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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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<u> </u>	For the 2	013 cale	endar year, or tax year beginning January 1 , 2013, and er	nding	Decembe		, 20 13					
В	Check if ap	plicable	C Name of organization Christian Training and Missionary Fellowship	ID!	D Employer identification number							
	Address ch	ange	Doing Business As Chrsitain Translator\s Fellowship (Only in Philippine		23-2150107							
	Name chan	ige	Number and street (or P O box if mail is not delivered to street address)	m/suite	ET	E Telephone number						
	Initial return	•	P.O. Box 1128				(207)2457811					
\Box	Terminated	Color to the state of the state										
$\overline{\Box}$	Amended r		G	Gross re	eceipts \$	207679						
\exists	Application	•	Madisonville, KY 42431-2430 F Name and address of principal officer	H			subordinates? Yes					
	Application	pending	, many and a second property of the second pr				s included? Yes	_				
_			✓ 501(c)(3)				list (see instructio					
<u>-</u>	Tax-exemp		1 301(c)(3)		(c) Group exe		•	•				
느	Website:		Corporation		```							
r He			E contraction in the Contraction	ormation	'	vi State	of legal domicile	NJ				
L		Summ						<u></u>				
	1	•	escribe the organization's mission or most significant activities: The		-							
Governance	<u>jo</u>	cal Chu	urches in the Philippines and to help to train young men and women for	the minis	stry. This is	s done	by being involve	ved in				
ā			s, Conferences, Teaching at the Seminary and holding Pastor's retreats.									
ē	2 C	heck th	his box $ ightharpoonup$ if the organization discontinued its operations or disposi	ed of mo	ore than 25	% of	its net assets.					
ő	3 N	lumber	of voting members of the governing body (Part VI, line 1a)			3		4				
	4 N	lumber	of independent voting members of the governing body (Part VI, line	1b) .		4		4				
ies	5 T	otal nur	mber of individuals employed in calendar year 2013 (Part V, line 2a)			5	•	1				
Activities &	6 T	otal nur	mber of volunteers (estimate if necessary)			6		5				
ğ	l)		related business revenue from Part VIII, column (C), line 12			7a		0				
•	1		elated business taxable income from Form 990-T, line 34		,	7b						
	 	ot armo	Material Submitted Control of the Co		Prior Year		Current Ye	ear				
	8 C	ontribu	itions and grants (Part VIII, line 1h)	$\backslash \vdash$	22	1,440		207,106				
£3/	1		itions and grants (Part VIII, line 1h)	<u>نلا</u>		0		207,100				
]			ent income (Part VIII, column (A), lines 3, 4, and 7d)	/ % /								
⊋ō ZD⊲	10 Ir	ivesime	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 40c, and 11e)	:\\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		433		573				
7	11 0	ther rev	venue (Part VIII, Column (A), lines 5, 60, 80, 90, 400, and 11e)			0		0				
<u>-</u>			enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12		_	1,873		207,679				
•			and similar amounts paid (Part IX, column (A), lines 1-3)R	S	13	1,502		102,198				
•	14 B	enefits	paid to or for members (Part IX, column (A), line 4)			0		0				
es.	15 S	alarıes,	other compensation, employee benefits (Part IX, column (A), lines 5, 10))		69350		47,684				
Expenses	16a P	rofessio	onal fundraising fees (Part IX, column (A), line 1(1e)	·	-	0		0				
ĝ	b T	otal fun	ndraising expenses (Part IX, column (D), line 25)			Α,	· The 12	2 3 16 12				
Ü	17 0	ther ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	· L	4	5,886		77,273				
	18 T	otal exp	penses. Add lines 13-17 (must equal Part IX, column (A), line 25)		24	6,738		227,155				
	19 R	evenue	e less expenses. Subtract line 18 from line 12		(-14	4,865)		(-19,476)				
ts or	3			Begini	ning of Currer	nt Year	End of Ye	ar				
ets	20 T	otal ass	sets (Part X, line 16)	. $lacksquare$	1,75	4,964		1,646,208				
ASS	21 T		pilities (Part X, line 26)	. 🗀		0		0				
Net Asset	22 N		ets or fund balances. Subtract line 21 from line 20		1.75	4,964		1,646,208				
	art II		ture Block			.,		.,,				
			ury, I declare that I have examined this return, including accompanying schedules and s	statements	and to the b	est of r	ny knowledge and	belief it is				
tru	ie, correct, a	and comp	olete Declaration of preparer (other than officer) is based on all information of which pre	parer has a	any knowledg	е	, tillottiougo una	20				
_			CH. D. C. R. H. A. D. C.			110	4/14					
Sid	an	Sign	nature of officer		Date		7777					
Sign Here		,	Secretary									
• • •			e or print name and Mite									
		, ,,	ype preparer's name Preparer's signature	Date			PTIN					
Pa	aid	' '''''	ypo proparot o timito			Check self-em	n					
	eparer	ļ		_L			picyeu					
U	se Only				Firm's I							
_			address >		Phone	no	F					
_			ss this return with the preparer shown above? (see instructions)	<u> </u>		<u> </u>	Yes					
Fo	r Paperwo	rk Redu	uction Act Notice, see the separate instructions.	Cat No 112	282Y		Form \$	990 (2013)				

Part	Checklist of Required Schedules			age
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	2	1	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	3		✓
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		√
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	_	√
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		√
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
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		√
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		√
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	>	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓_
	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	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		√
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		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓	
J	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	√	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	>	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	1	
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_		✓
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		√
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 Organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19		✓
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
<u></u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Form 99	0 (2013)		ļ	Page 4
Part	Checklist of Required Schedules (continued)			
•	Dut the assessment assess the AF 000 of greate as other assistance to any demostra arganization or		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or 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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		✓
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . 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	24d 25a		√
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		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		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			1.7
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
ь	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	_	✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R</i> ,	27		1
38	Part VI	37	1	
		1 20	<u> </u>	

Part	V Statements Regarding Other IRS Filings and Tax Compliance		_	
	Check if Schedule O contains a response or note to any line in this Part V	· · ·		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		ļ	
_	reportable gaming (gambling) winnings to prize winners?	1c		ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			اــــا
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	✓_	<u> </u>
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		-
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		_
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	_35		
Tu	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	✓	
b	If "Yes," enter the name of the foreign country: ▶ Philippines			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		!	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
_	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b	<u> </u>	ļ
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
a	and services provided to the payor?	7a		√
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	-
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
_	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u></u>
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			
0	organization, have excess business holdings at any time during the year?	8		<u> </u>
9 a	Did the organization make any taxable distributions under section 4966?	9a	 -	لــــا
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		Į	
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	-
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	'		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10-	 -	-
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		 -
b	Enter the amount of reserves the organization is required to maintain by the states in which	'	1	
-	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1	1	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	/
h	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an evolunation in Schodulo O	14h		l —

Part	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. S			
	Check if Schedule O contains a response or note to any line in this Part VI			<u> </u>
Section	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
ь	Enter the number of voting members included in line 1a, above, who are independent . 1b 5	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		√
3	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_		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓_
6	Did the organization have members or stockholders?	6		✓_
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	-	$\overline{}$
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
þ	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	10b		
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	√	
b 100	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		-
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
С	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14		1
15	Did the process for determining compensation of the following persons include a review and approval by	<u> </u>		\vdash
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		√
b	Other officers or key employees of the organization	15b		✓
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		/
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		[
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
<u> </u>	organization's exempt status with respect to such arrangements?	16b	L	<u> </u>
	on C. Disclosure	-		
17 18	List the states with which a copy of this Form 990 is required to be filed ► NA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501	(0)(3)	onka
10	available for public inspection. Indicate how you made these available. Check all that apply.	. 5011	(U)(U)S	orny)
	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.	erest	policy	y, and
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	•	
	organization: ► Finel Bradley 442 Sung St. Madisonville KV 42431 Tel # 270-245-7811			

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Daga	•
raue	

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

Check if Schedule O contains a response or note to any line in this Part VII						
Check if Schedule O contains a response of hote to any line in this Part VII	-	 •	•	•	 •	ய

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Check this box if neither the organization no	r any relate	a org	anız	atic	n c	ompe	nsa	ited any curren	it officer, director	r, or trustee.	
				((C)						
(A)	(B)	١	Position				(D)	(E)	(F)		
Name and Title	Average	(do not check more than one box, unless person is both an				Reportable	Reportable	Estimated			
	hours per					or/trus		compensation	compensation from	amount of	
	week (list any hours for	95	3	0	Ž	욕포	Ī	from	related	other	
	related	호호	St #	Officer	ey e	[호호	Former	the organization	organizations (W-2/1099-MISC)	compensation from the	
	organizations	햧	lĕ	4	Ĕ	yes	1	(W-2/1099-MISC)		organization	
	below dotted	4 =	ᆲ		Key employee	Ψÿ				and related	
	line)	Individual trustee or director	Institutional trustee		8	Pen				organizations	
		Ф.	ê			Highest compensated employee					
			ļ			ă.					
(4)									1		
(1) Rev. William A. Ebert, President				,				}			
				✓	_		<u> </u>	0	0		0
(2) Rev. daniel Ebert IV, Vice President				1							_
(2) see 5th t Be die 6 (T							┝	0	0		0
(3) Mrs. Ethel Bradley, Secretary / Treasurer			l	/				_			_
	<u> </u>		 	V			-	<u> </u>	0	<u> </u>	0
(4) Mrs. Ruth Von Kohn, Board Member	ļ	1					Ì		_		
		. •	-					0	0		0
(5) Rev. Lawrence Richardson, Board Member	}	,						_			
(0)	 	✓	-	-		 	-	0	0		0
(6)	 										
/7\			<u> </u>	-							_
(7)											
(0)				_		<u> </u>	_				_
(8)						l ,					
(0)	<u> </u>		<u> </u>								_
(9)											
(40)			 			-					_
(10)											
(44)			\vdash							<u> </u>	
(11)											
(12)										<u> </u>	_
(12)											
(13)	1			_		<u> </u>					
110/	 										
(14)											_
(14)										1	

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees	s, aı	nd H	lighe	st C	ompensated E	mployees (c	ontinu	ed)	
			ļ		•	C)							
	(A)	(B)	(B) Position (do not check more than one				оле	(D)	(E)		(F)		
	Name and title	Average	box,	unles	ss pe	rson	is both	n an	Reportable	Reportable		Estimated	
		hours per week (list any	 	er and	_	_	or/trust	τ÷	compensation from	compensation related	trom	amount of other	
		hours for	Individual trustee or director	Inst	Officer	Key employee	흙플	Former	the	organization		compensation	
		related organizations	lrec ≤	喜	हि	e e	l oy lest	ह	organization	(W-2/1099-MI	SC)	from the	
		below dotted	οί≅	92		8	8 8		(W-2/1099-MISC)			organization and related	
		line)	l st	1		yee	l pe					organizations	
			8	Institutional trustee			Highest compensated employee	ŀ	ľ				
				Ľ	L		8						
(15)													
						<u> </u>					\dashv		
(16)													
						L.					\perp		
(17)													
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(18)					ŀ								
4			<u> </u>	L			<u> </u>	ļ					
(19)													
40.01			 		ļ		<u> </u>	<u> </u>					_
(20)													
(04)			-				ļ	-					_
(21)													
(00)				-	-	_	 	-					
(22)								i					
(02)						-	 	├-					_
(23)		ļ							•				
(0.4)											-		_
(24)													
(05)					-			-	··· — –				
(25)													
1b	Sub-total	L					L	_			_		_
C	Total from continuation sheets to Part			•	•		•		0		0		0
d	Total (add lines 1b and 1c)	•		•	•		•		0		0		0
<u>u</u>	Total number of individuals (including but							· · · ·		ore then \$10	0 000	-6	C
_	reportable compensation from the organi		1 (0 (1)	USE	: 1150	eu a	abuve	3) W	no received mi	ore man \$10	0,000	OI	
	Toportable compensation from the organi	Zation							· 			Yes No	_
3	Did the organization list any former of	ficer. direc	tor. o	r tr	uste	е.	kev e	ame	lovee, or high	est compen	sated	103 110	<u>,</u>
Ŧ	employee on line 1a? If "Yes," complete	Schedule J	for su	ıch	ındı	vidu	.al					3 /	_
4	For any individual listed on line 1a, is the							n a	nd other comp	ensation fro	m the		
•	organization and related organizations												.:
												4	_
5	Did any person listed on line 1a receive of	r accrue co	omper	nsat	tion	fror	m anv	un	related organiz	ation or indi	vidual		_
	for services rendered to the organization								•			5 1	
Section	on B. Independent Contractors							-					-
1	Complete this table for your five highest	compensate	ed inc	depe	end	ent	contr	acto	ors that receive	ed more than	\$100	.000 of	_
	compensation from the organization. Rep												
	year.							_	_		Ū		
	(A)			-		-			(B)			(C)	_
	Name and business add	ress							Description of s	ervices	C	Compensation	
NA													_
													_
													_
													_
									· -				_
2	Total number of independent contractor							th	ose listed abo	ove) who	· ·	.,	-
	received more than \$100,000 of compens	sation from	the o	rgar	nizat	tion			0	'			

	990 (201 t VIII		enue					Page 9
		Check if Schedule C		ponse or note to	O any line in this (A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
8 8	1a	Federated campaigns	s 1a			function revenue	revenue	under sections 512-514
Grants nounts	ь	Membership dues .		0				
	1	Fundraising events .		0				
fts,	d	Related organizations		0				
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (cor		0				
Sir	f	All other contributions, g	· —	<u>_</u>				
iğ je	'	and similar amounts not in		207 106 02				
はいる		Noncash contributions include		207,106.03				
E E	g	Total. Add lines 1a-1			207,106.03			
	- "-	Total: Add lines 1a-1	<u> </u>	Business Code	201,106.03			
Program Service Revenue	2a							
ě	b							
8	c							
ΘZ	ď					-		
S	e	***************************************						
g	f	All other program ser						
Po	g	Total. Add lines 2a-2			0			
	3	Investment income	(including divid	ends, interest,				
		and other similar amo		•	573	o	0	573
	4	Income from investmen	t of tax-exempt be	ond proceeds ▶	0	0	0	0
	5				0	0	0	0
		•	(i) Real	(II) Personal				-
	6a	Gross rents	0	0				•
	b	Less: rental expenses	0	0				
	С	Rental income or (loss)	0	0				
	d	Net rental income or	(loss)	▶	0	0	0	O
	7a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	0	0				
	b	Less. cost or other basis						
		and sales expenses .	0	0				
	С	Gain or (loss)	0	0	·			
	d	Net gain or (loss) .		<u> ▶</u>	0	0	0	0
ø.								
Ž	8a	Gross income from fu	ındraısıng					
Š		events (not including \$						
Æ		of contributions reporte						
Other Revenue		See Part IV, line 18 .		0				
5		Less: direct expenses						
		Net income or (loss) f		events . >	0		0	0
	ya.	Gross income from ga						
		See Part IV, line 19 .						
		Less: direct expenses						
		Net income or (loss) f		vities ▶	0	0	0	0
	iva	Gross sales of in returns and allowance				1		
	_		_	-		İ		
		Less: cost of goods s Net income or (loss) f		ontony •	 -			
	- -	Miscellaneous F		Business Code	0	0	0	
	44-	IVIISCEIIdHEOUS F		Duaniesa Coue	<u>-</u> -			
	11a				0			
	b				0			<u> </u>
	d	All other revenue .			0			
	e	Total. Add lines 11a-		•	0			
	12	Total revenue See II			207 670 03			

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	ll other organization	s must complete co	lumn (A).
	Check if Schedule O contains a respon	se or note to any lir			<u> </u>
	t include amounts reported on lines 6b, 7b, o, 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	0			
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	102,198.08	102,198.08		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	0	0	0	
6	Compensation not included above, to disqualified	0			
J	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	o	اه	٥	c
7	Other salaries and wages	41,214.76	0	41,214.76	· · · · · · · · · · · · · · · · · · ·
8	Pension plan accruals and contributions (include			•	
	section 401(k) and 403(b) employer contributions)	o	o	ol	(
9	Other employee benefits	5,260.09	0	5,260.09	
10	Payroll taxes	1,209.04		1,209.04	
11	Fees for services (non-employees):				
а	Management	0	0	0	C
b	Legal	299.01	0	299.01	O
С	Accounting	1,475.89	0	1,475.89	0
d	Lobbying	0	0	0	
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	9
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)			_	_
40		0	0	0	
12	Advertising and promotion	0	0	2 000 20	
13 14	Office expenses	3,000.20	0	3,000.20	
15	Royalties	0	0	0	
16	Occupancy	10,067.15	0	10,067.15	
17	Travel	21,614.93	0	21,614.93	
18	Payments of travel or entertainment expenses	21,011.00		2.7000	· · · · · · · · · · · · · · · · · · ·
	for any federal, state, or local public officials	o	o	o	(
19	Conferences, conventions, and meetings .	0	0	0	0
20	Interest	0	0	0	
21	Payments to affiliates	0	0	0	
22	Depreciation, depletion, and amortization .	15,383	0	15,383	
23	Insurance	10,749	0	10,749	
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.)				
а	office equipment	6,987.61	0	6,987.61	
b	Books & ebooks	1,074.58	0	1,074.58	
C	Guards	5,015.96		5,015.96	
d		0	0	0	
е	All other expenses Miscellaneous	1,606.03	0	1,606.03	
25	Total functional expenses. Add lines 1 through 24e	227,155.32	102,198.08	124,957.24	
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)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	t X		
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	20,860	1	30,875
	2	Savings and temporary cash investments [529,984	2	499,663
	3	Pledges and grants receivable, net	0	3	
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
इं		organizations (see instructions). Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
ä	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	0	9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 1,279,348			
	b	Less: accumulated depreciation 10b 163,678	1,204,120	10c	1,115,670
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,754,964		1,646,208
	17	Accounts payable and accrued expenses	0	17	0
	18	Grants payable	0	18	0
	19	Deferred revenue	0		0
	20	Tax-exempt bond liabilities	0		0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors,			
Ħ		trustees, key employees, highest compensated employees, and			
iat		disqualified persons. Complete Part II of Schedule L	0	22	0
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	0		0
	26	Total liabilities. Add lines 17 through 25	0	26	0
Ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
ă	27	Unrestricted net assets		27	
3al	28	Temporarily restricted net assets	<u> </u>	28	
힏	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
Š	30	Capital stock or trust principal, or current funds	550,844	30	530,538
set	31	Paid-in or capital surplus, or land, building, or equipment fund	1,204,120		1,115,670
As	32	Retained earnings, endowment, accumulated income, or other funds.	1,204,120	32	1,115,670
<u>e</u>	33	Total net assets or fund balances	1,754,964	33	1,646,208
~	34	Total liabilities and net assets/fund balances	1,754,964		1,646,208
_			.,,		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Page LZ

•						<u> </u>
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				<u></u>	1
1	Total revenue (must equal Part VIII, column (A), line 12)	1			20	7,679
2	Total expenses (must equal Part IX, column (A), line 25)	2			22	<u> 7,155</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			(-19	9,476)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			1,75	4,964
5	Net unrealized gains (losses) on investments	5				0
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			(-8	9,280)
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10			1,64	16,208
Part	XII Financial Statements and Reporting				_	
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>				
			_		Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☐ Accrual ☐ Other		_			Ì
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın	ın			1
	Schedule O.		_			
2a	, , , , , , , , , , , , , , , , , , , ,			2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	oiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		L			
b	Were the organization's financial statements audited by an independent accountant?		. L	2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on	а			
	separate basis, consolidated basis, or both:				,	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		<u> </u>			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o					
	of the audit, review, or compilation of its financial statements and selection of an independent account	ıntant	? [2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın	ın 🗍			
	Schedule O.		_			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	ın			
	the Single Audit Act and OMB Circular A-133?		. [3a		✓_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	-				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udıts.		3b		
				Form	990	(2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

20**13**

Open to Public

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

ww.irs.gov/form990. Inspection

Employer identification number Name of the organization 23-2150107 Christian Training and Missionary Fellowship Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). [7] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to 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. **b** Type II c Type III-Functionally integrated **d** Type III-Non-functionally integrated 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). If the organization received a written determination from the IRS that it is a Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and No 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (iv) Is the organization (ii) EIN (III) Type of organization (v) Did you notify (i) Name of supported (vi) Is the (vii) Amount of monetary (described on lines 1-9 in col (i) listed in your the organization in organization in col organization support governing document? col (i) of your above or IRC section (i) organized in the support? (see instructions)) Yes No Yes No Yes No (A) (B) (C) (D) (E)

Part	(Complete only if you checked th	e box on line	5, 7, or 8 of	Part I or if the	organization	n failed to qua	
<u> </u>	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
	on A. Public Support dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
Calen	Gifts, grants, contributions, and	(a) 2009	(b) 2010	(6) 2011	(u) 2012	(6) 2013	(i) Total
'	membership fees received. (Do not						
	include any "unusual grants.")	146165	254052	237964	231440	207106	1,076,727
2	Tax revenues levied for the	140103	204002	20,004	201110	207100	.,,,,,,,,,,
_	organization's benefit and either paid						
	to or expended on its behalf	o	o	o	0	o	0
3	The value of services or facilities		-				
	furnished by a governmental unit to the						
	organization without charge	146165	254052	237964	231440	207106	1,076,727
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
•	each person (other than a					1	
	governmental unit or publicly	,	,				
	supported organization) included on			i			
	line 1 that exceeds 2% of the amount			-			
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
	on B. Total Support			() 0044	(0.0010	4) 0040 T	
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	146165	254052	237964	231440	207106	1,076,727
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources	4.500	050	0.5.5	400	570	4.040
_	Net income from unrelated business	1526	853	855	433	573	4,240
9	activities, whether or not the business						
	is regularly carried on	0	0	o	0	o	0
10	Other income. Do not include gain or						
10	loss from the sale of capital assets						
	(Explain in Part IV.)	0	o	o	0	اه	
11	Total support. Add lines 7 through 10				J		1,080,967
12	Gross receipts from related activities, etc.	. (see instruction	ons)			12	.,000,007
13	First five years. If the Form 990 is for th			d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop her				=		
Secti	on C. Computation of Public Suppor	t Percentag	e				
14	Public support percentage for 2013 (line 6	6, column (f) dı	vided by line 1	1, column (f))		14	94 %
15	Public support percentage from 2012 Sch	nedule A, Part	II, line 14 .			15	91 %
16a	331/3% support test-2013. If the organiz						
	box and stop here. The organization qual	-		_			. ▶ ☑
b	331/3% support test—2012. If the organicheck this box and stop here. The organic					15 is 33½% 	or more, . ► □
17a	10%-facts-and-circumstances test - 20						
	10% or more, and if the organization med						
	Part IV how the organization meets the "fa	acts-and-circu	ımstances" tes	st. The organization	ation qualifies	as a publicly s	
	organization						. ▶ 🗆
b	10%-facts-and-circumstances test - 20						
	15 is 10% or more, and if the organizat	tion meets the	"facts-and-ci	rcumstances"	test, check th	ns box and st	op here.
	Explain in Part IV how the organization m	neets the "facts	s-and-circums	tances" test. T	he organizatio	n qualifies as a	publicly
	supported organization	· · · ·					. ▶ 🗆
18	Private foundation. If the organization di	d not check a	box on line 13	, 16a, 16b, 17a	i, or 17b, chec	k this box and	see

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

	an Training and Missionary Fellowship		23-2150107
Par		or Advised Funds or Other Similar Fuvered "Yes" to Form 990, Part IV, line 6	
	Complete if the organization answ	(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		
	funds are the organization's property, subject	-	
6	Did the organization inform all grantees, do		
	only for charitable purposes and not for the	·	· · · ·
		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · Yes · No
Pari		varad "Vas" to Form 000 Part IV line 7	7
	 	vered "Yes" to Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held	recreation or education) Preservation	of an historically important land area
	Protection of natural habitat		of a certified historic structure
	Preservation of open space	Freservation	of a certified flistoric structure
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contribu	tion in the form of a conservation
_	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation eas	sements	2b
С	Number of conservation easements on a cer		
d	Number of conservation easements include	ded in (c) acquired after 8/17/06, and no	ot on a
	historic structure listed in the National Regis		1 1
3	Number of conservation easements modified tax year ▶	d, transferred, released, extinguished, or te	erminated by the organization during the
4	Number of states where property subject to	conservation easement is located ▶	
5	Does the organization have a written polyiolations, and enforcement of the conserva		
6	Staff and volunteer hours devoted to monitor	oring, inspecting, and enforcing conservation	
7	Amount of expenses incurred in monitoring, \$\blue{\subset}\$\$	inspecting, and enforcing conservation ea	sements during the year
8	Does each conservation easement reported (i) and section 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the requirements	
9	In Part XIII, describe how the organization rebalance sheet, and include, if applicable, the organization's accounting for conservation experiences.	e text of the footnote to the organization's easements.	financial statements that describes the
Part	Complete if the organization answ	ections of Art, Historical Treasures, overed "Yes" to Form 990, Part IV, line 8	3.
1a	If the organization elected, as permitted un-		
	works of art, historical treasures, or other public service, provide, in Part XIII, the text of		
b	If the organization elected, as permitted unworks of art, historical treasures, or other public service, provide the following amount	similar assets held for public exhibition, its relating to these items:	education, or research in furtherance o
	(i) Revenues included in Form 990, Part VIII	l, line 1	> \$
_	(ii) Assets included in Form 990, Part X .		▶ \$
2	If the organization received or held works following amounts required to be reported u	under SFAS 116 (ASC 958) relating to these	e items:
a b	Revenues included in Form 990, Part VIII, lin Assets included in Form 990, Part X	ne 1	> \$

Part	III Organizations Maintaining									
3	Using the organization's acquisition, a collection items (check all that apply):	acces	sion, and of	ther reco	ds, chec	k any of th	e follov	wing that are a	signıfıcar	nt use of its
а	☐ Public exhibition	•		d	☐ Loan	or exchang	je prog	rams		
b	☐ Scholarly research			е	☐ Othei	r				
C	☐ Preservation for future generations									
4	Provide a description of the organization	ion's	collections	and expla	an how t	hey further	the org	ganization's exe	empt purp	ose in Part
	XIII.									
5	During the year, did the organization									
	assets to be sold to raise funds rather			ained as p	part of the	e organizati	on's co	Direction? .	· Y	es 🗌 No
Part	Complete if the organization 990, Part X, line 21.			" to Forr	n 990, P	art IV, line	9, or	reported an a	mount or	n Form
1a	Is the organization an agent, trustee,									
	included on Form 990, Part X?								· 🗆 Y	'es □ No
b	If "Yes," explain the arrangement in Pa	art XII	and compl	ete the fo	llowing to	able:			Amount	
_	Decisions belongs						-	_	Airiount	
C	Beginning balance						10			
d	Additions during the year						16			
e f	Ending balance						11			
2a	Did the organization include an amoun				212					'es □ No
b										
Par					.!			<u>.</u>		
	Complete if the organization	ansv	wered "Yes	" to Forr	n 990, F	art IV, line	10.			
		(a)	Current year	(b) Pn	or year	(c) Two year	rs back	(d) Three years ba	ick (e) Fol	ır years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities and programs		,							
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the		-	nd balanc	e (line 1g	ı, column (a	ı)) held	as:		
а	Board designated or quasi-endowmen			%						
b	Permanent endowment ►	%								
С	Temporarily restricted endowment ▶			2001						
0-	The percentages in lines 2a, 2b, and 2 Are there endowment funds not in the				zation the	at are held	and ac	lministered for	tho.	
3a	organization by:	s hos	56221011 Ot 11	le Organi	zauon un	at ale lielu	and ac	iriiinstered ioi	uie	Yes No
	(i) unrelated organizations								. 3a(i)	
	(ii) related organizations								. 3a(ii	1
ь	If "Yes" to 3a(II), are the related organi								. 3b	'
4	Describe in Part XIII the intended uses			•						
Part	VI Land, Buildings, and Equip Complete if the organization			" to For	n 990. F	art IV, line	11a.	See Form 990). Part X.	line 10.
	Description of property		(a) Cost or o			or other basis		Accumulated	· ·	ok value
			(investm	nent)	(0	other)	d	epreciation		
1a	Land									
b	Buildings					1,208,564		102,538		1,106,026
С	Leasehold improvements									
d	Equipment				ļ	70,784		61,140	-	9,644
<u>е</u>	Other			00 C	<u> </u>	- (D) to a di	2(-) }		.	
i otal.	Add lines 1a through 1e. (Column (d) m	IIIST 6	iouai Form 9	BU. PAIT	s. cowmn	i irsi. IIDe 10	лсі. І			1 115 670

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" to	Form 99) Part IV line	11b See Form	990 Part X. line 12.
	(a) Description of security or category (including name of security)) Book value	(c) Meti	hod of valuation -of-year market value
/d\ F:					or you mand value
(1) Financial	neld equity interests	·			
• •	• •	· —			
(A)					"
(B)					
(C)				, <u>-</u>	
(D)					
<u>\-\-</u> (E)					
(F)					, · · · · · · · · · · · · · · · · ·
(G)			·		
····(H)					·· -
	b) must equal Form 990, Part X, col. (B) line 12) ▶				
Part VIII	Investments – Program Related.	L			
t dit viii	Complete if the organization answered "Yes" to	Form 99	D. Part IV. line	11c. See Form	990, Part X, line 13.
	(a) Description of investment) Book value		hod of valuation
	(-,	,		Cost or end-	-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) ▶				
Part IX	Other Assets.				
	Complete if the organization answered "Yes" to	Form 99	0, Part IV, line	11d. See Form	990, Part X, line 15.
	(a) Description				(b) Book value
(1)					
(2)					
(3)					
(4)		•			
(5)					
(6)					
(7)	_				
(8)			·		· · · · · · · · · · · · · · · · · · ·
(9)					
	mn (b) must equal Form 990, Part X, col. (B) line 15.) .		· · · · ·	<u> ▶</u>	
Part X	Other Liabilities. Complete if the organization answered "Yes" to	Form 99	0, Part IV, line	11e or 11f. See	Form 990, Part X,
	line 25.				
1.	(a) Description of liability (b) Book v	alue			
(1) Federal ır	ncome taxes .				
(2)					
(3)					
(4)]		
(5)					
(6)]		
(7)]		
(8)]		
(9)]		
	b) must equal Form 990, Part X, col (B) line 25.)				
	r uncertain tax positions. In Part XIII, provide the text of the				
organization'	s liability for uncertain tax positions under FIN 48 (ASC 740)). Check he	re if the text of th	ne footnote has bee	n provided in Part XIII 🏻 🔲

Par	t XI	Reconciliation of Revenue per Audited Financial Statement			Retu	rn.	
		Complete if the organization answered "Yes" to Form 990, F				, 	
1		I revenue, gains, and other support per audited financial statements			1		
2		unts included on line 1 but not on Form 990, Part VIII, line 12:					
а		unrealized gains on investments	2a] - [
b		ated services and use of facilities	2b]		
С		overies of prior year grants	2c]		
d		er (Describe in Part XIII.)	2d				
е		lines 2a through 2d			2e		
3		ract line 2e from line 1			3		
4		unts included on Form 990, Part VIII, line 12, but not on line 1:	ļ				
а		stment expenses not included on Form 990, Part VIII, line 7b	4a				
b		er (Describe in Part XIII.)		<u> </u>	<u> </u>		
С		lines 4a and 4b			4c		
5		I revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	<u> </u>	
Part	XII	Reconciliation of Expenses per Audited Financial Statem			er Re	turn.	
		Complete if the organization answered "Yes" to Form 990, F					
1		l expenses and losses per audited financial statements			1		
2		unts included on line 1 but not on Form 990, Part IX, line 25:				-	
а	Dona	ated services and use of facilities	2a			i	
b	Prior	year adjustments	2b			l	
С	Othe	r losses	2c]	l	
d	Othe	er (Describe in Part XIII.)	2d			i	
е	Add	lines 2a through 2d			2e	l	
3	Subt	ract line 2e from line 1			3		
4	Amo	unts included on Form 990, Part IX, line 25, but not on line 1:		1	4		
а	Inves	stment expenses not included on Form 990, Part VIII, line 7b	4a		\ \ \		
b		r (Describe in Part XIII.)			1.		
С		lines 4a and 4b			4c		
5		expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5		
Part		Supplemental Information.					
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Since the buildings are in the Philippines and the actual cost is in Pesos, the value of the buildings this year went down as the dollar appreciated and the peso depreciated. The trading rate went from 41.04 peso to a dollar to 44.38. Whereas last year the buildings actually							
went up in value in dollars.							
				······································	·		
				······	·		
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SCHEDULE F (Form 990)

Statement of Activities Outside the United States

27.16

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

990. Inspection
Employer Identification number

	ian Training and Missionary Fel	iowsnip		the Heiter Oter		3-2150107
Par	General Information Form 990, Part IV, line		ies Outside	tne United States. Com	plete if the organization ans	swered "Yes" on
1	For grantmakers. Does the assistance, the grantees' eli	gibility for th	e grants or as			e
	grants or assistance?					☐Yes
2	For grantmakers. Describe assistance outside the Unite		the organizati	on's procedures for moni	toring the use of its gran	ts and other
3	Activities per Region. (The fo	ollowing Part	l, line 3 table o	can be duplicated if additio	nal space 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)	East Asia and the Pacific	0	3	Grants: Institute		61,059.02
(2)	East Asia and the Pacific	0	3	Grants: Pastors		27,408.48
(3)	East Asia and the Pacific	o	3	Services	upkeep of buildings	13,730.57
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						·
(11)				-		
(12)						
(13)						
(14)		<u></u>				
(15)						
(16)						
(17)		ļ <u> </u>				
		0	3			102198.07
c	sheets to Part I	0	3	· · · · · · · · · · · · · · · · · · ·	 	102198.07
~		, •	. •			102100.07

Schedule F (Form 990) 2013

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on 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. Part II

		5							
-	(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	(f) Method of valuation (book, FMV, appraisal, other)
Ξ			East Asia Pacific	General Support	61,059.02 check	check	0	0 NA	NA
<u>(</u> 2									
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€									
<u> </u>									
9	,						,		
E									
<u>®</u>									
6									!
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
a	Enter total nur	mber of recipie	ent organizations lis	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt	ognized as charitie	s by the foreign cour	itry, recognized as t	ax-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

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Schedule F (Form 990) 2013

Schedule F (Form 990) 2013

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement 27,408.48 Check / cash (d) Amount of cash grant (c) Number of recipients 70 (b) Region **East Asia Pacific** (1) Food & clothing, education (a) Type of grant or assistance Part III (12) £ E (13) (10) (15) (16) (17) (18) <u>R</u> ල 9 8 <u>6</u> 3 0

Schedule F (Form 990) 2013

Page	4

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes, the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreig Corporation (see Instructions for Form 926)		☑ 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 Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With U.S. Owner (see Instructions for Forms 3520 and 3520-A)	d	☑ 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 T Certain Foreign Corporations. (see Instructions for Form 5471)		☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8622 Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electin Fund. (see Instructions for Form 8621)	1,	✓ 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)		☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instruction for Form 5713)		 ✓ No

Part V Supple

Supplemental Information

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

Part 1 & 2 All of the funds are given only to institutions and Pastors and Bible Women who we personally know, "'friends of". We have
taught them in class and ministered with them and are familiar with their work. We know that they are only involved in Church ministries.
Part I - # 3 (1) c We have three individuals that work in the Philippines with CTMF enabling the mission to carry out its religious non-profit
purpose.
Part I # 3 (1) d Grants given to the Center for Biblical Studies, an Institute and Seminary (non-profit corporation in the Philippines) used for
the training of young men and women for the work of the local churches.
Part I # 3 (2) d Grants to recipients, these funds are given to Pastors and Church workers so that they can do the work necessary in their
local churches. It helps subsidize what the local church gives for food,clothing, education, and medicine.
Part I # 3 (3) d Program Services, this is the upkeep of the buildings and property so that they can be used for the non-profit stated in our
constitution, that is to do religious training of young men and women for work in their local churches.
Part II 1 (1) d - this is the same as Part 1 # 3 (1) d above: Support for the Center for Biblical Studies.
Part III - (1) this is the same as Part I # 3 (2) d, the giving of funds to enable Pastors and Bible women to do the work of the Church. It
subsidizes what they have to live on and minister with, in the way of food, clothing, and medicine.
Substitutes what they have to live on the minister way, in the day of loos, footing, the minister way is a few and they have to live on the minister way, in the day of loos, footing, the minister way is a few and they have to live on the minister way, in the day of loos, footing, the minister way is a few and they have to live on the minister way, in the day of loos, footing, the minister way is a few and the minister way.
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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.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Christian Training and Missionary Fellowship	23-2150107	
Part VI line 8b: There were no committees		
Part VI line 11: This form is sent out by email to its governing body, then there is a telephone call or email if there is any questions or		
problems.		
	·	
Part VI line 19: The CTMF governing documents and financial statements are available upon request by the public.		
Part XI # 9: Since the buildings are in the Philippines and the actual cost is in Pesos, the value of the buildings this year went down as the		
dollar appreciated and the peso depreciated. The trading rate went from 41.04 peso to a dollar to 44.38. Whereas last year the buildings		
actually went up in value in dollars.		
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