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Form **990** 

**Return of Organization Exempt From Income Tax** 

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

OMB No 1545-0047 2013

Open to Public Inspection

Department of the Treasury

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

For the 2013 calendar year, or tax year beginning and ending Check if C Name of organization D Employer identification number Address change NCCF TRUST Name change 58-6370659 Doing Business As Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number 190 Termin-952 ECHO LANE 404-252-0100 X Amended return -946,234 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Applica-HOUSTON, TX 77024 H(a) Is this a group return pending F Name and address of principal officer: SAME AS C ABOVE Yes X No for subordinates? H(b) Are all subordinates included? \_ Yes L\_\_ No Tax-exempt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527 If "No," attach a list (see instructions) J Website: ► N/A **H(c)** Group exemption number ▶ K Form of organization: Corporation X Trust Association Other > Year of formation: 1998 M State of legal domicile: TX Part I | Summary Briefly describe the organization's mission or most significant activities: THE TRUSTEE ACCEPTS GIFTS OF Governance INTERESTS IN S CORPORATIONS AND PARTNERSHIP-TYPE ENTITIES AND GRANTS Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 0 6 Total number of volunteers (estimate if necessary) -1,074,377.7a 7 a Total unrelated business revenue from Part VIII, column (C), line 12 -249,530. b Net unrelated business taxable income from Form 990-T, line 34 7b SCANNED MAR 0 9 2015 20 Prior Year **Current Year** 293/812 47,380. Contributions and grants (Part VIII, line 1h) 8<sub>1</sub>,746 23,032. Program service revenue (Part VIII, line 2g) -1,927,893.17-845/,943 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 58,510. -469,386.Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 016,011. -2,326,867.Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,080,163. 1,001,184. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Ö. Benefits paid to or for members (Part IX, column (A), line 4) 0. O. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 7,132 12,360. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,087,295. 1,013,544.Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -3,340,411. -1,071,284. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** ö **End of Year** 10,110,961. 8,062,892. Total assets (Part X, line 16) 7**41**.320. 751,475. 21 Total liabilities (Part X, line 26) ,369,641. Net assets or fund balances. Subtract line 21 from line 20 311,417 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge My Signature of officer Sign CFO/TREASURER D. JOHNSON, Here Type or print name and title Date PTIN Preparer's signature Check Print/Type preparer's name Paid Preparer Firm's EIN Firm's name Use Only Firm's address Phone no.

o-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.
SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

May the IRS discuss this return with the preparer shown above? (see instructions)

01

Yes

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#### NCCF TRUST Form 990 (2013) 58-6370659 Page 3 Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X If "Yes," complete Schedule A X 2 Is the organization required to complete Schedule B. Schedule of Contributors? 2 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 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X during the tax year? If "Yes," complete Schedule C, Part II 4 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 Х 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space. 7 X 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete R X Schedule D. Part III 8 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? X If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent 10 X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X 11 a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X Part VI 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c 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 X Part X, line 16? If "Yes," complete Schedule D, Part IX 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? X If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
14a Did the organization maintain an office, employees, or agents outside of the United States?

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

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

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

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

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

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

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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X

X

X

X

X

X

14a

14b

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20a

## Form 990 (2013) NCCF TRUST Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		L
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	Ì		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	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	ļ	Х
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			v
	of any of these persons? If "Yes," complete Schedule L, Part III	27	-	X
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).		j	х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		^
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		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<b>-</b>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			<del> </del>
•	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	<del>     </del>		<del></del>
	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			Ì
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Х	
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	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
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	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			Ì
_	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<b>├</b> —	X
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	<u>38</u>	X	<u> </u>
		Form	990	(2013)

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		163	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
	(gambling) winnings to prize winners?	1c	Х	ĺ
<b>2</b> a	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			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	Х	
4a	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		X
b	If "Yes," enter the name of the foreign country. ▶			1
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			7,
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_5c	-	<u> </u>
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			x
<b>.</b>	any contributions that were not tax deductible as charitable contributions?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		ĺ
7	Organizations that may receive deductible contributions under section 170(c).	OD		<del></del>
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		L
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	_	ŀ	
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	_	X
9	Sponsoring organizations maintaining donor advised funds.			x
a	Did the organization make any taxable distributions under section 4966?	9a 9b	<del>                                     </del>	X
10	Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter.	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			ĺ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			l
11	Section 501(c)(12) organizations. Enter:			1
а	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1
	amounts due or received from them.)			ĺ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		L
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>	<u> </u>	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O			l
b	Enter the amount of reserves the organization is required to maintain by the states in which the			l
	organization is licensed to issue qualified health plans  5 that the appearance has defined by the second s	l		l
C 140	Enter the amount of reserves on hand  Did the experience are received any neumants for indeed technique of the tay year?	44-	<del>                                     </del>	v
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	Х
<u></u> D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	L	L

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Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  $\mathbf{X}$ Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X 8a X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website W Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of 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: TRUSTEE - 404-252-0100 11625 RAINWATER DRIVE; STE 500, ALPHARETTA, GA 30009-8678

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

(A)	(B)			_ (0	C)			(D)	(E)	(F)		
Name and Title	Average	(do	not c	Pos heck	nore	than is bot	one	Reportable	Reportable	Estimated		
	hours per	box	, unle cer an	ss pe dad	rson irecto	ıs bot or/trus	h an tee)	compensation	compensation	amount of		
	week (list any	$\vdash$				П		from the	from related organizations	other compensation		
	hours for	direct				_		organization	(W-2/1099-MISC)	from the		
	related	0 00	stee			sate		(W-2/1099-MISC)	(** 2/ 1000 141100)	organization		
	organizations	truste	E E		yee	in De		(** = / / / / / / / / / / / / / / / / / /		and related		
	below	individual trustee or director	Institutional trustee	<b>5</b>	old m:	est co oyee	   =		i	organizations		
	line)	uput	Instit	Officer	Key employee	Highest compensated employee	Form					
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Part VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st C		es (continued)				
(A)	(B)			(C	•			(D)	(E)	(F)			
Name and title	Average Positi (do not check mo					than		Reportable	Reportable		Estimated		
	week	box, unless person is both an officer and a director/trustee)						compensation	compensation from related			nount	
	(list any	ō	<del></del>					from the	organizations			other pensa	
	hours for	director				D.		organization	(W-2/1099-MIS			om th	
	related	ee or	stee			nsate		(W-2/1099-MISC)	(** = *********************************			anızat	
	organizations	trust	al tru		yee	ошре	ŀ				_	d relat	
	below	Individual trustee or	Institutional trustee	Je J	Key employee	Highest compensated employee	Former				orga	anızatı	ions
	line)	힐	lust	Officer	Key	품별	ᅙ						
		ļ											
		<u> </u>			<u> </u>	<b>├</b>	_			$\dashv$			
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			Н	$\vdash$			$\vdash$			$\dashv$			
		ł											
			Т			T							
	_	1			l								
		1											
1b Sub-total							<b></b>	0.	-	0.			0.
c Total from continuation sheets to Part V	II, Section A						ightharpoons	0.		0.			0.
d Total (add lines 1b and 1c)							<u> </u>	0.		0.			0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bov	e) wl	ho r	eceived more than \$100	,000 of reportabl	е			_
compensation from the organization													0
										1		Yes	No
3 Did the organization list any former officer,			e, ke	y er	nplo	oyee	, or	highest compensated e	mployee on				v
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the si and related organizations greater than \$15									the organization				x
									idual for comuses		4		<u> </u>
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	•				-		eiat	ted organization or indiv	idual for services		5		x
Section B. Independent Contractors	ipiete Scriedar	<i>e o i</i>	0/ 31	2011	pers	3011					3		21
Complete this table for your five highest co	mnensated in	den	ende	ent c	ont	racto	ors t	that received more than	\$100 000 of com	nens	ation f	rom	
the organization. Report compensation for		-								puilo	u.o.ii		
(A)								(B)			(0	<del></del>	
Name and business	address	N	INC	Ξ				Description of s	ervices	С	ompe		n
	-												
							$\Box$					_	
							_						
							ᆚ						
2 Total number of independent contractors (		iot l	mıte	a to		se li O	stec	a above) who received n	nore than				
\$100,000 of compensation from the organi	zation 📂			_		<u> </u>					Fe	000	0040
											rorm '	シンし (	2013)

		Check if Schedule O cor	ntains a response	or note to any lini				
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	a Federated campaigns	1a				· <u>-</u>	
e a	t	<b>b</b> Membership dues	1b					
Am Am	c	c Fundraising events	1c					
a g	c	d Related organizations	1d	47,380.				
E, S	e	e Government grants (contribu	ıtıons) 1e					
isis	f	f All other contributions, gifts, gra	nts, and					
		similar amounts not included ab	ove 1f			1		
10 E	ç	g Noncash contributions included in line	es 1a-1f \$					
ခ် ငိ	ŀ	h Total. Add lines 1a-1f		<b></b>	47,380.			
				Business Code				
9	2 a	a						
اه کے	t	b						
S Z	c	c	<del></del>					
e am	c	d						
Program Service Revenue	e	е						
ا تە	f	f All other program service rev	/enue		23,032.			23,032.
	ç	g Total. Add lines 2a-2f	•	<b>•</b>	23,032.			
	3	Investment income (including	g dıvıdends, ıntere	est, and				
		other similar amounts)		<b>▶</b> [				
	4	Income from investment of ta	ax-exempt bond p	roceeds 🕨				
	5	Royalties		▶ [				
			(ı) Real	(II) Personal		-		
	6 a	a Gross rents	1,600.					
	t	b Less. rental expenses	633.					
	c	c Rental income or (loss)	967.					
	c	d Net rental income or (loss)		<b>&gt;</b>	967.			967.
	7 2	a Gross amount from sales of	(ı) Securities	(II) Other				
		assets other than inventory	-547,893.					
	t	<b>b</b> Less: cost or other basis						
		and sales expenses	0.	1,380,000.				
	c	c Gain or (loss)	-547,893.	-1,380,000.				
	•	d Net gain or (loss)		<b>•</b>	-1,927,893.	-1,380,000.	-547,893.	
o l	8 8	a Gross income from fundraisi	ng events (not					
na		including \$	of					
ě		contributions reported on lin	e 1c) See					
Other Revenue		Part IV, line 18	а					
. 불	k	b Less direct expenses	b					
٦	C	c Net income or (loss) from fur	ndraising events	▶ ]				
	9 a	a Gross income from gaming a	activities. See					
		Part IV, line 19	а					
		<b>b</b> Less: direct expenses	b					
	C	c Net income or (loss) from ga	ming activities					
1	10 a	<ul> <li>a Gross sales of inventory, les</li> </ul>	s returns			]		
		and allowances	а					
		<b>b</b> Less: cost of goods sold	. b					
L	•	<ul> <li>Net income or (loss) from sa</li> </ul>	les of inventory					
L		Miscellaneous Reven	ue	Business Code				
1	i1 a			ļļ	56,121.	56,121.	·	
	Ł	b STATE TAX REFUND		<u> </u>	10.	10.		
	•	C ADDL UBI FROM 990-T		900003	-526,484.		-526,484.	
	C	d All other revenue		L			· · · · · · · · · · · · · · · · · · ·	
	•	e Total. Add lines 11a-11d		▶	-470,353. -2,326,867.	-1,323,869.		
		Total revenue. See instructions					-1,074,377.	23,999.

# Form 990 (2013) NCCF TRUST Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	omplete column (A).	
	Check if Schedule O contains a respor	nse or note to any line in			
	not include amounts reported on lines 6b, Bb, 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	1,001,184.	1,001,184.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	<u> </u>			
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				<del></del>
9	Other employee benefits				
10 11	Payroll taxes Fees for services (non-employees):				
''a	Management				
b	Legal				
c	Accounting				
d	Lobbying			•••	<del></del>
e	Professional fundraising services. See Part IV, line 17				<del>-</del> ·
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,			=:	
	column (A) amount, list line 11g expenses on Sch O.)	615.		615.	
12	Advertising and promotion				_
13	Office expenses				
14	Information technology				
15	Royalties		·	- "	
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest Payments to affiliates				
21 22	Depreciation, depletion, and amortization				
23	Insurance				<u> </u>
24	Other expenses. Itemize expenses not covered				<u> </u>
	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 0.)				
а	TAXES	14,533.		14,533.	
b	BANK CHARGES	141.		141.	
С	OTHER EXPENSES	75.		75.	
d	GRANTS TO AFFILIATES	-3,004.	-3,004.		
е	All other expenses	4 013 511	000 100	45-06:	
<u>25</u>	Total functional expenses. Add lines 1 through 24e	1,013,544.	998,180.	15,364.	0.
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 fit following SOP 98-2 (ASC 958-720)				5 000 (204.0)

	Check if Schedule O contains a response or note to any line in this Part X			
	·· <del></del>			
		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing	688,809.	1	284,115.
2	Savings and temporary cash investments	1,071,802.	2	1,064,394.
3	Pledges and grants receivable, net		3	·
4	Accounts receivable, net	28,846.	4	46,121.
5	Loans and other receivables from current and former officers, directors,			<u> </u>
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
			6	
7	· · · · · · · · · · · · · · · · · · ·	400,303.		274,767.
	· · · · · · · · · · · · · · · · · · ·	· ·		·
9	<b>-</b>			,,,,
10a	_ · · · · · · • • • • • • • • • • • • •			·
b		1,947,177.	10c	1,953,160.
11	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	_	·
12	· · · · ·	5,974,024.		4,440,335.
13	· • • • • • • • • • • • • • • • • • • •			
14	· •			
15				
16		10,110,961.		8,062,892.
17				37,107.
18	, , ,	5,139.		0.
19	Deferred revenue		19	
20				
21	·		_	<del> </del>
22	· · · · · · · · · · · · · · · · · · ·			
			22	
23	•	· · · · · · · · · · · · · · · · · · ·		
24				·-·
25	· · · · · · · · · · · · · · · · · · ·			
	· · · · · · · · · · · · · · · · · · ·			
	, ,	726,058.	25	714,368.
26	· · · · · · · · · · · · · · · · · · ·			751,475.
				· · ·
27	Unrestricted net assets	9,369,641.	27	7,311,417.
28	Temporarily restricted net assets			
29			-	
30	•		30	
31	·			
32	· · · · · · · · · · · · · · · · · · ·			
33	Total net assets or fund balances	9,369,641.	33	7,311,417.
34	Total liabilities and net assets/fund balances	10,110,961.	34	8,062,892.
	5 6 7 8 9 10 a b 11 12 13 14 15 16 17 18 19 22 23 24 25 26 27 28 29 30 1	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(p)(1)), persons described in section 4958(p)(3)(B), and contributing employers and sponsoring organizations of section 501(p)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 1,953,160. 1 Investments · publicly traded securities 12 Investments · other securities. See Part IV, line 11 1 Investments · program-related. See Part IV, line 11 1 Intaglible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 10 Tax-exempt bond liabilities 11 Escrow or custodial account liability. Complete Part IV of Schedule D 10 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 10 Secured mortgages and notes payable to unrelated third parties 11 Unsecured notes and loans payable to unrelated third parties 12 Unsecured notes and loans payable to unrelated third parties 13 Unsecured notes and loans payable to unrelated third parties 14 Unsecured notes and loans payable to unrelated third parties 15 Other liabilities. Add lines 17 through 25 16 Total liabilities. Add lines 17 through 25 17 Organizations that follow SFAS 117 (ASC 958), check here   18 Temporarily restricted net assets 19 Permanently restricted net assets 20 Organizations that do not follow SFAS 117 (ASC 958), check here   21 Default or capital surplus, or land, building, or equipment fund 22 Retained earnings, endowment, accumul	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L  6 Loans and other receivables from other disqualified persons (as defined under section 4958)(()II), persons described in section 4958)(()()IB), and contributing employees and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L  Notes and loans receivable, net Inventiones for sale or use  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment cost or other basis. Complete Part IV of Schedule D Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - publicly traded securities 13 Investments - program-related. See Part IV, line 11 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 10 , 110 , 961. 17 Accounts payable and accrued expenses 10 Grants payable 10 Deferred revenue 10 Tax-exempt bond liabilities 11 Escrow or custodial account liability. Complete Part IV of Schedule D 12 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 10 Complete Part II of Schedule L 10 Secured mortgages and notes payable to unrelated third parties 11 Unsecured notes and loans payable to unrelated third parties 12 Other liabilities (including federal income tax, payables to related third parties 13 Organizations that follow SFAS 117 (ASC 958), check here   14 Organizations that follow SFAS 117 (ASC 958), check here   15 Total liabilities. Add lines 17 through 25 15 Organizations that do not follow SFAS 117 (ASC 958), check here   16 Total representation of the parties or frust principal, or current fund 17 Accounts payable to capital surplus, or land, building, or equipment fund 18 Pad-in or capital surplus, or land, build	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L  6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(g) voluntary employees' beneficiary organizations of section 501(c)(g) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L  Notes and loans receivable, net  1 Investments escensible, net  2 Inventores for sale or use  3 Prepaid expenses and deferred charges  9 Prepaid expenses and deferred charges  10 Land, buildings, and equipment cost or other basis. Complete Part Vi of Schedule D  1 Investments - publicly traded securities  1 Investments - publicly traded securities  1 Investments - program-related. See Part IV, line 11  1 Investments - program-related. See Part IV, line 11  1 Investments - program-related. See Part IV, line 11  1 Intragible assets  1 Cother assets See Part IV, line 11  1 Total assets. Add lines 1 through 15 (must equal line 34)  1 Cother assets See Part IV, line 11  1 Total assets. Add lines 1 through 15 (must equal line 34)  1 Capacity Byable and accrued expenses  1 10 , 110 , 961 - 16  1 Total assets payable  1 Tax-exempt bond liabilities  2 Tax-exempt bond liabilities  2 Escrow or custodial account liability. Complete Part IV of Schedule D  2 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L  2 Secured mortgages and notes payable to unrelated third parties  2 Secured mortgages and notes payable to unrelated third parties  2 Secured mortgages and notes payable to unrelated third parties  3 Crital liabilities, Add lines 17 through 25  3 Organizations and follow SFAS 117 (ASC 958), check here   3 Capital stock or trust principal, or current funds  3

Form **990** (2013)

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	1 990 (2013) NCCF TRUST	_58-63	70659	Pag	ge <b>12</b>
Pa	rf XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	-2,32		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,01	3,5	<u>44.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,34	0,4	$\overline{11.}$
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,36		
5	Net unrealized gains (losses) on investments	5	-14	1,9	98.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,42	4,1	<u>85.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	7,31	1,4	17.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
	<u></u>			Yes	No
1	Accounting method used to prepare the Form 990:  Cash  Accrual  Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u></u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,			
	consolidated basis, or both				
	Separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	<u></u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audıt			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		اعدا		i

Form **990** (2013)

**SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

NCCF TRUST

**Employer identification number** 58-6370659

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE PROCEEDS TO NATIONAL CHRISTIAN CHARITABLE FOUNDATION, OTHER CHARITIES IN THE SAME CLASS OF TAX EXEMPT CHARITABLE ORGANIZATIONS.

PART I, LINE 7B

EXPLANATION: THE 2013 FORM 990 IS BEING AMENDED DUE TO A CHANGE TO PART LINE 7B RESULTING FROM AN AMENDED 2013 FORM 990-T. THE 2013 FORM 990-T HAS BEEN AMENDED TO REPORT A NET OPERATING LOSS CARRY BACK TO 2012. THE SPECIFIC CHANGE TO THE 2013 FORM 990 IS THAT PART I, LINE 7B HAS BEEN INCREASED FROM \$(1,074,377) TO \$(249,530). THERE ARE NO OTHER CHANGES TO THE 2013 FORM 990 OR ANY OF THE ACCOMPANYING SCHEDULES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

SUPPORTED THE MISSION AND PERFORMED FUNCTIONS OF THE NATIONAL CHRISTIAN CHARITABLE FOUNDATION, INC. BY MAKING GRANTS TO IT AND OTHER CHARITIES IN THE SAME CLASS OF TAX-EXEMPT CHARITABLE ORGANIZATIONS.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: LINE 11A EXPLANATION - THE DRAFT FORM 990 IS PREPARED BY THE TAX COMPLIANCE MANAGER AND COMPARED WITH THE AUDITED FINANCIALS. THE DRAFT IS REVIEWED BY LEGAL COUNSEL, WHO PROVIDES FEEDBACK TO THE TAX COMPLIANCE MANAGER. IF CHANGES ARE MADE TO THE FORM, THE TAX COMPLIANCE MANAGER PROVIDES THE REVISED FORM TO THIS INDIVIDUAL FOR ANOTHER REVIEW. ONCE ALL

SUGGESTED CHANGES HAVE BEEN TAKEN INTO ACCOUNT, A FINAL FORM 990 IS LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2013)

332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization

NCCF TRUST

**Employer identification number** 

Page 2

58-6370659

PROVIDED TO THE BOARD OF DIRECTORS OF THE CORPORATE TRUSTEE FOR INFORMATIONAL PURPOSES ONLY. FINALLY, THE FORM IS FILED WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: NCCF TRUST'S ANNUAL REPORT AND ITS AUDITED FINANCIAL STATEMENT ARE AVAILABLE ON NCF'S WEBSITE AND UPON REQUEST. NCCF TRUST'S BYLAWS AND SIGNIFICANT OPERATIONAL POLICIES, SUCH AS THE CONFLICT OF INTEREST POLICY, ARE NOT AVAILABLE TO THE PUBLIC.

FORM 990, PART VI, LINE 12A

EXPLANATION: THE CORPORATION INTENDS TO IMPLEMENT A CONFLICT OF INTEREST POLICY AS FOLLOWS: OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO REVIEW AND CERTIFY ON AN ANNUAL BASIS THEIR UNDERSTANDING OF THE CORPORATION'S CONFLICT OF INTEREST POLICY AS ADOPTED BY THE BOARD OF DIRECTORS OF THE CORPORATION. FURTHERMORE, OFFICERS, DIRECTORS, AND KEY EMPLOYEES MUST CERTIFY THAT THEY AND THEIR FAMILY MEMBERS HAD NO INTEREST IN ANY TRANSACTION NOR TOOK ANY ACTION, WHICH WOULD CONTRAVENE THE CORPORATION'S CONFLICT OF INTEREST POLICY, EXCEPT SUCH INTEREST OR ACTION AS THEY HAVE FULLY DISCLOSED. EACH YEAR, GENERAL COUNSEL REVIEWS THE CERTIFICATIONS AND DETERMINES WHETHER EACH OFFICER, DIRECTOR, OR KEY EMPLOYEE HAS ANY CONFLICTS AND HOW TO ADDRESS SUCH CONFLICTS.

IF A CONFLICT OF INTEREST IS PRESENT, THE DIRECTOR WITH THE CONFLICT OF INTEREST IS REQUIRED TO MAKE ADEQUATE DISCLOSURE REGARDING THE NATURE OF THE CONFLICT TO THE OTHER DIRECTORS. IF ADEQUATE DISCLOSURE IS MADE. THEN ACTION BY THE BOARD RESPECTING THE TRANSACTION IS EFFECTIVE

Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization

NCCF TRUST

Employer identification number 58-6370659

Page 2

IF THE TRANSACTION RECEIVED THE AFFIRMATIVE VOTE OF A MAJORITY (BUT NOT LESS THAN TWO) OF THOSE DIRECTORS, OR A DULY EMPOWERED COMMITTEE

THEREOF, WHO DO NOT HAVE EITHER (1) A CONFLICTING INTEREST RESPECTING

THE TRANSACTION, OR (2) A FAMILIAL, FINANCIAL, PROFESSIONAL, OR

EMPLOYMENT RELATIONSHIP WITH THE DIRECTOR WHO DOES HAVE A CONFLICTING

INTEREST RESPECTING THE TRANSACTION, WHICH RELATIONSHIP WOULD

REASONABLY BE EXPECTED TO EXERT AN INFLUENCE ON THE DIRECTORS'

JUDGMENT.

IF THE DIRECTOR WITH THE CONFLICT OF INTEREST IS UNABLE TO MAKE

ADEQUATE DISCLOSURE REGARDING THE NATURE OF THE CONFLICT TO THE OTHER

DIRECTORS BECAUSE OF A DUTY UNDER LAW OR PROFESSIONAL CANON, OR A DUTY

OF CONFIDENTIALITY TO ANOTHER PERSON, RESPECTING INFORMATION RELATING

TO THE TRANSACTION SUCH THAT THE DIRECTOR CANNOT, CONSISTENT WITH THAT

DUTY, MAKE THE DISCLOSURE, THEN THE DIRECTOR MUST INFORM THE OTHER

DIRECTORS OF THE CHARACTER AND LIMITATIONS IMPOSED BY THAT DUTY PRIOR

TO ANY VOTE ON THE TRANSACTION; AND THE DIRECTOR MUST PLAY NO PART,

DIRECTLY TO INDIRECTLY, IN THE DELIBERATIONS OR VOTE ON THE

TRANSACTION.

FORM 990, PART VI, LINE 14

EXPLANATION: THE CORPORATION HAS DEVELOPED A DRAFT VERSION OF A

DOCUMENT RETENTION AND DESTRUCTION POLICY, WHICH IT INTENDS TO FINALIZE

AND ADOPT IN 2014.

FORM 990, PART VI, LINE 15B

EXPLANATION: THE ORGANIZATION HAS NO TOP MANAGEMENT OFFICIAL OR KEY

EMPLOYEE. THESE FUNCTIONS ARE PERFORMED BY THE SUPPORTED ORGANIZATION

332212 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization  NCCF TRUST	Employer identification number 58-6370659
THAT SERVES AS TRUSTEE FOR THIS ORGANIZATION.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
SHAREHOLDER DISTRIBUTIONS	409,999.
CHANGE IN VALUE OF ANNUITIES	-56,121.
BOOK TO TAX DIFF DUE TO UBI	1,074,377.
EXPENSES NOT INCLUDED IN TR	-4,070.
TOTAL TO FORM 990, PART XI, LINE 9	1,424,185.
	<del></del>
	<del></del>