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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A FO				nd ending 12-3			
B Che	ck ıf ap	plicable	C Name of organization Kanakuk Ministries			D Employer	identification number
☐ Add	ress cha	ange	Doing Business As			43-1815	310
_	ne chan	_	Kanakuk Kamps				
	al returi		Number and street (or P O box if mail is not delivered to street at 1353 Lake Shore Dr	ddress) Room/su	ııte	E Telephone	number
_	nınated ended re		City or town, state or province, country, and ZIP or foreign postal	codo		(417)26	6-3000
_		pending	Branson, MO 65616	code		C Cross rose	into d. 21 E2E 904
, ,,,,,	cation	penamg	F Name and address of principal officer		H(a) Io		ipts \$ 21,535,804
			Joe White		1	s this a group ref ubordinates?	⊤Yes √ No
			1353 Lake Shore Dr Branson,MO 65616		H(b) A	re all subordinat	es [Yes No
					in	cluded?	
I Tax	-exemp	pt status	▼ 501(c)(3)	r 527	If	"No," attach a l	ist (see instructions)
J W	ebsite:	: ► ww	v kanakuk com		H(c) G	Group exemption	number ►
K Form	of orga	anızatıon	Corporation Trust Association Other		L Year o	of formation 1998	M State of legal domicile
Pai	τI	Sum	mary				110
			escribe the organization's mission or most significant act				
	D	evelop	Godly leaders through life-changing experiences, relatio	nships & spirit	ual trainin	g	
90							
Governance	3 -	`hock th	s box ► If the organization discontinued its operations	or disposed	of more the	on 2 E0/s of its no	t accets
30%	2 (neck ti	is box 🗐 — If the organization discontinued its operations	s or disposed	or more tha	111 25% OF ICS HE	t assets
2 6	3 N	lumber	of voting members of the governing body (Part VI, line 1 $lpha$	a)			3 7
ties			of independent voting members of the governing body (Pa			_	4 3
Activities			mber of individuals employed in calendar year 2013 (Par mber of volunteers (estimate if necessary)			<u> </u>	5 1,790 6 500
ď			related business revenue from Part VIII, column (C), line			—	7a 79,452
			lated business taxable income from Form 990-T, line 34				7b -2,049
					l i	Prior Year	Current Year
	8	Contri	butions and grants (Part VIII, line 1h)			2,410,164	3,537,204
- a. I			outlone and grante (Fare Fills) in Fills				
enne	9		m service revenue (Part VIII, line 2g)			16,875,379	16,990,754
Revenue	10	Invest	m service revenue (Part VIII, line 2g) ment income (Part VIII, column (A), lines 3, 4, and 7d)			16,875,379 -9,272	16,990,754 2 26,720
Revenue	10 11	Invest Other	m service revenue (Part VIII, line 2g) ment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c,	and 11e)		16,875,379	16,990,754 2 26,720
Revenue	10 11 12	Invest Other Total (12) .	m service revenue (Part VIII, line 2g)	and 11e)		16,875,379 -9,272 363,947 19,640,218	16,990,754 2 26,720 7 361,779 8 20,916,457
Revenue	10 11 12	Invest Other Total (12) .	m service revenue (Part VIII, line 2g) ment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, evenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 1—and similar amounts paid (Part IX, column (A), lines 1—	and 11e) column (A), lin	e	16,875,379 -9,272 363,947 19,640,218 647,953	16,990,754 2 26,720 7 361,779 3 20,916,457 3 641,947
Revenue	10 11 12 13 14	Other Total (12) Grants Benefi	m service revenue (Part VIII, line 2g) ment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, evenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 1—and similar amounts paid (Part IX, column (A), lines 1—ts paid to or for members (Part IX, column (A), line 4) .	and 11e) column (A), lin	e	16,875,379 -9,272 363,947 19,640,218	16,990,754 2 26,720 7 361,779 3 20,916,457 3 641,947
	10 11 12	Other Total (12) . Grants Benefi Salario 5-10)	m service revenue (Part VIII, line 2g) ment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, evenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 1—and similar amounts paid (Part IX, column (A), lines 1—ts paid to or for members (Part IX, column (A), line 4) . es, other compensation, employee benefits (Part IX, column (A), line 4).	and 11e) column (A), lin	е	16,875,379 -9,272 363,947 19,640,218 647,953	16,990,754 2 26,720 7 361,779 3 20,916,457 3 641,947 0 0
	10 11 12 13 14 15	Other Total (12) . Grants Benefi Salario 5-10) Profes	m service revenue (Part VIII, line 2g)	and 11e) column (A), lin	е	16,875,379 -9,272 363,947 19,640,218 647,953	16,990,754 2 26,720 7 361,779 3 20,916,457 3 641,947 0 0 5 8,917,124
Expenses Revenue	10 11 12 13 14 15 16a b	Other Total II 12) . Grants Benefi Salari 5-10) Profes Total fu	m service revenue (Part VIII, line 2g)	and 11e) column (A), lin 3)	e	16,875,379 -9,272 363,947 19,640,218 647,953 0	16,990,754 2 26,720 7 361,779 3 20,916,457 3 641,947 0 0 5 8,917,124 0 0
	10 11 12 13 14 15 16a b	Other Total (12) . Grants Benefi Salaric 5-10) Profes Total fu Other	m service revenue (Part VIII, line 2g)	and 11e) column (A), lin 3) mn (A), lines	e	16,875,379 -9,272 363,947 19,640,218 647,953 0 9,737,686	16,990,754 2 26,720 7 361,779 3 20,916,457 3 641,947 0 0 5 8,917,124 0 0
	10 11 12 13 14 15 16a b	Other Total (12) . Grants Benefi Salari 5-10) Profes Total fu Other	m service revenue (Part VIII, line 2g)	and 11e) column (A), lin 3) mn (A), lines (A), line 25)	e	16,875,379 -9,272 363,947 19,640,218 647,953 0	16,990,754 2 26,720 7 361,779 8 20,916,457 8 641,947 0 0 6 8,917,124 0 0 0 0 0 10,781,478 8 20,340,549
Expenses	10 11 12 13 14 15 16a b 17 18	Other Total (12) . Grants Benefi Salari 5-10) Profes Total fu Other	m service revenue (Part VIII, line 2g)	and 11e) column (A), lin 3) mn (A), lines (A), line 25)	e	16,875,379 -9,272 363,947 19,640,218 647,953 0 9,737,686 0 10,061,069 20,446,708 -806,490 ning of Current	16,990,754 2 26,720 7 361,779 8 20,916,457 8 641,947 0 0 6 8,917,124 0 0 9 10,781,478 8 20,340,549 0 575,908
Expenses	10 11 12 13 14 15 16a b 17 18 19	Other Total (12) . Grants Benefi Salari(5-10) Profes Total fu Other Total 6 Reven	m service revenue (Part VIII, line 2g)	and 11e) column (A), lin 3) mn (A), lines) (A), line 25)	e	16,875,379 -9,272 363,947 19,640,218 647,953 0 9,737,686 0 10,061,069 20,446,708 -806,490 ning of Current Year	16,990,754 2 26,720 7 361,779 8 20,916,457 8 641,947 0 0 8 8,917,124 0 0 10,781,478 8 20,340,549 0 575,908 End of Year
Expenses	10 11 12 13 14 15 16a b 17 18	Other Total (12) . Grants Benefi Salari 5-10) Profes Total fu Other Total (2) Reven	m service revenue (Part VIII, line 2g)	and 11e) column (A), lin 3)	e Begin	16,875,379 -9,272 363,947 19,640,218 647,953 (0) 9,737,686 20,446,708 -806,490 ning of Current Year 22,194,723	16,990,754 2 26,720 361,779 3 20,916,457 3 641,947 0 0 5 8,917,124 0 0 10,781,478 3 20,340,549 0 575,908 End of Year 1 26,110,620
	10 11 12 13 14 15 16a b 17 18 19	Other Total (12). Grants Benefi Salario 5-10) Profes Total fu Reven Total a Total a	m service revenue (Part VIII, line 2g)	and 11e) column (A), lin 3)	e Begin	16,875,379 -9,272 363,947 19,640,218 647,953 0 9,737,686 0 10,061,069 20,446,708 -806,490 ning of Current Year	16,990,754 2 26,720 7 361,779 8 20,916,457 8 641,947 0 0 6 8,917,124 0 0 7 10,781,478 8 20,340,549 0 575,908 End of Year 1 26,110,620 7,429,146
S C Net Assets or Expenses	10 11 12 13 14 15 16a b 17 18 19 20 21 22 t III	Other Total (12). Grants Benefi Salario 5-10) Profes Total fu Other Total a Reven Total a Sign Ities of ge and	m service revenue (Part VIII, line 2g)	and 11e) column (A), lin 3)	Begin	16,875,379 -9,272 363,947 19,640,218 647,953 0 9,737,686 20,446,708 -806,490 ning of Current Year 22,194,723 4,089,155 18,105,566	16,990,754 2
S C Net Assets or Expenses	10 11 12 13 14 15 16a b 17 18 19 20 21 22 t III	Other Total (1) Profes Total (1) Other Total (1) Other Total (1) Reven Total (1) Net as Sign Ities of ge and known kn	m service revenue (Part VIII, line 2g)	and 11e) column (A), lin 3)	Begin	16,875,379 -9,272 363,947 19,640,218 647,953 (0 9,737,686 (0 10,061,069 20,446,708 -806,490 ning of Current Year 22,194,723 4,089,155 18,105,566 dules and stater) is based on all	16,990,754 2
ab de	10 11 12 13 14 15 16a b 17 18 19 20 21 22 t III	Other Total (1) Frofes Total (1) Other Total (2) Total (3) Total (4) Total (4) Net as Sign Ities of ge and s any ki	m service revenue (Part VIII, line 2g)	and 11e) column (A), lin 3)	Begin	16,875,379 -9,272 363,947 19,640,218 647,953 0 9,737,686 20,446,708 -806,490 ning of Current Year 22,194,723 4,089,155 18,105,566	16,990,754 2
S C Net Assets or Expenses	10 11 12 13 14 15 16a b 17 18 19 20 21 22 t III penal owledgreen has	Other Total (12) . Grants Benefi Salari(5-10) Profes Total fu Other Total (2) Reven Total (3) Net as Sign Ities of ge and s any ki	ment income (Part VIII, line 2g)	and 11e) column (A), lin 3)	Begin	16,875,379 -9,272 363,947 19,640,218 647,953 0 9,737,686 0 10,061,069 20,446,708 -806,490 ning of Current Year 22,194,723 4,089,159 18,105,566 dules and stater) is based on all	16,990,754 2
Sign of Fund Balances Expenses Of Fund Balances Expenses Of Fund Balances Expenses	10 11 12 13 14 15 16a b 17 18 19 20 21 22 t III penal owledgreen has	Other Total (1) Profes Total (1) Other Total (2) Other Total (3) Reven Total (4) Net as Sign Ities of ge and s any ki	ment income (Part VIII, line 2g)	and 11e) column (A), line 3) mn (A), lines (A), line 25) ding accompare parer (other the	Begin	16,875,379 -9,272 363,947 19,640,218 647,953 0 9,737,686 0 10,061,069 20,446,708 -806,490 ning of Current Year 22,194,723 4,089,159 18,105,566 dules and stater) is based on all	16,990,754 2
Signal Control	10 11 12 13 14 15 16a b 17 18 19 20 21 22 t III	Other Total (12) . Grants Benefi Salari(5-10) Profes Total fu Other Total (2) Reven Total (3) Reven Total (4) Signal (4) Example (4)	ment income (Part VIII, line 2g)	and 11e) column (A), line 3) mn (A), lines (A), line 25) ding accompare parer (other the	Begin	16,875,379 -9,272 363,947 19,640,218 647,953 0 9,737,686 0 10,061,069 20,446,708 -806,490 ning of Current Year 22,194,723 4,089,155 18,105,566 dules and stater) is based on all	16,990,754 2

Use Only

Firm's address 🟲 972 Emerson Parkway Suite A

Greenwood, IN 46143

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

Phone no (317) 885-2620

✓ Yes 厂No

Ministries, Joe White, accepts requests for speaking engagements at various churches and youth ministries throughout the country where he enthusiastically shares the gospel In addition, Mr White speaks at men's conferences designed to encourage mentoring and discipleship among men as they lead in their homes and careers Link Year The Kanakuk Link Year program is a gap year program with college credit, individualized mentoring, focused discovery of spiritual gifts and identity, Spiritual growth and Biblical training for college, and encouragement toward world and community impact. The program ministered to 79 enrolled students over the spring and fall semesters

12,795) (Revenue \$

4d Other program services (Describe in Schedule O) (Expenses \$ 400,576 including grants of \$

Total program service expenses ► 14,015,325

531.888)

Part IV Checklist of Required Schedule
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			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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	4		No
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		No
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? <i>If "Yes," complete Schedule D, Part I</i>	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
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^{\square}	9		No
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^{\bullet}	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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	Yes	
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		No
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		No
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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	Yes	
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
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		No
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	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line $2 \cdot$	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F:	orm 99 0	(2013)

аI	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 151		1 63	140
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
1	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	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	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
l	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u> </u>		
		5c		
	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		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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 and services provided to the payor?	7a		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			.,
	The state the number of forms 5252 med during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		,	
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	۳		
		9a		
	Did the organization make any taxable distributions under section 4966?			
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from members or snareholders			
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
		 	<u> </u>	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule 0	14h	i	1

Form 990 (2013) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

	<u> </u>			
1a	Enter the number of voting members of the governing body at the end of the tax 1a 7		Yes	No
	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
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	Yes	
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		No
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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Cod	<u> </u>
		C 7 C//C	, c c c c c c	c.,
	, , , , , , , , , , , , , , , , , , , ,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		•
				No
b	Did the organization have local chapters, branches, or affiliates?	10a		No
b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No
b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? 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 filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes	No
b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
b 111a b 112a c 13 14 15 a	Did the organization have local chapters, branches, or affiliates? 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 filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
b 111a b 112a c 13 14 15 a	Did the organization have local chapters, branches, or affiliates? 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 filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
b 111a b 112a c 13 14 15 a	Did the organization have local chapters, branches, or affiliates? 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 filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	Did the organization have local chapters, branches, or affiliates? 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 filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b 16a b	Did the organization have local chapters, branches, or affiliates? 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 filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No No

- NV,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - ☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of 19
- interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►Bruce Koerber 1353 Lake Shore Dr Branson, MO 65616 (417) 266-3000

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

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot	not box h ar or/tr	chericie Highest compensated	ss er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Joe White	45 00	Х		х				48,348	0	6,249
President/CEO/Chairman								,	, and the second	5,25
(2) Debbie-Jo White	45 00	х		х				54,767	0	7,860
Secretary										
(3) Doug Goodwin Chief Operating Officer	45 00	х		х				197,582	0	22,197
(4) Cooper White	1 00									
Director	1 00	х						0	0	0
(5) Ron Baldwin	1 00									
Director		Х						0	0	0
(6) Steve Utley	1 00	х						0	0	0
Director										
(7) Pattye Moore	1 00	х						0	0	0
Director (a) Characteristics										
(8) Chris Stange	45 00			х				127,567	0	19,438
Assistant Secretary/ CFO								,		,
(9) Donald Frank part year	45 00			х				209,421	0	35,465
Chief Business Officer										
(10) Kris Cooper part year Chief Personnel Officer	45 00					х		126,952	0	23,735
(11) Mark Webster	45 00					х		119,700	0	18,086
Director of Development	-							113,700	-	
										Form 990 (2013)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (list any hours	more t	tion (han d in is l	ne l both	box, an	heck unless officer stee)	S	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W	_	(F) Estima amount o compens from t	ted f other ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	0	organizati relate organiza	ed
											1		
											+		
											+		
											-		
											+		
1b	Sub-Total							<u></u>					
c	Total from continuation sheet	s to Part VII, S	ection A	٠.				Þ					
d	Total (add lines 1b and 1c) .							F	884,337		0		133,030
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received more th	an			
												Yes	No
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	or highest compen	sated employee	3		No
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ									or individual for	5	103	No
Se	ection B. Independent Co	ntractors											
1	Complete this table for your five compensation from the organization	ve highest comp										tay year	
	compensation nom the organiz	(A)	nihelis	מנוטוו	101	uie (arend	ar ye	ar enumy with or Wi	(R)	JII S	tax year	

(A) Name and business address	(B) Description of services	(C) Compensation
Woodstone Builders LLC PO Box 948 Ozark MO 65721	Construction	1,764,271
Matt Engram Construction Co 260 Pathway Rd Branson MO 65616	Construction	432,671
Tom Boyce Excavating Inc 203 Buccaneer Blvd Branson MO 65616	Excavating	307,672
D & B HVAC Systems Inc 1571 Bee Creek Rd Branson MO 65616	HVAC installation	141,318
Burgess Aircraft Mgt LLC 2525 N General Aviation Ave Springfield MO 65803	Airplane service	140,951
2. Total number of independent contractors (including but not limited to those	se listed above) who received more than	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►5

Part V	100	Statement o						
		Check if Schedi	ule O contains a respo	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(4)	1a	Federated cam	paigns 1a					
ınts	ь	Membership du	es 1b					
Gra not	С	Fundraising eve						
ts, i	_							
Gif ilaı	d	Related organiz						
ns, Sim	е	Government grants	s (contributions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	3,537,204				
ibu Zth	g		ons included in lines	58,877		i		
onti id (1a-1f \$	- 4 - 44		3,537,204			
a C	h	Total. Add lines	S 1 a - 1 T		3,337,204			
an				Business Code				
ven	2a	Program Fees		900099	15,089,790	15,089,790		
- 54	Ь	Software Licensing		611710	972,197	972,197		
Program Serwce Revenue	C	Transportation		480000	468,781	468,781		
Ş.	d	Program Rental Fe	_	531190	227,397	227,397		
E S	e	Ticket & Other Sale		453000	100,362	100,362		
ıbo,	f	All other progra	am service revenue		132,227	132,227		
<u>~</u>	g	Total. Add lines	s 2a – 2f		16,990,754			
	3		ome (including dividen ar amounts)		3,808			3,808
	4		stment of tax-exempt bond					
	5	Royalties		🕨				
			(ı) Real	(11) Personal				
	6a	Gross rents	23,973					
	ь	Less rental expenses	8,290					
	С	Rental income or (loss)	15,683					
	d		me or (loss)		15,683			15,683
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	27,167	37,560				
	b	Less cost or other basis and sales expenses	27,167	14,648				
	С	Gain or (loss)	0	22,912				
	d	Net gain or (los	ss)		22,912			22,912
Other Revenue	8a	Gross income f events (not inc \$ of contributions See Part IV, lin	luding s reported on line 1c)					
ب ه		• /	a					
ţ۴e	b		penses b					
0	С		(loss) from fundraising	events				
	9a	Gross income f See Part IV, lin	rom gaming activities ne 19 a					
	b	Less direct ex	penses b					
	С		(loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo		835,886				
	b	Less cost of a	oods sold b	569,242				
	С		(loss) from sales of inv		266,644	266,644		
		Miscellaneous		Business Code				
	11a	Aircraft Lease	Revenue	480000	42,570		42,570	
	b	Admin & Maint	Services	900099	25,171		25,171	
	С	Advertising		541800	11,711		11,711	
	d		ue					
	е	Total. Add lines	s 11a-11d	▶	79,452			
	12	Total revenue.	See Instructions .	🖊	20,916,457	17,257,398	79,452	42,403
				J		,-5,,550	, 132	12,10

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must comp

Section	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All	other organızat	ions must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX	<u> </u>		<u> </u>
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	266,428	266,428		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	18,000	18,000		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	357,519	357,519		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	728,893	111,938	609,830	7,125
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	17,581	17,581		
7	Other salaries and wages	6,772,620	4,196,823	2,414,921	160,876
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	167,060	106,804	60,256	
9	Other employee benefits	586,813	414,714	157,700	14,399
10	Payroll taxes	644,157	335,597	296,437	12,123
11	Fees for services (non-employees)				
а	Management				
ь	Legal	39,971	1,698	38,273	
c	Accounting	45,888	1,240	44,648	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	149,067	16,779	100,727	31,561
12	Advertising and promotion	484,963	238,994	112,161	133,808
13	Office expenses	1,095,434	772,498	310,515	12,421
14	Information technology	243,951	28,166	<u> </u>	22,559
15	Royalties	213,331	20,100	133,220	22,333
16	Occupancy	2,786,585	2,353,357	433,228	
17	Travel	741,700	581,965	95,299	64,436
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	, , , , , , , ,	332,333	30,233	3,,,,,,,
19	Conferences, conventions, and meetings	427,613	409,545	17,948	120
20	Interest	49,080		49,080	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,345,998	1,687,525	655,528	2,945
23	Insurance	721,682	599,591	122,091	
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	Groceries & meals	1,055,296	1,055,296		
b	Camper Activities	180,697	146,765	18,255	15,677
c	Athletic Equipment	159,216	159,216		
d	Laundry	69,330	69,330		
e	All other expenses	185,007	67,956	115,831	1,220
25	Total functional expenses. Add lines 1 through 24e	20,340,549	14,015,325	5,845,954	479,270
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

1 Cash- 2 Saving 3 Pledge 4 Account 5 Loans emplo Sched 6 Loans 4958 and sporgan 7 Notes 8 Inven 9 Prepa 10a Land, Part V b Less 11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Account 18 Grant 19 Deferm 20 Tax-e 21 Escro 22 Loans	In Schedule O contains a response or note to any line in this Part X	(A) Beginning of year 1,367 382,296 257,559	1 2 3	(B) End of year 1,350 762,418 383,092
2 Saving 3 Pledge 4 Accord 5 Loans emplo Sched 6 Loans 4958 and sporgan 7 Notes 8 Inven 9 Prepa 10a Land, Part V b Less 11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Accord 18 Grant 19 Deferm 20 Tax-e	es and grants receivable, net	1,367 382,296 257,559 239,591	1 2 3 4 5	1,350 762,418
2 Saving 3 Pledge 4 Accord 5 Loans emplo Sched 6 Loans 4958 and sporgan 7 Notes 8 Inven 9 Prepa 10a Land, Part V b Less 11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Accord 18 Grant 19 Deferm 20 Tax-e	es and grants receivable, net	382,296 257,559 239,591	2 3 4 5 5	762,418
7 Notes 8 Inven 9 Prepa 10a Land, Part V b Less 11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Accord 18 Grant 19 Deferm 20 Tax-e	and other receivables from current and former officers, directors, trustees, key yees, and highest compensated employees. Complete Part II of lule L	257,559	3 4 5	<u> </u>
4 Accordance 5 Loans emplo Sched 6 Loans 4958 and sporgan 7 Notes 8 Inven 9 Prepa 10a Land, Part V b Less 11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Accord 18 Grant 19 Defent 20 Tax-e	and other receivables from current and former officers, directors, trustees, key yees, and highest compensated employees. Complete Part II of lule L	239,591	5	383,092
5 Loans emplo Sched 6 Loans 4958 and sporgan 7 Notes 8 Inven 9 Prepa 10a Land, Part V b Less 11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Account 18 Grant 19 Defens 20 Tax-ee 21 Escro	and other receivables from current and former officers, directors, trustees, key yees, and highest compensated employees. Complete Part II of lule L	239,591	5	383,092
6 Loans 4958 and sporgan 7 Notes 8 Inven 9 Prepa 10a Land, Part V b Less 11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Account 18 Grant 19 Deferm 20 Tax-e	yees, and highest compensated employees. Complete Part II of lule L	239,591	6	
## 4958 and sp organ 7	(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers consoring organizations of section 501(c)(9) voluntary employees' beneficiary izations (see instructions) Complete Part II of Schedule L and loans receivable, net	239,591	6	
9 Prepa 10a Land, Part V b Less 11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Account 18 Grant 19 Deferm 20 Tax-e	tories for sale or use	·		
9 Prepa 10a Land, Part V b Less 11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Account 18 Grant 19 Deferm 20 Tax-e	tories for sale or use	·	1	
9 Prepa 10a Land, Part V b Less 11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Accou 18 Grant 19 Defer 20 Tax-e	buildings, and equipment cost or other basis Complete (I of Schedule D 36,171,833)	·	8	194,000
10a Land, Part V b Less 11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Account 18 Grant 19 Deferm 20 Tax-e	buildings, and equipment cost or other basis Complete 10a 36,171,833	001,000	9	434,896
b Less 11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Account 18 Grant 19 Defent 20 Tax-e		3		10 1,000
11 Inves 12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Accou 18 Grant 19 Defen 20 Tax-e	accumulated depreciation 10b 11,836,969	9 20.962.009	10c	24.334.864
12 Inves 13 Inves 14 Intang 15 Other 16 Total 17 Account 18 Grant 19 Deferr 20 Tax-e 21 Escro	tments—publicly traded securities		11	
13 Inves 14 Intang 15 Other 16 Total 17 Accou 18 Grant 19 Defen 20 Tax-e	tments—other securities See Part IV, line 11		12	
14 Intang 15 Other 16 Total 17 Accounts 18 Grants 19 Defers 20 Tax-e	tments—program-related See Part IV, line 11		13	<u> </u>
15 Other 16 Total 17 Account 18 Grant 19 Defent 20 Tax-e 21 Escro	gible assets		14	
16 Total 17 Accounts 18 Grants 19 Defers 20 Tax-e	assets See Part IV, line 11		15	
17 Accounts 18 Grants 19 Defers 20 Tax-e 21 Escro	assets. Add lines 1 through 15 (must equal line 34)	22,194,721	16	26,110,620
18 Grant: 19 Deferi 20 Tax-e γ 21 Escro	unts payable and accrued expenses	1,270,600		1,601,875
19 Deferi 20 Tax-e 21 Escro	s payable	1,210,000	18	
20 Tax-e ැ 21 Escro	red revenue	1,418,555		1,922,498
رم 21 Escro	xempt bond liabilities	1,110,000	20	
V	wor custodial account liability Complete Part IV of Schedule D		21	
key er	and other payables to current and former officers, directors, trustees,		21	
죠 죠	mployees, highest compensated employees, and disqualified ns Complete Part II of Schedule L		22	ı
perso		1,400,000	\vdash	1,160,000
— 23 Secur	ed mortgages and notes payable to unrelated third parties	1,400,000	23 24	2,744,773
25 Other	liabilities (including federal income tax, payables to related third parties, ther liabilities not included on lines 17-24) Complete Part X of Schedule			2,744,773
			25	
	liabilities. Add lines 17 through 25	4,089,155	26	7,429,146
9.	izations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete 27 through 29, and lines 33 and 34.			ı
<u>등</u> 27 Unres	tricted net assets	17,142,889	27	17,361,707
器 28 Tempe	orarily restricted net assets	962,677	28	1,319,767
29 Perma	nnently restricted net assets		29	
<u> </u>	izations that do not follow SFAS 117 (ASC 958), check here ► ┌ and ete lines 30 through 34.			ı
	al stock or trust principal, or current funds		30	·
30 Capita 31 Paid-i 32 Retair	n or capital surplus, or land, building or equipment fund		31	
	and appropriate and company and company are other founds		32	
数 Total	ned earnings, endowment, accumulated income, or other funds	18,105,566	33	18,681,474
34 Total	net assets or fund balances	22,194,721	34	26,110,620

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)				
•	Total revenue (must equal rait viii, column (A), me 12)	1		20,9	16,457
2	Total expenses (must equal Part IX, column (A), line 25)	2		20,3	340,549
3	Revenue less expenses Subtract line 2 from line 1	3			575,908
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
_	<u> </u>	4		18,1	105,566
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses				
•	Para a result of description and	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		18,6	81,474
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved or			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both	ate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

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DLN: 93493321029154

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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.

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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

2013

Open to Public Inspection

·			
Name of the organization Kanakuk Ministries		Employer identific	cation number
National Timisates		43-1815310	

				(see instructions))	Yes	No	Yes	No	Yes	No	
lines 1- 9 above your gov					your gove docume	rnıng	suppor	•	in the U		Jappon
SI) Nam uppor uaniza	ted	(ii) EIN	(iii) Type of organization (described on	(iv) Is t organızatı col (i) lıst	on in	(v) Did you the organiz in col (i) o	zation	(vi) Is t organizati col (i) orga	on in	(vii) A mount of monetary support
h				ng information about			· ·		T		
h				lled entity of a perso						11g(iii)
		` '	•	er of a person descri	` ,					11g(
		and (III) below, the	governing body of th	e supported	organızatıon	1?			11g((i)
			J 1	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons des	scribed in (ii)		Yes No
g			Nugust 17, 2 Ia persons?	2006, has the organi	zation accep	ted any gift	or contribution	on from any	of the		
•		check t	his box							III Supporti	
f			i 509(a)(2) rganization	received a written de	etermination	from the IRS	S that it is a ⁻	Type I Type	e II. or Type	III sunnartu	ng organization
e	Γ	By che	cking this b	ox, I certify that the on managers and otl	organization	ıs not contr	olled directly	or indirectl	y by one or m	nore disquali	fied persons
11	Γ	one or the box	more public that descri	ganized and operated ly supported organiz bes the type of supp b Type II c	ations descr orting organ	ıbed ın sectı ızatıon and c	on 509(a)(1) omplete line	or section ! s 11e th <u>ro</u> u	509(a)(2) Se gh 11h	ee section 5 0	09(a)(3). Check
10		_		ganized and operated	•	•	•				
		acquire	d by the org	janızatıon after June	30,1975 S	ee section 5	609(a)(2).(C	omplete Par	tIII)		
		ıts sup	port from gr	oss investment inco	me and unrel	ated busine	ss taxable in	come (less s	section 511	tax) from bu	sinesses
	•	_		ities related to its ex					•		=
9	\vdash			at normally receives					utions, meml	pership fees	, and gross
8	, 	describ	ed in sectio	n 170(b)(1)(A)(vi). described in section	(Complete P	art II)		_		gene	F
7	' -			at normally receives				` , `	,, ,, ,	om the aene	ral public
6	Г			local government or	•	al unit desc	rihed in secti	on 170/h\/1)(Δ)(v)		
5	ı	_	-	erated for the benefice A)(iv). (Complete P	_	oruniversit	y owned or o	perated by a	i government	ai unit desc	nnea m
_	_			ty, and state	t of a collogo	or unwaret	w owned or o	naratad by a		al unit doco	mb od in
4	Γ			n organization operat	ed ın conjun	ction with a	hospital desc	ribed in sec	tion 170(b)(1)(A)(iii). E	nter the
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descrı	bed in sectio	n 170(b)(1)	(A)(iii).		
2	$\overline{\Gamma}$	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)									
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).										
	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. he organization is not a private foundation because it is (For lines 1 through 11, check only one box)										
Dar	+ T	Peac	on for Du	blic Charity Sta	tus (All ord	nanizations	must comr	olata this n	43-18153		

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

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

_	Part III. If the organiza	tion rails to qu	ality under the t	ests listed beid	w, please com	piete Part III	.)		
	ection A. Public Support endar year (or fiscal year beginning	I	Т	Г	Т		<u> </u>		
Cale	in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,985,428	3 1,950,099	4,328,795	2,410,164	3,537,20	15,211,690		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to the organization without charge								
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a	2,985,428	1,950,099	4,328,795	2,410,164	3,537,20	15,211,690		
	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column						1,623,268		
6	(f) Public support. Subtract line 5 from line 4						13,588,422		
	ection B. Total Support								
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
7	Amounts from line 4	2,985,428	1,950,099	4,328,795	2,410,164	3,537,20	4 15,211,690		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	59,550	70,794	52,322	37,324	27,78	1 247,771		
9	Net income from unrelated business activities, whether or not the business is regularly carried on		24,322	16,230			40,552		
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	83,079	11,550	11,350	2,047		108,026		
11	Total support (Add lines 7 through 10)					1	15,608,039		
12	Gross receipts from related activition	, ,	•		.	12	71,814,679		
13	First five years. If the Form 990 is this box and stop here	<u> </u>	<u> </u>	, ,	•		· —		
14	Public support percentage for 2013			11, column (f))		14	87 060 %		
15	Public support percentage for 2012			,		15	63 630 %		
	33 1/3% support test—2013. If the	·	•	on line 13 and li	ne 14 is 33 1/20%				
100	and stop here. The organization qua				110 1 1 13 33 1/3 /0	or more, eneck	► V		
b	33 1/3% support test—2012. If the	organızatıon dıd	not check a box or	n line 13 or 16a,	and line 15 is 33	1/3% or more,			
17a	box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.								
b	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	ızatıon meets th	e "facts-and-cırcu	mstances" test,	check this box ar	d stop here.	·		
18	Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.								

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test							
Return Reference	Explanation						
Schedule A, Part II, Line 10, Explanation of Other Income	Other Income - 2009 Amount \$ 83,079 Special FR Event Revenue - 2010 Amount \$ 11,550 2011 Amount \$ 11,350 2012 Amount \$ 2,047						

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493321029154

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.aov/form990.

Open to Public

lai Revenue Service	mstructions is at www.ms.gov/rormsso.	Inspection
ame of the organization anakuk Mınıstrıes		Employer identification number 43-1815310
organizations Maintaining Don organization answered "Yes" to For	or Advised Funds or Other Similar rm 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate contributions to (during year)		
Aggregate grants from (during year)		
Aggregate value at end of year		
Did the organization inform all donors and dono funds are the organization's property, subject		onoradvised Yes No
Did the organization inform all grantees, donor used only for charitable purposes and not for the conferring impermissible private benefit?		
art II Conservation Easements. Com	plete if the organization answered "Yes"	to Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by Preservation of land for public use (e g , red Protection of natural habitat Preservation of open space	creation or education)	an historically important land area a certified historic structure
Complete lines 2a through 2d if the organization casement on the last day of the tax year	on held a qualified conservation contribution in	n the form of a conservation
		Held at the End of the Year
Total number of conservation easements		2a
Total acreage restricted by conservation ease	ments	2b
Number of conservation easements on a certif	ied historic structure included in (a)	2c
Number of conservation easements included in historic structure listed in the National Registor		2d
Number of conservation easements modified, t the tax year ►	ransferred, released, extinguished, or termina	ited by the organization during
Number of states where property subject to co	nservation easement is located b	
Does the organization have a written policy regenforcement of the conservation easements it	garding the periodic monitoring, inspection, ha	
Staff and volunteer hours devoted to monitorin	g, inspecting, and enforcing conservation eas	ements during the year
Amount of expenses incurred in monitoring, in:	specting, and enforcing conservation easemer	nts during the year
▶ \$		
Does each conservation easement reported or and section 170(h)(4)(B)(II)?	n line 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)(i)
In Part XIII, describe how the organization rep balance sheet, and include, if applicable, the te the organization's accounting for conservation	ext of the footnote to the organization's financi	
rt III Organizations Maintaining Coll Complete if the organization answer	ections of Art, Historical Treasures ered "Yes" to Form 990, Part IV, line 8.	s, or Other Similar Assets.
If the organization elected, as permitted under works of art, historical treasures, or other simi service, provide, in Part XIII, the text of the fo	SFAS 116 (ASC 958), not to report in its rev lar assets held for public exhibition, education	n, or research in furtherance of public
If the organization elected, as permitted under works of art, historical treasures, or other simi service, provide the following amounts relating	SFAS 116 (ASC 958), to report in its revenu lar assets held for public exhibition, education	e statement and balance sheet
(i) Revenues included in Form 990, Part VIII,	line 1	▶ \$
(ii) Assets included in Form 990, Part X		► \$
If the organization received or held works of ar following amounts required to be reported unde		for financial gain, provide the
Revenues included in Form 990, Part VIII, line	e 1	► \$
Assets included in Form 990, Part X		
Assets included in Form 990, Part X		F P

Part	Organizations Maintaining Collection	s of Art, Hi	stor	ical Tr	eası	ires, or Oth	<u>ier</u>	Similar Ass	ets (co	ontinued)
3	Using the organization's acquisition, accession, and of collection items (check all that apply)	ther records, c	heck	any of t	the fol	lowing that are	as	ignificant use	of its	
а	Public exhibition	d	Γ	Loan	orexo	hange program	ns			
b	Scholarly research	е	\vdash	Other	r					
c	Preservation for future generations									
4	Provide a description of the organization's collections Part XIII	and explain ho	ow the	y furthe	er the	organızatıon's	exe	mpt purpose ır	1	
5	During the year, did the organization solicit or receive assets to be sold to raise funds rather than to be main						imil		_ Yes	□ No
Par	Escrow and Custodial Arrangements Part IV, line 9, or reported an amount on	. Complete i	f the	organ	ızatıo		"Yes	<u>.</u>		, 110
1a	Is the organization an agent, trustee, custodian or oth included on Form 990, Part X?					or other asset	s no	t T	- Yes	┌ No
b	If "Yes," explain the arrangement in Part XIII and com	nplete the follo	wing	table						
								Am	ount	
С	Beginning balance					1	c			
d	Additions during the year					10	<u> </u>			
е	Distributions during the year					10	e			
f	Ending balance					1	f			
2a	Did the organization include an amount on Form 990, F	Part X, line 21	?					Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIII Check	here if the exp	lanati	on has	been	provided in Pa	rt XI	II		Γ
Pai	t V Endowment Funds. Complete if the org									
	(a)Curre	ent year (I	b) Prior	year	b (c) ⊺	wo years back (d) Th	ree years back	(e) Four y	ears 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 current year e	end balance (li	ine 1g	, colum	ın (a))	held as				
а	Board designated or quasi-endowment ►									
b	Permanent endowment ►									
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 1	100%								
3a	Are there endowment funds not in the possession of the \ensuremath{L}	ie organizatior	that	are held	danda	admınıstered f	or th	е		
	organization by (i) unrelated organizations							2-7	Yes	No
	(ii) related organizations				•		•	3a(i 3a(i		
ь	If "Yes" to 3a(II), are the related organizations listed a		Sche	· · · dule R?	• • •		٠.	3b		
4	Describe in Part XIII the intended uses of the organization	•								
Par	t VI Land, Buildings, and Equipment. Com 11a. See Form 990, Part X, line 10.	plete if the	orgar	nızatıor	n ans	wered 'Yes'	to Fo	orm 990, Pai	t IV, lı	ne
	Description of property) Cost or ıs (ınvest		(b) Cost or other basis (other)	er ((c) Accumulated depreciation	(d) Bo	ok value
1 a l	and		\top			609,8	33			609,833
	Buildings					,	\top			•
	easehold improvements					22,332,1	16	6,646,031	1	5,686,085
	Equipment					8,316,9	\dashv	5,190,938		3,126,055
	 Other					4,912,8	_	<u> </u>		4,912,891
	. Add lines 1a through 1e (Column (d) must equal Form		lumn (B), line	10(c).)			2	4,334,864
		•						Schedule D		

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. C	omplete ıf the organızatı	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	+	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the organization of the organization of the property	anization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
	1	4
	+	-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	†
Total (Column (b) mast equal form 330, fart A, coll b) mic 23 /		

A djustments

Part	XI		evenue per Audited Financial Statements With Revenue prered 'Yes' to Form 990, Part IV, line 12a.	er R	leturn Complete If
1	Tota		r support per audited financial statements	1	21,074,747
2	A mo	unts included on line 1 but	t not on Form 990, Part VIII, line 12		
a	Net	unrealized gains on investi	ments 2a		
b	Dona	ated services and use of fa	acilities		
С	Reco	overies of prior year grants	2c		
d	Othe	er (Describe in Part XIII)	2d 8,290		
e	Add	lines 2a through 2d .		2e	158,290
3	Subt	ract line 2e from line 1 .		3	20,916,457
4	A mo	unts included on Form 990	0, Part VIII, line 12, but not on line 1		
a	Inve	stment expenses not inclu	uded on Form 990, Part VIII, line 7b . 4a		
b	Othe	er (Describe in Part XIII)	4b		
c	Add	lines 4a and 4b		4c	0
5	Tota	l revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line 12)	5	20,916,457
Part	XII		kpenses per Audited Financial Statements With Expenses swered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1	Tota		audited financial statements	1	20,498,839
2			not on Form 990, Part IX, line 25		
а	Dona	ated services and use of fa	cilities		
Ь	Prior	year adjustments		1	
С					
d	Othe	er (Describe in Part XIII)		1	
e				2e	158,290
3	Subt	ract line 2e from line 1 .		3	20,340,549
4	A mo	unts included on Form 990), Part IX, line 25, but not on line 1:		
а	Inve	stment expenses not inclu	ided on Form 990, Part VIII, line 7b 4a		
b	Othe	er (Describe in Part XIII)	4b	1	
c	Add	lines 4a and 4b		4c	0
5	Tota	l expenses Add lines 3 an	d 4c. (This must equal Form 990, Part I, line 18)	5	20,340,549
Part	XIII	Supplemental Info	ormation		•
Part '	de the V , line nation	4, Part X, line 2, Part XI,	Part II, lines $3,5$, and 9 , Part III, lines $1a$ and 4 , Part IV, lines $1b$ and $2b$ lines $2d$ and $4b$, and Part XII, lines $2d$ and $4b$ Also complete this part to	provi	de any additional
	R	eturn Reference	Explanation		
Part X	, Line	2	The financial statement effects of a tax position taken or expected to be financial statements when it is more likely than not, based on the technic will be sustained upon examination. Interest and penalties, if any, are inconstatements of activities. As of December 31, 2013 and 2012, Kanakuk it positions that qualify for recognition or disclosure in the financial statem information tax returns in the U.S. and various states. Kanakuk is general federal and state income tax examinations by tax authorities for years be	al me luded nad no ents lly no	rits, that the position in expenses in the ouncertain tax Kanakuk files longer subject to U S
		2d - Other	Rental expenses grouped with rental revenue on 990 Part VIII, Line 6b 8		
A djust			direct expenses on 990 Part VIII, Line 8b		
Part XII, Line 2d - Other Rental expenses grouped with rental revenue on 990 Part VIII, Line 6b 8,290 Special FR ever				Special FR event	

direct expenses on 990 Part VIII, Line 8b

•	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization				Employer ident	ification number			
Kanakuk Mınıstries				43-1815310				
Part I General Information "Yes" to Form 990, Part			ne United States. Co	omplete if the organiz	ation answered			
For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?								
For grantmakers. Describe in assistance outside the United		ganızatıon's pı	rocedures for monitori	ng the use of its gran	ts and other			
3 Activites per Region (The follow	ing Part I, line 3	table can be du	uplicated if additional spa	ace 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) Central America and the Caribbean	0	0	Grants to recipients located in region		333,000			
(2) Sub-Saharan Africa - Angola,	0	0	Grants to recipients located in region		24,519			
(3) Central America and the Caribbean	0	0	Program Services	Travel to the Haiti school	14,250			
(4)								
(5)								
3a Sub-total	0	0			371,769			
b Total from continuation sheets to Part I	0	О			C			
c Totals (add lines 3a and 3h)	l n	l	nl	l	371 760			

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
(1)		Sub-Saharan Africa - Angola, Benin, Botswana, Burkina, Faso,	Support Rwandan children in poverty	17,799	Credit card			
(2)		Central America and the Caribbean -	Support schools in Haiti	333,000	Credit card			
(3)		Sub-Saharan Africa - Angola, Benin, Botswana, Burkina, Faso,	Support Rwandan children in poverty	6,720	Check			
(4)		Í						
		ent organizations list or which the grantee						3

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	duplicated if addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

Part IV 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 Foreign Corporation (see Instructions for Form 926)	Γ	Yes	V	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 a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Г	Yes	V	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u>ح</u> ا	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	V	. 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)	Г	Yes	দ	. No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	V	. No

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page **5**

Part V 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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part I, Line 2	The schools in Haiti send ongoing reports with financial information on how funds are bein g spent towards relief and ministry efforts. Management also takes a mission trip there on ce a year to monitor progress. The other two grants are made to US organizations for purpo se of foreign programs (Food for the Hungry and Compassion International). Kanakuk gets re ceipt information on where the money is going and what children are being supported.

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part I, line 3	Kanakuk Ministries accounts for foreign expenditures according to the accrual basis of accounting using grant reports, on-site visits, and other appopriate procedures and documentation

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Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization Kanakuk Ministries Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

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

OMB No 1545-0047

2013

DLN: 93493321029154

Open to Public Inspection

Schedule I (Form 990) 2013

Employer identification number

43-1815310

Part I General Inform	mation on Grants	and Assistance				•	
Does the organization mathematics the selection criteria useDescribe in Part IV the organization	d to award the grants	orassistance?					∀ Yes
Part II Grants and Ot Form 990, Part 1	her Assistance to IV, line 21, for any	Governments and recipient that receive	Organizations in d more than \$5,000	the United States D. Part II can be dup	. Complete if the organicated if additional s	ganization answered space is needed.	"Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Kıds Across America 1429 Lake Shore Dr Branson, MO 65615	43-1348373	501(c)(3)	82,479				Support of urban camping ministry
(2) Bob Tebow Evangelistic Association 8834-F Goodbys Executive Drive Jacksonville,FL 32217	59-2613612	501(c)(3)	12,883				Support Christian outreach programs
(3) K-Lıfe Natıonal 1353 Lake Shore Drıve Branson, MO 65616	43-1538224	501 (c) 3	10,000				Support teen youth ministry
2 Enter total number of sec	tion 501(c)(3) and go	vernment organizations	listed in the line 1 table	e		🕨	

Cat No 50055P

Schedule I	(Form 990) 2013
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 2.
	Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) Benevolence	1	18,000			
Part IV Supplemental Informat		rmation required in P	art I, line 2, Part III,	column (b), and any other	addıtıonal ınformatıon.

Edit 1	morniadon. Trovide the information required in rare 1, line 2, rare 111, column \b/y, and any other additional information.
Return Reference	Explanation
	Kanakuk Ministries provides financial support to other Christian 501(c)(3) organizations that have exhibited a commitment to seeing God's Kingdom grow Members of the board of directors or management have personal contact with the leadership of these organizations to gain an understanding of their vision, and to receive updates about their program accomplishments. The management of Kanakuk Ministries reviews planned support on an annual basis to determine which organizations to support and what level of support to provide.
Form 990, Schedule I, Part III	Benevolence Grants to Individuals Kanakuk Ministries sometimes provides benevolent grants to campers and/or other families who are in need

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DLN: 93493321029154

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

Compensation Information

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

Open to Public Inspection

Name of the organization Kanakuk Ministries

Employer identification number

43-1815310

Pa	art I Questions Regarding Compensation	·			
			Yes	No	
1a	Check the appropiate box(es) if the organization provided any of t 990, Part VII, Section A, line 1a Complete Part III to provide an				
	▼ First-class or charter travel	ing allowance or residence for personal use			
	☐ Travel for companions ☐ Paym	nents for business use of personal residence			
	Tax idemnification and gross-up payments Healt	th or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Person	onal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization followers reimbursement or provision of all of the expenses described above		b Yes		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?				
		r, regarding the items checked in line 1a?	2 Yes	+-	
3	Indicate which, if any, of the following the filing organization used organization's CEO/Executive Director Check all that apply Dorused by a related organization to establish compensation of the C	not check any boxes for methods			
	Compensation committee Writt	en employment contract			
		pensation survey or study			
	Form 990 of other organizations	oval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Sect or a related organization	tion A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?	4	a	No	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?				
С	Participate in, or receive payment from, an equity-based compens	sation arrangement?	с	Νo	
	If "Yes" to any of lines 4a-c, list the persons and provide the appl	icable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete li	ines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the compensation contingent on the revenues of				
а	The organization?	5	a	No	
b	Any related organization?	5	ь	No	
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did to compensation contingent on the net earnings of	he organization pay or accrue any			
а	The organization?	6	a	No	
b	Any related organization?	6	b	No	
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did to payments not described in lines 5 and 6? If "Yes," describe in Pa		Yes		
8	Were any amounts reported in Form 990, Part VII, paid or accure	d pursuant to a contract that was			
	subject to the initial contract exception described in Regulations	section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8	<u> </u>	Νo	
9	If "Yes" to line 8, did the organization also follow the rebuttable presention 53 4958-6(c)?	resumption procedure described in Regulations			

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	FW-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	, , , , , , , , , , , , , , , , , , ,	
		(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred benefi compensation		(B)(ı)-(D)	reported as deferred in prior Form 990	
(1)Doug Goodwin Chief Operating Officer	(i) (ii)	160,075 0	28,311 0	9,196 0	6,624 0	16,263 0	220,469 0	0	
(2)Donald Frank part year Chief Business Officer	(i) (ii)	167,188 0	27,967 0	14,266 0	23,880 0	12,275 0	245,576 0	0	
(3)Kris Cooper part year Chief Personnel Officer	(i) (ii)	116,495 0	9,446 0	1,011 0	5,663 0	18,762 0	151,377 0	0	

Schedule J (Form 990) 2013

Part IIII Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
Part I, Line 1a	The President/CEO/Chairman of the Board, Joe White, travels in an aircraft owned by the ministry. This is for business purposes and is not treated as taxable compensation.
Part I, Line 7	Members of the management team received a discretionary bonus at the end of the 2013 tax year

Schedule J (Form 990) 2013

DLN: 93493321029154

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

Kanakuk Ministries	;									[3_1º	15310				
						3) and section			organı	zatıor	ns only)				
						0, Part IV, line									
1 (a) Nam	lame of disqualified person			(b) Relationship between disqualified person and organization			(0	c) Des	cription	of tra	nsaction	` -		rrected?	
_					- and organi	241011						-+	Yes	No	
														_	
														_	
														_	
						+						-		_	
														_	
														_	
2 Enterthe						d 1.6 d			thaaa					_	
4958 .			· · ·	yanızatıdı n	nanagers or	disqualified pers	ons a	uring •		. unde	F \$	1			
3 Enter the a	mount of t	ax, ıf	any, on line	2, above, re	eımbursed b	y the organizatio	n.				F \$				
						-									
					d Persons	5. 990-EZ, Part V ,	lino 2	83.01	Form 0	00 D	set IV/ lu	no 26	or if the		
	•	_				line 5, 6, or 22	iiiie 3	04, 01	1 01111 3	<i>50,</i> F 6	11CIV, 11	116 20,	or ir the		
(a) Name of	(b)		(c)	(d) Loan to		(e)Original								(i)Wrıtten	
ınterested person			Purpose of	urpose of or from the loan organization		principal amount	due	1 1 1		A pprov	-		ment?		
person	organizat	tion	louii	organizacio	, iii -	amount					board				
											or				
				То	From	-			Yes	No	commit Yes	No	Yes	No	
				10	110111				+	1.0	1.05	"	1 105	1 110	
													_		
													_		
·			<u> </u>								<u> </u>		_		
otal Part IIII Gra	nts or A	ssis	tance Re	nefitting	Interecte	d Persons.									
						Form 990, Pa	rt IV,	lıne	27.						
(a) Name of in) Relationsh			nt of assistance			e of ass	ıstanc	e (e)) Purpo	se of as	sıstance	
persoi	n	Inte	erested pers												
1) Kale Goodwir		Fam	organıza ııly member			2 020	Disc	ount o	on camp	fees					
1) Kure coouviii	•	"	my member	01 00 0		2,020			all empl						
2) Karıs Goodwi	ın	Fam	ııly member	of COO		1,010			on camp						
2) K- 4- C 4		F	.1	-5000		1.016	_		all empl						
3) Kade Goodwi	n	Fam	ııly member	01 C O O		1,010			on camp all empl						
4) Reagan Stan	ge	Fam	ııly member	of C F O		1,210			on camp						
			•						all empl						
					1		_								
		-					_								
		1			1										

Pariety Business Transactions II	nvolving Interested	l Persons.			
Complete if the organization	<u>n answered "Yes" on F</u>	<u>Form 990, Part IV, lın</u>	e 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
See Additional Data Table					

Part V Supplemental Information

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

Schedule L (Form 990 or 990-EZ) 2013

Software ID: Software Version:

EIN: 43-1815310

Name: Kanakuk Mınıstrıes

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

Form 990, Schedule L, Part IV -				I	
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
	organization			Yes	No
(1) White Family Holding Company	Entity wholly owned by Joe and Debbie-Jo White, Directors	53,293	Kanakuk Ministries rents real property from White Family Holding Company The rental agreement approved in 2008 was/is a 50 year lease with a 50 year option All interested party transactions are approved in accordance with the Conflict of Interest Policy and Procedure This transaction took place at or below fair market value		Νο
(2) Kukorp LLC	Entity wholly owned by Debbie-Jo White, Director	154,967	Kanakuk Ministries rents real property from Kukorp, LLC The rental agreement approved in 2008 was/is a 50 year lease with a 50 year option All interested party transactions are approved in accordance with the Conflict of Interest Policy and Procedure This transaction took place at or below fair market value		Νο
(3)					No
(4) K-Land One LLC	Entity wholly owned by Joe and Debbie-Jo White, Directors	212,021	Kanakuk Ministries rents real property from K-Land One, LLC The rental agreement approved in 2008 was/is a 50 year lease with a 50 year option All interested party transactions are approved in accordance with the Conflict of Interest Policy and Procedure This transaction took place at or below fair market value		Νο
(5) K-Land Four LLC	Entity wholly owned by Joe and Debbie-Jo White, Directors	113,132	Kanakuk Ministries rents real property from K-Land Four, LLC The rental agreement approved in 2008 was/is a 50 year lease with a 50 year option All interested party transactions are approved in accordance with the Conflict of Interest Policy and Procedure This transaction took place at or below fair market value		Νο
(6)			All interested party transactions are approved in accordance with the Conflict of Interest Policy and Procedure These transactions took place at fair market value, ListTotal 0		Νo
(7) Deann Goodwin	Family member of Doug Goodwin, officer and director	16,963	W-2 Employee		No
(8) Joe White	Family member of Debbie-Jo White and Cooper White, Directors	54,597	Compensation		No
(9) Debbie-Jo White	Family member of Joe White and Cooper White, Directors	62,627	Compensation		No

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DLN: 93493321029154

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Noncash Contributions

Name of the organization

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number

Inspection

ana	kuk Mınıstries			43	3-1815310			
Pa	rt I Types of Property				-1015510			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr			ınts
1	Art—Works of art							
2	Art—Historical treasures .							
	Art—Fractional interests							
4	Books and publications							
5	Clothing and household	X		426	FMV-Similar ass	et sale	is.	
_	goods	X	4	12.000	TMV Complete			
			1	13,000	FMV-Similar ass	ersare	:5	
	Boats and planes Intellectual property				+			
	Securities—Publicly traded .	X	4	25.071	. FMV -Sımılar assı	ot calc		
	Securities—Closely held stock .			33,071	I MV -Sillilai ass	et sale		
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic							
	structures							
	Qualified conservation contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial			2.100	EMV. Garatera			
	Real estate—Other	X	1	2,100	FMV-Similar ass	etsale	<u>:S</u>	
	Collectibles							
	Food inventory Drugs and medical supplies .				 			
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other►(X	2	8,280	FMV-Sımılar ass	et sa		
	etic Equi)			,				
26	O ther ▶()							
27	O ther ▶()				<u> </u>			
	O ther ► ()				<u> </u>			
29	Number of Forms 8283 received by the for which the organization completed in	-	- ,	1 2	9			
20-	D				*h 20 *h		Yes	No
ova	During the year, did the organization							
	it must hold for at least three years for				a to be used			
	for exempt purposes for the entire ho		l'			30a	\vdash	No
	If "Yes," describe the arrangement in					34	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
31	Does the organization have a gift acc					31	Yes	
32a	Does the organization hire or use thin			olicit, process, or sell no	ncash			
	contributions?					32a	Yes	<u> </u>
b	If "Yes," describe in Part II							
33	If the organization did not report an a	mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			
	describe in Part II							

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation				
Part I, Column (b)	The number of contributors represents the number of contributions received				
	Kanakuk has an account with iDonate com, which will accept contributions on behalf of Kanakuk Ministries, liquidate the contributions, and provide a portion of the proceeds to Kanakuk Ministries				

Schedule M (Form 990) (2013)

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As Filed Data -

DLN: 93493321029154

Employer identification number

43-1815310

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Kanakuk Mınıstrıes

SCHEDULE 0

(Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

990 Schedule O. Supplemental Information

Return Reference	Explanation				
Form 990, Part VI, Section A, line 1					
Form 990, Part VI, Section A, line 2	Joe White, Debbie-Jo White, & Cooper White - Family & Business relationship				
Form 990, Part VI, Section B, line 11	The Form 990 is prepared by an independent CPA firm, then reviewed by the Controller and C FO, and then provided to the board for review before being filed with the IRS				
Form 990, Part VI, Section B, line 12c	The board signs a conflict of interest policy annually disclosing any potential conflicts These are reviewed by the CFO/Assistant secretary. If a conflict arises at a board meetin g or in the course of business, the individual would abstain from deliberations and voting				
Form 990, Part VI, Section B, line 15	The board approves compensation of officers and key employees on an annual basis. The boar dutilizes independent wage surveys from both local and national sources in the compensation evaluation process. The deliberations and decision are documented in the board minutes.				
Form 990, Part VI, Section C, line 19	The governing documents, conflict of interest policy, and financial statements are available upon request				
Form 990 Part XII, Line 2c	The organization's audit committee and Board assumes responsibility for oversight of the a udit of its financial statements and selection of its independent accountant. This process has not changed since the prior year				