · · · · · ·							
	-	Gross sales less returns							
	h	Less Cost of goods sold							
		Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11					-		
_									
	13	Compensation of officers, directors, trustees, etc  Other employee salanes and wages							
868	14	Pension plans, employee benefits	·						
Ë	15		1,715.				1,715		
×	16a	Legal fees (attach schedule) ATCH 1	/ <del>                                     </del>	<b></b>			2,040		
9	þ	Accounting fees (attach schedule)ATCH 2	2,040.				2,040		
⋛	С	Other professional fees (attach schedule).	<u> </u>						
ij	17	Interest							
Ë	18	Taxes (attach schedule) (see instructions)	.						
Ξ	19	Depreciation (attach schedule) and depletion							
Operating and Administrative Expenses	20	Occupancy		ļ .					
Ē	21	Travel, conferences, and meetings					25,303		
2	22	Printing and publications							
Ë	23	Other expenses (attach schedule) ATCH .3.	. 139,411.	ļ			139,411		
əra	24	Total operating and administrative expenses							
ă		Add lines 13 through 23					168,469		
_	25	Contributions, gifts, grants paid	555.				555		
_	26	Total expenses and disbursements. Add lines 24 and 2	7.00 004		0		169,024		
_	27	Subtract line 26 from line 12	1.						
		Excess of revenue over expenses and disbursements	5,111.						
		Net investment income (if negative, enter -0-			0				
		Adjusted net Income (if negative enter -0-)		<del>                                     </del>					

Б	art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
	artii	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	٦	Cash - non-interest-bearing	2,546.	7,657.	7,657.
		Savings and temporary cash investments			
	3	Accounts receivable			-
		Less allowance for doubtful accounts ▶			
		Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
ì	7	Other notes and loans receivable (attach schedule)			-
		Less allowance for doubtful accounts ▶			
ß		Inventories for sale or use			
ssets		Prepaid expenses and deferred charges			
As		Investments - U S and state government obligations (attach schedule)			-
		Investments - corporate stock (attach schedule)			
		Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation	-		-
	40	(attach schedule)	· -··-		
		Investments - other (attach schedule)			
	14	Land, buildings, and			
		Less accumulated depreciation	_ **		
		(attach schedule) Other assets (describe			
	16	Total assets (to be completed by all filers - see the	<u> </u>		
		instructions Also, see page 1, item I)		7,657.	7,657.
_		Accounts payable and accrued expenses		, , , , , , , , , , , ,	
		Grants payable			1
ø,	19	Deferred revenue			1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			1
ᅙ	21	Mortgages and other notes payable (attach schedule)			]
Ë		Other liabilities (describe >)			1
		,,			1
	23	Total liabilities (add lines 17 through 22)	0	c	
_	_	Foundations that follow SFAS 117, check here			
ΘS		and complete lines 24 through 26 and lines 30 and 31.			
ၓၟ	24	Unrestricted			
휼	25	Temporarily restricted			1
ĕ	26	Permanently restricted			]
Net Assets or Fund Balanc		Foundations that do not follow SFAS 117, ▶ 🗓			
Ē		check here and complete lines 27 through 31.			
Ō	27	Capital stock, trust principal, or current funds			
ă	28	Paid-in or capital surplus, or land, bldg, and equipment fund			1
Ş	29	Retained earnings, accumulated income, endowment, or other funds	2,546.	7,657.	1
늄	30	Total net assets or fund balances (see instructions)	2,546.	7,657.	
Ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	2,546.	7,657.	
Ē	art II	Analysis of Changes in Net Assets or Fund			
_		al net assets or fund balances at beginning of year - Part		must agree with	
		of-year figure reported on prior year's return)	• • •	-	2,546.
2		er amount from Part I, line 27a			5,111.
3	Oth	er increases not included in line 2 (itemize) ▶		3	
4	Add	lines 1, 2, and 3			7,657.
5	Dec	reases not included in line 2 (itemize) ▶		5	
	Tota	al net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (	(b), line 30 6	7,657.
_					- 000 DE (00.00)

	990-PF (2013)	and Lagger for Tay on Inv	voetment Income			Page 3
Par		and Losses for Tax on Inv describe the kind(s) of property sold		(b) How	(c) Date	1
		ick warehouse; or common stock, 200		P - Purchase D - Donation	acquired (mo , day, yr )	(d) Date sold (mo., day, yr)
а				_		
Ь						
C						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mine	
а						
þ						
С				<u> </u>		
d						
е						
	Complete only for assets s	showing gain in column (h) and own	ed by the foundation on 12/31/69	] (1)	Gains (Col (h) g	ain minus
(i	i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), if any		(k), but not less Losses (from co	than -0-) <b>or</b>
а		<del>-</del>				·
b		<u>-</u>				
С		•				
d						
е						
			f gain, also enter in Part I, line 7			
2 C	Capital gain net income or		f (loss), enter -0- in Part I, line 7	2		
3 N	let short-term capital gain	or (loss) as defined in sections 1				
	· · · · · · · · · · · · · · · · · · ·	, ,	tructions) If (loss), enter -0- in			
				3		
			educed Tax on Net Investment I	ncome		
			ne section 4940(a) tax on net invest		me )	
,1 01	optional use by domestic	private roundations subject to tr	ie section 4540(a) tax on het invest	ment moo	1110.)	
fec	ection 4940(d)(2) applies,	leave this part blank				
1 50	sction 4540(u)(z) applies,	leave this part blank				
Mar	s the foundation liable for t	the section 4042 toy on the distri	butable amount of any year in the b	one norie	<b>ل</b> م	7 V [ N-
			butable amount of any year in the b	ase peno	u?	」Yes ∐_ No
		not qualify under section 4940(e)				
<u> </u>		ount in each column for each yea	r; see the instructions before making	g any entr	4.15	
	(a) Base period years	(b)	- (c)		(d) Distribution r	
Cale	endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col. (b) divided by	y col (c))
	2012			ļ		
	2011			ļ		
	2010			1		
	2009			ļ		
	2008			ļ <b>.</b>		
			<del></del> : <del>-</del>	1 I -		
2 7	Total of line 1, column (d)			2	_	
			le the total on line 2 by 5, or by the	2		
3 /	Average distribution ratio t	for the 5-year base period - divid	le the total on line 2 by 5, or by the	3	·	
3 /	Average distribution ratio t	for the 5-year base period - divid	le the total on line 2 by 5, or by the ss than 5 years			
3 <i>/</i>	Average distribution ration from the found of the found o	for the 5-year base period - divid lation has been in existence if les	le the total on line 2 by 5, or by the ss than 5 years	3		
3 / 1	Average distribution ration from the found of the found o	for the 5-year base period - divid lation has been in existence if les	le the total on line 2 by 5, or by the			
3 / 1	Average distribution ratio for number of years the found Enter the net value of non-	for the 5-year base period - divid lation has been in existence if les	le the total on line 2 by 5, or by the ss than 5 years	3		
4 E	Average distribution ration from the found of the found o	for the 5-year base period - divid lation has been in existence if les charitable-use assets for 2013 fr	le the total on line 2 by 5, or by the ss than 5 years	3		
4 E 5 !	Average distribution ratio for number of years the found Enter the net value of non- Multiply line 4 by line 3 Enter 1% of net investmen	for the 5-year base period - dividitation has been in existence if les charitable-use assets for 2013 from the income (1% of Part I, line 27b)	le the total on line 2 by 5, or by the ss than 5 years	3 4 5		
4 E 5 !	Average distribution ratio for number of years the found Enter the net value of non- Multiply line 4 by line 3 Enter 1% of net investmen	for the 5-year base period - dividitation has been in existence if les charitable-use assets for 2013 from the income (1% of Part I, line 27b)	te the total on line 2 by 5, or by the ss than 5 years	3 4 5 6		

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Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctions	<u>s)</u>				
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1							
	Date of ruling or determination letter: (attach copy of letter if necessary - see instructions)		-					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0				
	here and enter 1% of Part I, line 27b							
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of J Part I, line 12, col. (b).							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2							
3	Add lines 1 and 2 3			0				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0				
6	Credits/Payments							
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a							
	Exempt foreign organizations - tax withheld at source							
C	Tax paid with application for extension of time to file (Form 8868) 6c							
d	Backup withholding erroneously withheld							
7	Total credits and payments Add lines 6a through 6d			0				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid							
11	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ Refunded ▶ 11							
Pai	t VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No				
	or intervene in any political campaign?	1a		X				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			١				
	definition)?	1b		X				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or							
	distributed by the foundation in connection with the activities		-	x				
	c Did the foundation file Form 1120-POL for this year?							
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year							
	(1) On the foundation >\$ (2) On foundation managers >\$							
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on							
	foundation managers > \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х				
	If "Yes," attach a detailed description of the activities							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,							
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X				
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Α.				
Ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		v				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х				
	If "Yes," attach the statement required by General Instruction T.							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either							
	By language in the governing instrument, or	l i						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	_	х					
_	with the state law remain in the governing instrument?	-6	X					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7		$\vdash$				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)							
	MT,OH,							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	0.	х					
	of each state as required by General Instruction G? If "No," attach explanation	8b		<del>                                     </del>				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or							
	4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete		х					
	Part XIV.	9						
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and	4.		x				
	addresses	10   Form 99	A DE	l .				

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013? | 4b | X
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4a

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . . . . .

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

Х

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Total number of other employees paid over \$50,000

Form 990-PF (2013) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation ATCH 5 128,338. Total number of others receiving over \$50,000 for professional services . Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc 1 CHRISTIAN RETREATS - SEE FOOTNOTE 169,024. Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE All other program-related investments. See instructions 3 NONE

Total. Add lines 1 through 3

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169,024.

169,024.

3a

3b

4

Amounts set aside for specific charitable projects that satisfy the:

Cash distribution test (attach the required schedule)

Suitability test (prior IRS approval required)

qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Form 990-PF (2013) Page 9 Part XIII Undistributed Income (see instructions) (a) (b) Years prior to 2012 2012 2013 Corpus Distributable amount for 2013 from Part XI, Undistributed income, if any, as of the end of 2013 a Enter amount for 2012 only ...... Total for pnor years 20\_\_\_\_\_,20\_\_\_\_,20\_\_\_ Excess distributions carryover, if any, to 2013. a From 2008 ..... From 2009 . . . . . . From 2010 . . . . . . **d** From 2011 . . . . . . From 2012 . . . . . . Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ a Applied to 2012, but not more than line 2a . . . Applied to undistributed income of prior years (Election required - see instructions)..... Treated as distributions out of corpus (Election required - see instructions) . . . . . . . . . . . Applied to 2013 distributable amount e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income Subtract line 4b from line 2b Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . . . . . Subtract line 6c from line 6b Taxable amount - see instructions . . Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2013 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014 ...... Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2008 not 8 applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a Analysis of line 9 Excess from 2009 . . . Excess from 2010 . . . c Excess from 2011 . . . d Excess from 2012 . . .

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e Excess from 2013

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Part XV Supplementary Information				
3 · Grants and Contributions Paid Dur	ing the Year or Appl			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year	1			
WORD OF LIFE	NONE	PC	I PHONE DONATION	555.
PO BOX 600				
<b></b>				
SCHROON LAKE, NY 12870-0600				
-				
Total			▶ 3a	555.
<b>b</b> Approved for future payment				
Total			▶ 3b	

Page **12** 

Part XVI-	A Analysis of Income-Produ	cing Activ	vities			
	ter gross amounts unless otherwise indicated Unrelated business income Excluded by section 512, 513, or 514			(e)		
	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•		<del></del> -		· <del>  </del>		(See Ilistructions )
		-				-
f						
g Fees	and contracts from government agencies	_				
2 Members	ship dues and assessments					
	n savings and temporary cash investments			ļ		
	s and interest from securities					
	al income or (loss) from real estate					
	financed property			ļ		
	lebt-financed property					
	income or (loss) from personal property .		-	1		
	vestment income					
	oss) from sales of assets other than inventory					<del></del>
	me or (loss) from special events					
	rofit or (loss) from sales of inventory					· · · · · · · · · · · · · · · · · · ·
	venue a					
				+		
				<del> </del>		
e	Add columns (b), (d), and (e)			<del>- </del>		
	id line 12, columns (b), (d), and (e)				42	
	neet in line 13 instructions to verify calci					
Part XVI-			complishment of Ex	cempt Purp	oses	
Line No.	Explain below how each activit					stad impartantly to the
	accomplishment of the foundation				· · ·	•
	accomplishment of the foundation	on a cacinp	t parposes (other than	by providing	g fullus for such purpose.	s). (Occ matructions.)
					2.00	<u> </u>
					_	
			<del></del> .			
			<del></del>			
			<del></del>		· <del></del>	<del></del>
	-	_		_		

Part XVII	Information Regarding T	ransfers To and	Transactions and	Relationships \	With Noncharitable
	Exempt Organizations				

		Excilipt Orgai	IIZUUVIIS								
1 .	Did the	organization direct	ly or indirectly	engage in any of the follo	wing with	h any other orga	nization d	described		Yes	No
	in sect	ion 501(c) of the Co	de (other than	section 501(c)(3) organization	ations) or	ın section 527, r	elating to	political			
	organiz	rations?		·							
а	Transfe	ers from the reportin	ig foundation to	o a noncharitable exempt o	rganızatio	on of:					
									1a(1)		X
	(2) Oth	ner assets							1a(2)		X
		ransactions:									
	(1) Sal	es of assets to a no	ncharitable exe	empt organization					1b(1)		<u> </u>
	(2) Pur	chases of assets fro	om a noncharit	able exempt organization .					1b(2)		X
				r assets					1b(3)		X
									1b(4)		X
	(5) Loa	ans or loan guarantee	es						1b(5)		X
				hip or fundraising solicitatio					1b(6)		X
				sts, other assets, or paid en					1c		<u> </u>
		_		es," complete the following	-			-			
				vices given by the reporting agement, show in column							
(a) Lı		(b) Amount involved		noncharitable exempt organization		Description of transf					
(a) Li	IIE IIO	N/A	(c) Name of	Honoramable exempt organization	<u>_</u> `	/A	cis, uansaci	uons, and snai	ing ana	ngeme	
		N/A			1	<i>,</i> n					
			<del> </del>								
					+						
				. =							
							-				
							_				
						<u> </u>					
2a	ls the	foundation directly	or indirectly a	ffiliated with, or related to	, one or	more tax-exempt	organız	ations		_	_
		, ,	•	other than section 501(c)(3	)) or in se	ection 527?		l	Ye	es X	No
b	If "Yes	," complete the follo	wing schedule	1							
		(a) Name of organization	n	(b) Type of organizat	ion		c) Descript	ion of relations	hip		
	_										
								. <del>.</del>			
	144	a nonelline of the		mand this entire includes access		n and atstances : :	o the book	of my tracided:	0 004 *	olice	, te
	correc	t, and complete Declaration of	are that I have examinate than	nined this return, including accompan taxpayer) is based on all information of	which prepare	er has any knowledge	o the best o	or my knowledg	e and b	Jeller, II	is true,
Sigr	1 <b>  b</b> ,		(m)	1.2-26-17	<b>/ b</b> -	Tartes		May the IRS			
Here	e   🔑	nature of officer or trustee	ees _	Date Date	Tıtle	rustee		with the pr	· [77	л г	
	Sigi	rature of officer or trustee		Date	Title			(see instruction	s)? <u>X</u>	Yes [	No
		Print/Type preparer's na	nme	Preparer's signature		Date	T <sub>01</sub> .	eck of F	PTIN		
Paid		Type property and		Harris D. Will	(Ps		Che 13∙29 se	~~ ··	P000:	3249	8
Pre	oarer	Firm's name	ROWE HORWA			2017.03.10 13.	Firm's EIN				
-	Only			ST. SUITE 400			rums EIN	- 33-03	. 2 1 0 0		
<b>-</b> 55	J.111y		KHART, II			46516-3115	Phone no	574-29	95-14	991	
		I		-		10010 0110	FIIOHO NO		m <b>99</b> (		(2013)
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### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

### **Schedule of Contributors**

OMB No 1545-0047

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Employer identification number

BURNT FORK MINISTRY	<sup>r</sup>	20-0065328
Organization type (check o	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a pri	vivate foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private	e foundation
	501(c)(3) taxable private foundation	
	50 1(c)(3) taxable private foundation	
property) from an	on filing Form 990, 990-EZ, or 990-PF that received, during the year, by one contributor. Complete Parts I and II.  (c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % s	
under sections 50	09(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, of \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or	during the year, a contribution of
during the year, t	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received otal contributions of more than \$1,000 for use exclusively for religious proses, or the prevention of cruelty to children or animals. Complete F	s, charitable, scientific, literary,
during the year, of not total to more year for an exclus	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receives contributions for use exclusively for religious, charitable, etc., purposes than \$1,000. If this box is checked, enter here the total contributions excly religious, charitable, etc., purpose. Do not complete any of the paganization because it received nonexclusively religious, charitable, etc.	s, but these contributions did that were received during the earts unless the <b>General Rule</b> ., contributions of \$5,000 or
990-EZ, or 990-PF), but it n	at is not covered by the General Rule and/or the Special Rules does nust answer "No" on Part IV, line 2, of its Form 990; or check the box, to certify that it does not meet the filing requirements of Schedule B (	on line H of its Form 990-EZ or on its

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

vame or o	organization BURNI FORK MINISTRY		Employer identification number 20-0065328
Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	PO BOX 29  STEVENSVILLE, MT 59870	\$ <u>80,300.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	KAY A. CREECH  PO BOX 29  STEVENSVILLE, MT 59870	\$80,300.	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   \$ 	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$   \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		·   ·   \$	Person Payroll Noncash (Complete Part II for

Name of organization BURNT FORK MINISTRY

Employer identification number

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Part II	Noncash Property (see instructions). Use duplicate copies of Pa	irt II if additional space is nee	ded.
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<b></b>		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	<b></b>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<b>-</b>		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
	<u> </u>	<u> </u>	<u> </u>

Name of organization BURNT FORK MINISTRY

Employer identification number

20-0065328

exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizatio	ns
hat total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.	

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

No. 1	duplicate copies of Part III if additi	onal space is needed.		
No. om irt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how g	ft is held
		(e) Transfer of gift		
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transfere	<del></del>
	<b></b>			
				<b></b>
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how g	ift is held
				<del>-</del> -
		(e) Transfer of gift		
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transfere	<b>e</b>
	<b></b>			. <b>-</b>
No.			40.5	
rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how g	m is neid
				<del>-</del>
<u> </u>		(e) Transfer of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transfere	e
				<b></b>
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how g	lft is held
rt I				
			·	
		(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
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PART	
990PF,	
FORM	

CHARITABLE PURPOSES	1,715.	1,715.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	1,715.	1,715.
		TOTALS
DESCRIPTION	LEGAL FEES	

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# FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	2,040.	2,040.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	2,040.	2,040.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

- OTHER EXPENSES FORM 990PF, PART I

REVENUE AND	EXPENSES	PER BOOKS	1,501.	128,339.	205.	771.	8,595.
		DESCRIPTION	ADVERTISING AND PROMOTIONAL	CONTRACT SERVICES	DUES & FEES	INSURANCE	MEALS & ENTERTAINMENT

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CHARITABLE PURPOSES 1,501. 128,339. 205. 771.
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139,411.

139,411.

TOTALS

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AND TRUSTEES	
DIRECTORS,	
OFFICERS,	
- LIST OF	
PART VIII	
FORM 990PF,	

BURNT FORK MINISTRY

ADDRESS	
AND	
VAME	

### TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

KAY A. CREECH PO BOX 29 STEVENSVILLE, MT 59870

SECRETARY/TREASURER

0

RANDOLPH S. CREECH PO BOX 29

STEVENSVILLE, MT 59870

1.00 PRESIDENT

0

ROSS SHOE
PO BOX 29
STEVENSVILLE, MT 59870

VICE PRESIDENT 1.00

0

GRAND TOTALS

ATTACHMENT 4

### 990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

ATTACHMENT 5

NAME AND ADDRESS

TYPE OF SERVICE

COMPENSATION

BURNT FORK, LLC PO BOX 29 STEVENSVILLE, MT 59870 MANAGEMENT SERVICES

128,338.

TOTAL COMPENSATION

128,338.

### FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

KAY A. CREECH RANDOLPH S. CREECH

### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

KAY A CREECH PO BOX 29 STEVENSVILLE, MT 59870 406-777-1670

### 990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

THE SERVICES WILL BE OFFERED TO PASTORS, MISSIONARIES, CHURCH WORKERS, CHRISTIAN EDUCATORS AND ORGANIZATIONS WHO WILL BENEFIT FROM THE FOUNDATION'S PROGRAMS OF RETREAT, EDUCATION, PRAYER, TRAINING AND SPIRITUAL RENEWAL. THE ONLY CRITERIA FOR SELECTION IS THAT THE RECIPIENT BE AN INDIVIDUAL OR ORGANIZATION INVOLVED WITH MINISTRY SUPPORT IN ONE OF THESE CAPACITIES.

### FEDERAL FOOTNOTES

### PART IX-A - SUMMARY OF DIRECT CHARITABLE ACTIVITIES

CHRISTIAN RETREATS - RETREATS PROVIDED TO PASTORS, MISSIONARIES, CHURCH WORKERS AND CHRISTIAN EDUCATORS AS A TIME OF EDUCATION, PRAYER, REST, RELAXATION AND RENEWAL. THE ORGANIZATION ALSO PLANS GROUP ACTIVITIES AND ARRANGES SPEAKERS. BURNT FORK MINISTRY HOSTED 314 PARTICIPANTS IN 2011. THE FACILITIES ARE ALSO PROVIDED TO NONPROFIT RELIGIOUS ORGANIZATIONS WHO COME WITH THEIR OWN AGENDA.

SINCE THE MISSION OF THE ORGANIZATION IS TO PROVIDE A PLACE OF RETREAT FOR THOSE INVOLVED IN MINISTRY, THE SERVICES PROVIDED BY BURNT FORK LLC ARE ASSISTING THE FOUNDATION WITH ACHIEVING THIS MISSION. BURNT FORK LLC SERVICES INCLUDE MANAGERIAL, SUPERVISORY SERVICES OVER THE ACTIVITIES AT THE RANCH, ACCOUNTING AND CONSULTING SERVICES.

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