See a Social Security Number? Say Something!
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Or call the IRS Identity Theft Hotline at 1-800-908-4490

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.

▶ Information about Form 990 and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 5/1/2013 , and ending 4/30/2014

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization: Covenant Network

Doing Business As:

Number and street (or P O box if mail is not delivered to street address): 4424 Hampton Ave

Room/suite:

City or town: St Louis

State: MO

ZIP code: 63109

Foreign country name / Foreign province/state/county / Foreign postal code:

D Employer identification number: 43-1768606

E Telephone number: (314) 752-7000

G Gross receipts $: 1,173,444

F Name and address of principal officer: John A. Holman 4424 Hampton Ave , St Louis, MO 63109

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ covenantnet net

H(c) Group exemption number ▶

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1996

M State of legal domicile: MO

Part I Summary

1 Briefly describe the organization's mission or most significant activities: To Evangelize and teach the Catholic Faith primarily through radio Most significant activities are Catholic programming through the fifteen full powered Catholic radio stations and ten translator stations

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	3
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	0
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	9
6	Total number of volunteers (estimate if necessary)	6	30
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	300
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	1,011,893	1,076,192
9	Program service revenue (Part VIII, line 2g)	50,857	46,546
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,975	24,197
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,415	3,070
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,069,140	1,150,005
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	11,545	7,800
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	228,297	284,462
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 111,933		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	669,969	712,374
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	909,811	1,004,636
19	Revenue less expenses Subtract line 18 from line 12	159,329	145,369

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	2,864,093	2,915,102
21	Total liabilities (Part X, line 26)	1,002,103	907,743
22	Net assets or fund balances Subtract line 21 from line 20	1,861,990	2,007,359

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

Sign Here

Signature of officer — Date: 12/11/14

Type or print name and title: JOHN ANTHONY HOLMAN, PRESIDENT

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☒ if self-employed	PTIN
Deborah Lewis	Deborah Lewis	12/8/2014		P00964848

Firm's name ▶ Deborah A Lewis, CPA, MBA — Firm's EIN ▶ 43-1724322

Firm's address ▶ 1701 Fairfax Circle, Barnhart, MO 63012 — Phone no 636-464-1845

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate Instructions.

HTA

Form **990** (2013)

G17

SCANNED JAN 12 2015

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☐

1 Briefly describe the organization's mission

To evanglize and teach the Catholic Faith primarily through radio and to distribute religious materials.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 713,632 including grants of $ 7,800) (Revenue $ 46,546)

Operating expenses and announcement contributions for fifteen full power Catholic radio stations and ten translator stations which are part of the Covenant Network and to a lesser extent distribution of materials to share and teach the Catholic faith Unknown number of listeners served for 25 broadcast facilities.

4b (Code) (Expenses $ including grants of $) (Revenue $)

4c (Code.) (Expenses $ including grants of $) (Revenue $)

4d Other program services. (Describe in Schedule O.)
(Expenses $ 0 including grants of $ 0) (Revenue $ 0)

4e Total program service expenses ► 713,632

Part IV Checklist of Required Schedules

			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	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	X	
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
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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
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		X
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		X
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		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
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		X
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		X
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		X
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		X
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		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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	X	
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		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		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		X
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		X
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		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)			
a	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		X
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		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *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 sections 301 7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
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		
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		X
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		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	38	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V . . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	26		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			X	
2a	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	2a	9		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?				X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*				
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)?				X
b	If "Yes," enter the name of the foreign country ► ---------- See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?				X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			X	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			X	
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?				
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?				
b	Did the organization make a distribution to a donor, donor advisor, or related person?				
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter.				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	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.				
b	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	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?				X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*				

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.*
Check if Schedule O contains a response or note to any line in this Part VI X

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 . . . 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	1a 3		
b	Enter the number of voting members included in line 1a, above, who are independent .	1b 0		
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	X	
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders? . . .	6		X
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		X
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	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* .	9		X

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		X
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	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
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	X	
14	Did the organization have a written document retention and destruction policy? . . .	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
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

17 List the states with which a copy of this Form 990 is required to be filed ► IL

18 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 ☒ Upon request ☐ Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► Joe Adams (314) 752-7000
4424 Hampton Ave , St Louis, MO 63109

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.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) John A Holman	42 00									
Pres/Gen Mgr	0 00	X		X				57,657		20,011
(2) Teresa Holman	34.00									
Secretary/Assistant Mgr	0 00	X		X				32,721		3,871
(3) Tammy Keppner	0 01									
Treasurer	0 00	X		X						
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

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 for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b **Sub-total** ▶								90,378	0	23,882
c **Total from continuation sheets to Part VII, Section A** ▶								0	0	0
d **Total (add lines 1b and 1c)** ▶								90,378	0	23,882

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 0

		Yes	No
3	Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
		0
		0
		0
		0
		0

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 ▶ 0

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a 0				
	b	Membership dues	1b 0				
	c	Fundraising events	1c 0				
	d	Related organizations	1d 0				
	e	Government grants (contributions)	1e 0				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 1,076,192				
	g	Noncash contributions included in lines 1a-1f:	$ 15,167				
	h	**Total.** Add lines 1a–1f	▶	1,076,192			
Program Service Revenue			Business Code				
	2a	Announcement Income	900099	46,546	46,546		
	b			0			
	c			0			
	d			0			
	e			0			
	f	All other program service revenue		0			
	g	**Total.** Add lines 2a–2f	▶	46,546			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	▶	3,684	3,684		
	4	Income from investment of tax-exempt bond proceeds	▶	0			
	5	Royalties	▶	0			
			(i) Real / (ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	c	Rental income or (loss)	0 / 0				
	d	Net rental income or (loss)	▶	0			
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	23,952 / 20,000				
	b	Less cost or other basis and sales expenses	23,439 / 0				
	c	Gain or (loss)	513 / 20,000				
	d	Net gain or (loss)	▶	20,513	20,513		
	8a	Gross income from fundraising events (not including $ 0 of contributions reported on line 1c). See Part IV, line 18	a 0				
	b	Less direct expenses	b 0				
	c	Net income or (loss) from fundraising events	▶	0			
	9a	Gross income from gaming activities See Part IV, line 19	a 0				
	b	Less direct expenses	b 0				
	c	Net income or (loss) from gaming activities	▶	0			
	10a	Gross sales of inventory, less returns and allowances	a 0				
	b	Less. cost of goods sold	b 0				
	c	Net income or (loss) from sales of inventory	▶	0			
		Miscellaneous Revenue	Business Code				
	11a	state discount		117	117		
	b	health Ins Credit		2,588	2,588		
	c	Tower Grass & Electric		365	65	300	
	d	All other revenue		0			
	e	**Total.** Add lines 11a–11d	▶	3,070			
	12	**Total revenue.** See instructions	▶	1,150,005	73,513	300	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	7,800	7,800		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	108,199	10,820	67,599	29,780
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	121,942	67,562	45,256	9,124
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	37,325	9,225	18,998	9,102
10	Payroll taxes	16,996	5,848	8,255	2,893
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	16,239	16,239		
c	Accounting	7,700		7,700	
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	78,377	77,772		605
12	Advertising and promotion	2,446	2,446		
13	Office expenses	116,094	63,681	21,305	31,108
14	Information technology	12,117	8,474	3,643	
15	Royalties	0			
16	Occupancy	175,091	166,813	4,139	4,139
17	Travel	19,444	19,444		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	28,746	3,564		25,182
20	Interest	50,262	50,262		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	128,309	128,309	0	0
23	Insurance	46,222	44,116	2,106	
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)				
a	Licenses & Permits	23,953	23,883	70	
b	Dues & Subscriptions	6,026	6,026		
c	Miscellaneous	1,348	1,348		
d		0			
e	All other expenses	0			
25	**Total functional expenses.** Add lines 1 through 24e	1,004,636	713,632	179,071	111,933
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)	66,350	24,213	586	41,551

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		172,832	1	137,954
	2	Savings and temporary cash investments		1,355,434	2	1,503,491
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		0	4	0
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			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 employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment. cost or other basis Complete Part VI of Schedule D	10a 1,909,127			
	b	Less accumulated depreciation	10b 1,005,389	897,164	10c	903,738
	11	Investments—publicly traded securities		8,272	11	0
	12	Investments—other securities See Part IV, line 11		0	12	0
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets		429,501	14	368,029
	15	Other assets See Part IV, line 11		890	15	1,890
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		2,864,093	16	2,915,102
Liabilities	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	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			22	
	23	Secured mortgages and notes payable to unrelated third parties		991,962	23	902,597
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		10,141	25	5,146
	26	**Total liabilities.** Add lines 17 through 25		1,002,103	26	907,743
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets			27	
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC958), check here ▶ ☒ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds		1,861,990	32	2,007,359
	33	Total net assets or fund balances		1,861,990	33	2,007,359
	34	Total liabilities and net assets/fund balances		2,864,093	34	2,915,102

Part XI Reconciliation 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)	1	1,150,005
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,004,636
3	Revenue less expenses. Subtract line 2 from line 1	3	145,369
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,861,990
5	Net unrealized gains (losses) on investments	5	
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	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,007,359

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . . ☐

			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 O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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	2a		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b		X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	X	
3a	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		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
Covenant Network	43-1768606

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☒ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III–Functionally integrated d ☐ Type III–Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? . . . . . 11g(i)

(ii) A family member of a person described in (i) above? . . . . . 11g(ii)

(iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . . 11g(iii)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									0

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar 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 include any "unusual grants.")						0
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 **Total.** Add lines 1 through 3	0	0	0	0	0	0
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	0	0	0	0	0	0
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0
11 **Total support.** Add lines 7 through 10						0

12 Gross receipts from related activities, etc (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14	Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	0 00%
15	Public support percentage from 2012 Schedule A, Part II, line 14	15	0 00%

16a **33 1/3% support test—2013.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **33 1/3% support test—2012.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **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—2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 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 . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ ☐

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

Calendar 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 include any "unusual grants.")	800,796	890,877	908,434	1,011,893	1,076,193	4,688,193
2 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	58,261	58,954	64,246	50,857	46,546	278,864
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 **Total.** Add lines 1 through 5	859,057	949,831	972,680	1,062,750	1,122,739	4,967,057
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	119,847	179,100	126,800	208,800	231,982	866,529
b 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	5,452	4,796	4,406	2,423	705	17,782
c Add lines 7a and 7b	125,299	183,896	131,206	211,223	232,687	884,311
8 **Public support** (Subtract line 7c from line 6.)						4,082,746

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	859,057	949,831	972,680	1,062,750	1,122,739	4,967,057
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	18,224	10,307	4,727	4,136	3,693	41,087
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	18,224	10,307	4,727	4,136	3,693	41,087
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	101	99	2,246	2,415	3,070	7,931
13 **Total support.** (Add lines 9, 10c, 11, and 12)	877,382	960,237	979,653	1,069,301	1,129,502	5,016,075

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	81 39%
16	Public support percentage from 2012 Schedule A, Part III, line 15	16	83 44%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	0 82%
18	Investment income percentage from **2012** Schedule A, Part III, line 17	18	1 41%

19a **33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **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 ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **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).

Part III Line 12 state discount and health insurance credit

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
Covenant Network	43-1768606

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ---

4 Number of states where property subject to conservation easement is located ▶ ---

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ ---

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ---

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ---

(ii) Assets included in Form 990, Part X ▶ $ ---

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ---

b Assets included in Form 990, Part X ▶ $

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.
Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

		Amount
c	Beginning balance	1c 0
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f 0

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds.
Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	0	0	0	0	0
b	Contributions					
c	Net investment earnings, gains, and losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance	0	0	0	0	0

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as.

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Temporarily restricted endowment ▶ _____ %
The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by.

		Yes	No
(i)	unrelated organizations 3a(i)		
(ii)	related organizations 3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	0	250,631		250,631
b	Buildings	0	300,019	56,088	243,931
c	Leasehold improvements	0	0	0	0
d	Equipment	0	1,358,477	949,301	409,176
e	Other	0	0	0	0
Total.	Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)*			▶	903,738

Part VII Investments—Other Securities.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely-held equity interests	0	
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12.)* ▶	0	

Part VIII Investments—Program Related.
Complete if the organization 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 Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total *(Column (b) must equal Form 990, Part X, col (B) line 13.)* ▶	0	

Part IX Other Assets.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶	0

Part X Other Liabilities.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) Credit Cards & Payroll Liabilities	5,146
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	5,146

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	1,150,005
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	1,150,005
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total revenue Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12)*			5	1,150,005

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total expenses and losses per audited financial statements			1	1,004,636
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	1,004,636
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	1,004,636

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Part XIII Supplemental Information *(continued)*

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

Name of the organization

Covenant Network

Employer identification number

43-1768606

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount 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)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶ 0

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Part I Line 2 Records are maintained with the name of the organization and amounts given. No one organization received more than $5000

Covenant Network primarily selects charitable organizations that are similar or compatible to Covenant Networks tax exempt purpose

SCHEDULE O
(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

2013

Open to Public Inspection

Name of the organization	Employer identification number
Covenant Network	43-1768606

Form 990, Part VI, Section A, Line 2 Family Relationship therefore not independent

Form 990, Part VI, Section B, Line 11a Governing body receives a copy to review Form 990 and Audit The Form 990 was reviewed by the members of the Governing Body prior to filing with the Internal Revenue Service

Form 990, Part VI, Section B, Line 12c The members of the governing body, including officers, directors, and key employees are required to disclose all transactions which may give rise to a conflict of interest on an annual basis through a written questionaire.

Form 990, Part VI, Section B, Line 15a The Finance Committee established a Compensation Committee which determines the salary of the board of directors, officers and top key employees Compensation committee received comparitability compensation study form independent firm

Form 990, Part VI, Section C, Line 19 Governing documents, conflict of interest policy and financial statements are made available to public upon request

Form 990, Part VI, Section A, Line 7b All governances are determined by governing body except for those that establish compensation for the board of directors This decision is handled by the Compensation Committee In the event of a simultanious vacancy in all three director positions by death or resignation, retirement, disqualification, or any other cause all three said vacancies shall be filled by a majority vote of the Finance Committee

Form 990, Part VI, Section B, Line 15b The Finance Committee excluding directors, officers, and top key employees established a Compensation Committee which determines the salary of the directors, officers, and top key employees.

Name of the organization	Employer identification number
Covenant Network	43-1768606

Elections

Election to NOT claim first-year special depreciation - All Property

Pursuant to IRC Section 168(k)(2)(D)(iii), the Taxpayer elects out of first-year special depreciation for all depreciable property placed in service during the current tax year.

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

			Cash	Noncash
1	Federated Campaigns	1		
2	Membership dues	2		
3	Fundraising events	3		
4	Related organizations	4		
5	Government grants (contributions)	5		
6	All other contributions, gifts, grants, and similar amounts not included above			
	Cash Contributions		1,061,025	
	Public Securities			15,167
	Other contributions total	6	1,061,025	15,167
7	Total	7	1,061,025	15,167

Part VIII, Line 7 (990) - Gain/Loss from Sale of Assets Other than Inventory

	Gross sales	Cost, other basis and expenses
Total Public Securities	23,952	23,439
Total Non-Public Securities	0	0
Total Other Sales	20,000	0

	Description	CUSIP #	Check if gain/loss is from sale of public securities	Check if gain/loss is from sale of non public securities	Check if purchaser is a business	Purchaser	Date acquired	Acquisition method	Date sold	Gross sales price	Cost or other basis (Enter one field only) Cost	Donated value	Expense of sale and cost of improvements	Depreciation	Description of Basis Method
1	Chadron Translator					Catholic Spirit Radio	3/30/2004	purchase	9/12/2013	20,000	10,500			10,500	
2	35 shs Walmart		X				3/8/2013	donated	8/20/2013	2,565		2,559			
3	30 shs Exxon Mobile		X				4/18/2012	donated	8/20/2013	2,629		2,566			
4	28 shs Exxon Mobile		X				9/25/2012	donated	8/20/2013	2,454		2,578			
5	10 shs Express Scripts		X				4/3/2012	donated	8/20/2013	638		570			
6	25 shs Monsanto		X				9/18/2013	donated	12/30/2013	2,876		2,621			
7	31 shs Phillips 66		X				4/24/2014	donated	4/29/2014	2,577		2,554			
8	92 shs Anheuser Busch		X				4/23/2014	donated	4/29/2014	10,213		9,991			

Part IX, Line 22 (990) - Depreciation, Depletion, and Amortization

		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
1 Depreciation	1	66,837	66,837		
2 Depletion	2	0			
3 Amortization	3	61,472	61,472		
4 Total	4	128,309	128,309	0	0

Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

	Category or Item	Land	Buildings	Leasehold Improve-ments	Equipment	Other	Check if Investment Asset	Check if Asset Disposed	Cost/Other Basis	Beginning Accumulated Depreciation	Ending Accumulated Depreciation	Disposals/ Adjustments	Beginning Balance	Ending Balance
	Total:								1,909,127	949,053	1,005,389	0	897,164	903,738
1	Land WIHM	X							5,000				5,000	5,000
2	Station Land WRMS	X							23,189				23,189	23,189
3	Land New Building	X							200,592				200,592	200,592
4	WRYT Equipment				X				302,107	229,537	238,930		22,859	63,177
5	WRYT New Building		X						300,019	48,396	56,088		251,623	243,931
6	WIHM Equipment				X				59,338	56,229	56,627		3,109	2,711
7	WOLG Equipment				X				112,381	111,271	111,821		1,110	560
8	WHOJ Equipment				X				56,501	56,170	56,272		331	229
9	KHOJ Equipment				X				243,397	160,019	174,766		82,847	68,631
10	WRMS Equipment				X				136,363	101,502	103,531		34,861	32,832
11	WCKW Equipment				X				85,767	81,477	85,390		4,290	377
12	K207BY, K216DI, K219CX Equipment				X				21,531	31,632	21,246		399	285
13	KBKC Equipment				X				20,431	19,899	20,197		532	234
14	WRYT License					X			0				0	0
15	WIHM License					X			0				0	0
16	WCKW License					X			0				0	0
17	WOLG License					X			0				0	0
18	WHOJ License					X			0				0	0
19	KBKC License					X			0				0	0
20	K219CX, K207BY, K216DI License					X			0				0	0
21	KHOJ License					X			0				0	0
22	WRMS License					X			0				0	0
23	KHJM Dexter Equipment				X				27,329	18,207	20,869		9,122	6,460
24	KEFL Station				X				40,010	7,679	10,957		32,331	29,053
25	Station Land KEFL	X							5,850				5,850	5,850
26	KHJR Station				X				65,812	9,489	15,210		56,323	50,602
27	WGMR Station				X				25,221	3,679	5,863		21,542	19,358
28	WHJR Station				X				26,389	3,846	6,126		22,543	20,263
29	WMSH Station				X				64,751	9,421	14,996		55,330	49,755
30	WIHM-FM Station				X				47,981	600	5,341		47,381	42,640
31	Station Land WRYT	X							16,000				16,000	16,000
32	Mattoon IL Translator				X				10,353		518			9,835
33	Mt Vernon IL Translator				X				10,575		529			10,046
34	Williamsville Translator				X				2,240		112			2,128
35									0					0

Part X, Lines 11 and 12 (990) - Investments - Securities

	Description	Check if Publicly Traded Securities?	Check if Financial Derivatives	Check if Closely-Held Equity Interests	Number of Shares/ Face Value	Value at Time of Donation	Beginning Balance Book Value Cost	Ending Balance Book Value Cost
	Total:					7,626	8,272	0
1	30 shs Exxon Mobil	X			30 00	2,490	0	0
2	10 Shs Express Scripts	X			10 00		570	0
3	30 shs Exxon Mobil	X			30 00		2,566	0
4	28 shs Exxon Mobil	X			28 00	2,577	2,577	0
5	35 shs Walmart	X			35 00	2,559	2,559	0

Part X, Line 15 (990) - Other Assets

		Total:	890	1,890
	Description		Beginning	End
1	Utility Deposits		890	890
2	Escrow			1,000

Part X, Lines 23 and 24 (990) - Secured and Unsecured Notes Payable

			Total:	991,962	902,597
	Lender's name	Check if Unsecured		Balance due beginning of year	Balance due end of year
1	US Bank Imm Heart of Mary			101,456	82,089
2	Commerce Bank Loan			87,448	76,345
3	Citizens Bank Loan			537,021	503,275
4	Reliance Bank			266,037	240,888

Part X, Line 25 (990) - Other Liabilities

		Total:	10,141	5,146
	Description		Beginning	End
1	Federal income taxes		0	0
2	Credit Cards & Payroll Liabilities		10,141	5,146

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2013

Attachment Sequence No **179**

Name(s) shown on return	Business or activity to which this form relates	Identifying number
Covenant Network	990	43-1768606

Part I Election To Expense Certain Property Under Section 179

Note: *If you have any listed property, complete Part V before you complete Part I*

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	66,871
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0-. If married filing separately, see instructions	5	500,000

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property Enter the amount from line 29	7		
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7		8	0
9	Tentative deduction Enter the **smaller** of line 5 or line 8		9	0
10	Carryover of disallowed deduction from line 13 of your 2012 Form 4562		10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)		11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11		12	0
13	Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 ▶	13	0	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V*

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2013	17	62,542
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B - Assets Placed in Service During 2013 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a	3-year property						
b	5-year property		1,460	5	HY	200DB	292
c	7-year property		6,290	7	HY	200DB	898
d	10-year property						
e	15-year property		59,121	15	HY	150DB	2,957
f	20-year property						
g	25-year property			25 yrs		S/L	
h	Residential rental property			27 5 yrs	MM	S/L	
				27 5 yrs	MM	S/L	
i	Nonresidential real property	3/12/2014	6,539	39 yrs	MM	S/L	21
					MM	S/L	

Section C - Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System

20 a	Class life					S/L	
b	12-year			12 yrs		S/L	
c	40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	127
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations - see instructions	22	66,837
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete* ***only*** *24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable*

Section A—Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles* **)**

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/ investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						**25**		
26 Property used more than 50% in a qualified business use:								
WRYT Computer Office	11/4/2010	100 00%	1,035	1,035	5	200DB - MQ	127	
27 Property used 50% or less in a qualified business use								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						**28**	127	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							**29**	0

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (**do not** include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
	Yes	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

	Yes	**No**
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: *If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.*

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2013 tax year (see instructions).					
43 Amortization of costs that began before your 2013 tax year				**43**	61,472
44 **Total.** Add amounts in column (f). See the instructions for where to report				**44**	61,472

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Item No	Description of Property	Date Placed In Service	Asset Code	Business Use %	Cost or Other Basis	Sec 179 Deduction	Credit	Special Allowance	Salvage Value	Recovery Basis	Recovery Period	Method	Con-vention Code	Prior Accum Deprec, 179, Bonus	2013 Deprec	2013 Accum Deprec
Depreciation Detail																
MACRS deductions for prior years (Line 17)																
	WRMS Building & Tower	7/28/2004	R-5	100 00%	40,734	0	0	0	0	40,734	39	SL/GDS	MM	9,180	1,044	10,224
	KHOJ Studio Equipment	5/13/2005	F-17	100.00%	167,950	0	0	0	0	167,950	15	200DB	HY	106,210	9,926	116,136
	KHOJ Transmitter	6/21/2005	F-17	100 00%	33,003	0	0	0	0	33,003	15	200DB	HY	20,870	1,950	22,820
	SA Receiver	5/30/2006	F-10	100 00%	502	0	0	0	0	502	7	200DB	HY	481	21	502
	WCKW Garyville, LA Studio Ec	10/17/2006	F-10	100 00%	79,106	0	0	0	0	79,106	7	200DB	HY	75,574	3,528	79,102
	3 Scientific Atlanta Receivers	10/25/2006	F-10	100 00%	1,485	0	0	0	0	1,485	7	200DB	HY	1,419	66	1,485
	New Building WRYT	1/3/2007	R-5	100 00%	300,019	0	0	0	0	300,019	39	SL/GDS	MM	48,396	7,692	56,088
	Broadcast Equip-phone interfa	1/8/2007	F-10	100 00%	1,357	0	0	0	0	1,357	7	200DB	HY	1,295	61	1,356
	Broadcast Equip Telephone int	1/22/2007	F-10	100 00%	1,706	0	0	0	0	1,706	7	200DB	HY	1,629	76	1,705
	Broadcast Equip Shure Wirele	3/13/2007	F-10	100 00%	362	0	0	0	0	362	7	200DB	HY	345	16	361
	2 SA Receiver	4/9/2007	F-10	100 00%	990	0	0	0	0	990	7	200DB	HY	944	44	988
	Studio Equip WCKW	4/27/2007	F-10	100 00%	234	0	0	0	0	234	7	200DB	HY	223	10	233
	Studio Equipment KHOJ	4/27/2007	F-10	100 00%	1,504	0	0	0	0	1,504	7	200DB	HY	1,436	67	1,503
	KHOJ Am Optimod	6/21/2007	F-10	100 00%	2,476	0	0	0	0	2,476	7	200DB	HY	2,144	221	2,365
	Studio Equipment	6/25/2007	F-10	100 00%	855	0	0	0	0	855	7	200DB	HY	740	76	816
	Equipment	7/9/2007	F-10	100 00%	3,162	0	0	0	0	3,162	7	200DB	HY	2,738	282	3,020
	Caryle Radio Equip	7/31/2007	F-10	100 00%	3,280	0	0	0	0	3,280	7	200DB	HY	2,842	293	3,135
	Equipment	8/9/2007	F-10	100 00%	3,218	0	0	0	0	3,218	7	200DB	HY	2,787	287	3,074
	Salem Radio Equip	8/27/2007	F-10	100 00%	2,649	0	0	0	0	2,649	7	200DB	HY	2,295	237	2,532
	2 Dayton AF310 AM Receivers	9/4/2007	F-10	100 00%	440	0	0	0	0	440	7	200DB	HY	381	39	420
	Martinsville Aluminum Electrica	9/7/2007	F-10	100 00%	833	0	0	0	0	833	7	200DB	HY	721	74	795
	Pittsfield Radio Equip	9/7/2007	F-10	100 00%	2,440	0	0	0	0	2,440	7	200DB	HY	2,115	218	2,333
	Equipment	9/7/2007	F-10	100 00%	871	0	0	0	0	871	7	200DB	HY	754	78	832
	3 Scientific Atlanta Receivers	9/14/2007	F-10	100 00%	1,485	0	0	0	0	1,485	7	200DB	HY	1,286	133	1,419
	Martinsville Radio Equip	9/24/2007	F-10	100 00%	3,638	0	0	0	0	3,638	7	200DB	HY	3,151	325	3,476
	Pittsfield Radio Equip	9/24/2007	F-10	100 00%	2,712	0	0	0	0	2,712	7	200DB	HY	2,349	242	2,591
	Salem Radio Equip	9/26/2007	F-10	100 00%	3,558	0	0	0	0	3,558	7	200DB	HY	3,080	318	3,398
	WOLG FM Transmitter	10/15/2007	F-10	100 00%	1,877	0	0	0	0	1,877	7	200DB	HY	1,625	168	1,793
	WOLG Audio Processor	12/7/2007	F-10	100 00%	1,743	0	0	0	0	1,743	7	200DB	HY	1,510	156	1,666
	2 Atlanta Receivers	2/7/2008	F-10	100 00%	990	0	0	0	0	990	7	200DB	HY	856	88	944
	equipment	2/7/2008	F-10	100.00%	375	0	0	0	0	375	7	200DB	HY	325	33	358
	Adapter Connector & Antenna	3/14/2008	F-10	100 00%	837	0	0	0	0	837	7	200DB	HY	726	75	801
	2 Atlanta Receivers	3/20/2008	F-10	100 00%	990	0	0	0	0	990	7	200DB	HY	856	88	944
	KBKC Sage Endec Eas Syster	4/14/2008	F-10	100 00%	2,318	0	0	0	0	2,318	7	200DB	HY	2,008	207	2,215
	WCKW Sine Systems Relay P.	4/28/2008	F-10	100 00%	315	0	0	0	0	315	7	200DB	HY	272	28	300
	KBKC Studio Equip	4/28/2008	F-10	100 00%	546	0	0	0	0	546	7	200DB	HY	473	49	522
	2 Atlanta Receivers	4/30/2008	F-10	100 00%	990	0	0	0	0	990	7	200DB	HY	856	88	944
	WCKW Meter	5/14/2008	F-10	100 00%	1,316	0	0	0	0	1,316	7	200DB	HY	1,022	117	1,139
	WRYT CAL Amp LNB	5/14/2008	F-10	100 00%	295	0	0	0	0	295	7	200DB	HY	229	26	255
	WHOJ CAL Amp LNB	5/14/2008	F-10	100 00%	295	0	0	0	0	295	7	200DB	HY	229	26	255
	WCKW CAL Amp LNB	5/14/2008	F-10	100 00%	295	0	0	0	0	295	7	200DB	HY	229	26	255
	Computer	5/20/2008	F-5	100.00%	1,042	0	0	0	0	1,042	5	200DB	HY	981	60	1,041
	WRMS Transmitter	7/31/2008	F-10	100 00%	8,050	0	0	0	0	8,050	7	200DB	HY	6,253	718	6,971
	WRMS Air Conditioner	8/6/2008	R-2	100 00%	1,701	0	0	0	0	1,701	15	150DB	HY	641	106	747
	WRYT Air Conditioner	8/13/2008	R-2	100 00%	6,350	0	0	0	0	6,350	15	150DB	HY	2,393	396	2,789
	WRMS Delta Meter	9/4/2008	F-10	100 00%	1,305	0	0	0	0	1,305	7	200DB	HY	1,014	116	1,130
	KHOJ Modulator	9/30/2008	F-10	100 00%	1,519	0	0	0	0	1,519	7	200DB	HY	1,181	135	1,316

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Item No	Description of Property	Date Placed In Service	Asset Code	Business Use %	Cost or Other Basis	Sec 179 Deduction	Credit	Special Allowance	Salvage Value	Recovery Basis	Recovery Period	Method	Con-vention Code	Prior Accum Deprec, 179, Bonus	2013 Deprec	2013 Accum Deprec
	WIHM Air Conditioner	10/6/2008	R-2	100 00%	2,615	0	0	0	0	2,615	15	150DB	HY	985	163	1,148
	WOLG Antenna & Power Drive	11/12/2008	F-10	100 00%	1,041	0	0	0	0	1,041	7	200DB	HY	809	93	902
	WCKW Satelite Dish	11/12/2008	F-10	100 00%	322	0	0	0	0	322	7	200DB	HY	250	29	279
	WOLG Power Cube Rebuild	1/8/2009	F-10	100 00%	850	0	0	0	0	850	7	200DB	HY	660	76	736
	KHOJ Modulator	3/6/2009	F-10	100 00%	736	0	0	0	0	736	7	200DB	HY	572	66	638
	Document Folder	8/3/2009	F-10	100 00%	1,802	0	0	0	0	1,802	7	200DB	MQ2	1,263	160	1,423
	Receiver Backup	9/29/2009	F-10	100 00%	350	0	0	0	0	350	7	200DB	MQ2	246	31	277
	Martinsville Antenna	9/29/2009	F-10	100 00%	400	0	0	0	0	400	7	200DB	MQ2	280	35	315
	Dexter Antenna	1/8/2010	F-10	100 00%	3,371	0	0	0	0	3,371	7	200DB	MQ3	2,274	314	2,588
	Dexter Amplifier, Exciter & Rac	1/8/2010	F-10	100 00%	13,007	0	0	0	0	13,007	7	200DB	MQ3	8,775	1,210	9,985
	Dexter Radio Equipment	2/4/2010	F-10	100 00%	9,415	0	0	0	0	9,415	7	200DB	MQ4	6,107	945	7,052
	Envelope Feeder	2/10/2010	F-10	100 00%	222	0	0	0	0	222	7	200DB	MQ4	144	22	166
	Receivers (3)	2/10/2010	F-10	100 00%	1,521	0	0	0	0	1,521	7	200DB	MQ4	986	153	1,139
	Dexter Programming Compute	3/10/2010	F-5	100 00%	1,069	0	0	0	0	1,069	5	200DB	MQ4	849	117	966
	2 receivers	4/8/2010	F-10	100 00%	1,009	0	0	0	0	1,009	7	200DB	MQ4	655	101	756
	KHOJ Nightime Upgrade	4/15/2010	F-10	100 00%	10,145	0	0	0	0	10,145	7	200DB	MQ4	6,580	1,019	7,599
	Optiplex 760, Simian and Audi	4/15/2010	F-10	100 00%	2,824	0	0	0	0	2,824	7	200DB	MQ4	1,832	284	2,116
	KHOJ Romex	4/20/2010	F-10	100 00%	350	0	0	0	0	350	7	200DB	MQ4	226	35	261
	KHOJ Upgrade	5/10/2010	F-10	100 00%	10,947	0	0	0	0	10,947	7	200DB	MQ1	6,759	1,197	7,956
	Adapter/Hardware	6/9/2010	F-10	100 00%	381	0	0	0	0	381	7	200DB	MQ1	235	42	277
	KHOJ Studio Equip	6/9/2010	F-10	100 00%	159	0	0	0	0	159	7	200DB	MQ1	98	17	115
	WIHM Processor	6/22/2010	F-10	100 00%	1,736	0	0	0	0	1,736	7	200DB	MQ1	1,072	190	1,262
	WRYT Computer Studio	6/22/2010	F-5	100 00%	1,515	0	0	0	0	1,515	5	200DB	MQ1	1,160	167	1,327
	KHJM Satellite Receivers	8/10/2010	F-10	100 00%	256	0	0	0	0	256	7	200DB	MQ2	149	31	180
	WOLG Mixer	9/15/2010	F-10	100 00%	102	0	0	0	0	102	7	200DB	MQ2	59	12	71
	WRYT Satellite Receivers	11/12/2010	F-10	100 00%	226	0	0	0	0	226	7	200DB	MQ3	123	29	152
	WRYT Computer Studio	12/1/2010	F-5	100 00%	1,095	0	0	0	0	1,095	5	200DB	MQ3	759	134	893
	KEFL Kirsville Station	4/15/2011	F-17	100 00%	32,987	0	0	0	0	32,987	15	150DB	MQ4	6,604	2,639	9,243
	KEFL Equipment	5/2/2011	F-10	100 00%	146	0	0	0	0	146	7	200DB	HY	57	26	83
	KHJR Station	8/1/2011	F-17	100 00%	65,318	0	0	0	0	65,318	15	150DB	HY	9,471	5,585	15,056
	WGMR Station	9/1/2011	F-17	100 00%	25,012	0	0	0	0	25,012	15	150DB	HY	3,627	2,139	5,766
	WHJR Station	10/1/2011	F-17	100 00%	26,202	0	0	0	0	26,202	15	150DB	HY	3,799	2,240	6,039
	KEFL Tower	3/30/2012	F-17	100 00%	6,680	0	0	0	0	6,680	15	150DB	HY	969	571	1,540
	WMSH Station	4/1/2012	F-17	100 00%	64,452	0	0	0	0	64,452	15	150DB	HY	9,346	5,511	14,857
	WRYT Night Time Project	5/1/2012	F-17	100 00%	3,975	0	0	0	0	3,975	15	150DB	MQ1	348	363	711
	Equipment WMSH Sparta	5/3/2012	F-10	100 00%	299	0	0	0	0	299	7	200DB	MQ1	75	64	139
	Banx Exstreamer WCKW Gary	5/25/2012	F-10	100 00%	178	0	0	0	0	178	7	200DB	MQ1	45	38	83
	Banx Exstreamer WRYT	5/25/2012	F-10	100 00%	178	0	0	0	0	178	7	200DB	MQ1	45	38	83
	Banx instreamer WRYT	5/25/2012	F-10	100 00%	362	0	0	0	0	362	7	200DB	MQ1	91	78	169
	Banx Exstreamer KHJM	5/30/2012	F-10	100 00%	211	0	0	0	0	211	7	200DB	MQ1	53	45	98
	Banx Exstreamer WHJR	6/4/2012	F-10	100 00%	187	0	0	0	0	187	7	200DB	MQ1	47	40	87
	Chadron Banx Exstreamer	6/13/2012	F-10	100 00%	177	0	0	0	0	177	7	200DB	MQ1	44	38	82
	Harvey Banx Exstreamer	6/13/2012	F-10	100 00%	177	0	0	0	0	177	7	200DB	MQ1	44	38	82
	AToka Banx Exstreamer	6/13/2012	F-10	100 00%	177	0	0	0	0	177	7	200DB	MQ1	44	38	82
	2 WHOJ Banx Exstreamer	6/13/2012	F-10	100 00%	354	0	0	0	0	354	7	200DB	MQ1	89	76	165
	KHOJ Banx Exstreamer	6/13/2012	F-10	100 00%	177	0	0	0	0	177	7	200DB	MQ1	44	38	82
	KBKC Banx Exstreamer	6/25/2012	F-10	100 00%	198	0	0	0	0	198	7	200DB	MQ1	50	42	92
	KEFL Banx Exstreamer	6/25/2012	F-10	100 00%	197	0	0	0	0	197	7	200DB	MQ1	49	42	91
	Banx Exstreamer WGMR	6/29/2012	F-10	100 00%	209	0	0	0	0	209	7	200DB	MQ1	52	45	97
	550W Exciter WRYT	11/14/2012	F-10	100 00%	2,561	0	0	0	0	2,561	7	200DB	MQ3	274	653	927

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	3 Banx Exstreamer WOLG WI	12/6/2012	F-10	100 00%	533	0	0	0	0	533	7	200DB	MQ3	57	136	193
	WRYT Light Replacement	12/13/2012	F-17	100 00%	3,542	0	0	0	0	3,542	15	150DB	MQ3	133	341	474
	2 Banx Exstreamer	3/7/2013	F-10	100 00%	360	0	0	0	0	360	7	200DB	MQ4	13	99	112
	Equipment KHJR	3/9/2013	F-10	100 00%	494	0	0	0	0	494	7	200DB	MQ4	18	136	154
	WIHM-FM Station	3/29/2013	F-17	100 00%	47,981	0	0	0	0	47,981	15	150DB	MQ4	600	4,741	5,341
	Total MACRS deductions for prior years (Line 17)				1,044,508	0	0	0	0	1,044,508				399,059	62,542	461,601
GDS 5-year property (Line 19b)																
	WRYT Computer	9/18/2013	F-5	100 00%	1,460	0	0	0	0	1,460	5	200DB	HY	0	292	292
	Total GDS 5-year property (Line 19b)				1,460	0	0	0	0	1,460				0	292	292
GDS 7-year property (Line 19c)																
	Optimod WRYT	5/28/2013	F-10	100 00%	1,884	0	0	0	0	1,884	7	200DB	HY	0	269	269
	KHOJ Banx Exstreamer	2/11/2014	F-10	100 00%	207	0	0	0	0	207	7	200DB	HY	0	30	30
	KHOJ Sine System	2/11/2014	F-10	100 00%	324	0	0	0	0	324	7	200DB	HY	0	46	46
	WRYT Sine System	2/11/2014	F-10	100 00%	324	0	0	0	0	324	7	200DB	HY	0	46	46
	WRYT Tower Light	4/14/2014	F-10	100 00%	3,551	0	0	0	0	3,551	7	200DB	HY	0	507	507
	Total GDS 7-year property (Line 19c)				6,290	0	0	0	0	6,290				0	898	898
GDS 15-year property (Line 19e)																
	Mattoon, IL Translator	11/21/2013	F-17	100 00%	10,353	0	0	0	0	10,353	15	150DB	HY	0	518	518
	Mt Vernon IL Translator	12/23/2013	F-17	100 00%	10,575	0	0	0	0	10,575	15	150DB	HY	0	529	529
	WRYT NightTime Upgrade	1/20/2014	F-17	100 00%	35,953	0	0	0	0	35,953	15	150DB	HY	0	1,798	1,798
	Williamsville Translator	4/30/2014	F-17	100 00%	2,240	0	0	0	0	2,240	15	150DB	HY	0	112	112
	Total GDS 15-year property (Line 19e)				59,121	0	0	0	0	59,121				0	2,957	2,957
GDS nonresidential real property (Line 19i)																
	WRYT Heater/Cooler	3/12/2014	R-5	100 00%	6,539	0	0	0	0	6,539	39	SL/GDS	MM	0	21	21
	Total GDS nonresidential real property (Line 19i)				6,539	0	0	0	0	6,539				0	21	21
	Subtotal Depreciation				1,117,918	0	0	0	0	1,117,918				399,059	66,710	465,769
Listed Property																
Listed property with more than 50% business use (Line 25 and 26)																
21	WIHM Computer	7/16/1998	F-4	100 00%	1,280	0	0	0	0	1,280	5	200DB	HY	1,280	0	1,280
35	WOLG Computer	7/16/1998	F-4	100 00%	1,280	0	0	0	0	1,280	5	200DB	HY	1,280	0	1,280
18	WRYT 2 Computers	7/16/1998	F-4	100 00%	2,560	0	0	0	0	2,560	5	200DB	HY	2,560	0	2,560
	WRYT Computer Office	11/4/2010	F-4	100 00%	1,035	0	0	0	0	1,035	5	200DB	MQ3	718	127	845
46	WRYT Comuter with CDRW	5/11/2000	F-4	100 00%	1,220	0	0	0	0	1,220	5	200DB	HY	1,220	0	1,220
45	WRYT Office Computer	9/22/1999	F-4	100 00%	640	0	0	0	0	640	5	200DB	HY	640	0	640
50	WRYT Okidata Printer	12/20/2000	F-4	100 00%	756	0	0	0	0	756	5	200DB	HY	756	0	756
47	WRYT Printer	9/21/2000	F-4	100 00%	670	0	0	0	0	670	5	200DB	HY	670	0	670
	Total listed prop with > 50% business use				9,441	0	0	0	0	9,441				9,124	127	9,251
	Subtotal Listed Property				9,441	0	0	0	0	9,441				9,124	127	9,251

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Total Amortization (Line 44)																
72	License WHOJ	3/30/2004	Z-9	100 00%	13,777	0	0	0	0	13,777	10	SL	FM	12,632	1,145	13,777
73	License KBKC	3/30/2004	Z-9	100 00%	4,370	0	0	0	0	4,370	10	SL	FM	4,006	364	4,370
74	License K219CX	3/30/2004	Z-9	100 00%	2,740	0	0	0	0	2,740	10	SL	FM	2,512	228	2,740
75	License K207BY	3/30/2004	Z-9	100 00%	2,740	0	0	0	0	2,740	10	SL	FM	2,512	228	2,740
76	License K216DI	3/30/2004	Z-9	100 00%	2,740	0	0	0	0	2,740	10	SL	FM	2,512	228	2,740
	WRMS License	7/28/2004	Z-9	100 00%	210,000	0	0	0	0	210,000	15	SL	FM	123,670	14,000	137,670
	KHOJ License	5/13/2005	Z-9	100 00%	560,520	0	0	0	0	560,520	15	SL	FM	286,488	37,368	323,856
	WCKW Garyville, LA Radio Lic	10/17/2006	Z-9	100 00%	118,660	0	0	0	0	118,660	15	SL	FM	51,714	7,911	59,625
	Total Amortization (Line 44)				915,547	0	0	0	0	915,547				486,046	61,472	547,518
	Total Depreciation and Amortization				2,042,906	0	0	0	0	2,042,906				894,229	128,309	1,022,538

Form **8868**
(Rev January 2014)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.
► Information about Form 8868 and its instructions is at *www.irs.gov/form8868.*

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box . ► ☐
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing *(e-file).* You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit *www.irs gov/efile* and click on *e-file for Charities & Nonprofits*

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only . . . . . ► ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
File by the due date for filing your return See instructions	Covenant Network	43-1768606
	Number, street, and room or suite no If a P.O box, see instructions. 4424 Hampton Ave.	Social security number (SSN)
	City, town or post office, state, and ZIP code For a foreign address, see instructions St Louis, MO 63109	

Enter the Return code for the return that this application is for (file a separate application for each return) . 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► Joe Adams

Telephone No ► (314) 752-7000 Fax No ►

- If the organization does not have an office or place of business in the United States, check this box . ► ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box . ► ☐ If it is for part of the group, check this box . ► ☐ and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 12/15/2014, to file the exempt organization return for the organization named above The extension is for the organization's return for.

► ☐ calendar year _____ or

► ☒ tax year beginning 5/1/2013 , and ending 4/30/2014

2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	$ 0
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	3b	$ 0
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c	$ 0

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions