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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2014

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public

Inspection

<u>A</u>	For the	2014 cate	endar year, or tax year	beginning	January 1	, 2014, a	and ending	Decen	nber 31	<u>, 20 14 </u>	
₿	Check if	applicable	C Name of organization	Christian Traini	ng and Mission	ary Fellwoship)		D Employ	er identification ni	ımber
	Address	change	Doing business as Th	e Christiain Tra	inslator's Fellov	wship Inc (Only	y ın Philippi	ines)		23-2150107	
П	Name ch	_	Number and street (or				Room/suite		E Telepho	ne number	
$\overline{\Box}$	Initial ret	_	442 Sugg St.					i		(207)2457811	
\Box			01 1 111	rovince country a	nd ZIP or foreign o	onstal code	I			(201)2431611	
		rn/terminated	1	•	no En Oriorcign p	ostar code					
님	Amende		Madisonville KY 424					 _	G Gross re		155,107
Ш	Applicati	on pending	F Name and address of p	rincipal officer				1		subordinates? Yes	
			<u>L</u>							s included? 🔲 Yes	
<u> </u>	Tax-exer	npt status	✓ 501(c)(3)	☐ 501(c) () ◀ (insert no) [4947(a)(1) or	527	It "N	o," attach a	a list (see instructio	ns)
J	Website	: ▶						H(c) Group	exemption	number ▶	
K	Form of o	organization	✓ Corporation ☐ Trust	Association [Other ▶	L Yea	ar of formation	n 1966	M State	of legal domicile	NJ
Р	art I	Summ	nary								
	1	Briefly de	escribe the organizat	ion's mission o	or most signific	ant activities:	The miss	sion of CTN	AF is to w	ork along side o	of the
ø			rches in the Philippin								
Governance			, Conferences, Teach				_		13 13 00110	e by being invol	veu III
Ë	2		nis box ▶☐ if the org					more than	25% of	ite not appote	
Š	i						sposed of	more man	1 -	115 HEL ASSELS.	_
Ğ	3		of voting members of		-			•	3		4
ŝ	4		of independent votir	•	• •	• '		• • •	4		4
ij	5		mber of individuals e			14 (Part V, line	e 2a)		5		1
Activities &	6		mber of volunteers (e			<u></u>			6		5
ĕ	7a		related business reve						7a		0
	b	Net unre	lated business taxab	ole income fron	n Form 990-T.	ine-84- V C	U.		7b		0
					[67		701	Prior Ye	ear	Current Ye	ear
Revenue	8	Contribu	itions and grants (Pa	rt VIII, line 1h)	E2-66	4Y . 1 . 2 201	5 JAT		207,106		154,675
	9		service revenue (Pa	•	[iii]	78 EAL			0		0
	10		ent income (Part VIII,		es 3 4 and 70	1/2 437 - 1-4-22 2			573		
æ	11		venue (Part VIII, colu								432
	1		•	• •		The second secon			0		
_	12		enue – add lines 8 thi				rie 12)		207,679		155,107
	13		nd similar amounts p				·		102,198		96,974
	14		paid to or for memb				_ : . :	 _	0		0
es	15		other compensation,				5–10)		47,684		43,559
Expenses	16a		onal fundraising fees						0		0
ğ	b	Total fun	idraising expenses (f	Part IX, column	(D), line 25) ▶						
Ü	17	Other ex	penses (Part IX, colu	ımn (A), lines 1	1a-11d, 11f-2	4e)			77,273		58152
	18	Total exp	oenses. Add lines 13	-17 (must equa	al Part IX, colu	mn (A), line 25	5)	<u></u>	227,155		198685
	19	Revenue	less expenses Sub	tract line 18 fro	m line 12				(-19,476)		(-43578)
- v	g						Be	eginning of Cu		End of Ye	
sets or	20	Total ass	sets (Part X, line 16)						1,646,208		1 604 074
Asse	21		oilities (Part X, line 26	6)			<u> </u>			 	1,604,074
Net Ass Fund Ba	22		·	•	 		·		0		0
_			ets or fund balances.	Subtract line 2	1 Itom line 20	<u> </u>	· l		1,646,208	L	<u>1,604,074</u>
_	art'll		ture Block							-	
			ury, I declare that I have ex dete. Declaration of prepar							my knowledge and	belief, it is
	Je, correc	T. and comp	and the contraction of prepar	er (other than onle				as any know	euge		
		1 6	the li. Bu	colling		···			5/2	<u> 115</u>	
Sig	gn	Sigr	nature of officer	_	_			Da	ite		
Hε	ere	L _2	Thel A. B.	adley	Secret	ary					
		Тур	e or print name and title								
_		Print/Ty	ype preparer's name	Pre	parer's signature		Date	е	C	C (PTIN	
	aid			[Check self-em		
	repare	1	name •					E			
Us	se On								n's EIN ▶		
Firm's address ► Phone no											
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Fo	r Papen	work Redi	uction Act Notice, see	tne separate in	structions.		Cat No	11282Y		Form	390 (2014)

Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$

) (Revenue \$

	0 (2014)			age 3
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	_	Yes	No
•	complete Schedule A	1	/	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V .	10		/
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
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		1
С	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		1
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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		✓
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a 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	14a	✓	
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	✓	_
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV. Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15	1	-
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16	1	-
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17	_	1
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
-	If "Yes," complete Schedule G, Part III	19		1

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

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

20b

Form 99	0 (2014)		F	Page '
Part	Checklist of Required Schedules (continued)			
04	Delth- correction was the first contract to the first contract to the correction of		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		✓
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		✓ ✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		▼
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		✓
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		√ ✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		,
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
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		V
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	-	▼
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	_	1
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		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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,

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

37

Form 99	0 (2014)		1	Page 5
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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0]		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) .		<u> </u>	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	1	/
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	<u> </u>		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	✓	
b	If "Yes," enter the name of the foreign country ▶ Philippines			
	See instructions for filing requirements for 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?	5a		✓
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?.	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	_		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	<u> </u>	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12			1
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. Gross income from members or shareholders			
a b	Gross income from members or shareholders	-		
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	100		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a	-	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	ł		
	Is the organization licensed to issue qualified health plans in more than one state?	120	 	1
а	Note. See the instructions for additional information the organization must report on Schedule O.	13a	-	-
b	Enter the amount of reserves the organization is required to maintain by the states in which		1	
J	the averaged to a learned to apply qualified health plans			
С	Enter the amount of reserves on hand	ł	1	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14-	 	1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b	 	
	100, 1120 to 100 to 100 to 100 paymonto: Il 110, provide all explanation ill delieudie O	170		L

Part	and f							
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI							
Section	on A. Governing Body and Management			_=				
_			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year. 1a 4							
	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	l l						
	committee, explain in Schedule O.		ŀ					
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 4							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with							
3	any other officer, director, trustee, or key employee?	2						
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		✓				
4								
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5 6		√				
6 7a	Did the organization have members or stockholders?	•						
	one or more members of the governing body?	7a		✓				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,							
	stockholders, or persons other than the governing body?	7b		✓				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			l				
а	The governing body?	8 <u>a</u>	✓					
b	,							
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							
Socti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	9	odo l	<u>√</u>				
Secu	on b. Policies (This Section Brequests information about policies not required by the internal Never	ue Ci	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a	_	1				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,							
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	10-		.,				
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b		✓				
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c						
13	Did the organization have a written whistleblower policy?	13		1				
14	Did the organization have a written document retention and destruction policy?	14		✓				
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?							
а	The organization's CEO, Executive Director, or top management official	15a		✓				
b	Other officers or key employees of the organization	15b		1				
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		l					
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		1				
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?							
Secti	organization's exempt status with respect to such arrangements?	16b	<u> </u>	Ь				
17	List the states with which a copy of this Form 990 is required to be filed ► NA							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 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 in	erest	polic	y, and				
20	financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and re							
20	Ethel Bradley, 442 Sugg St. Madisonville KY 42431 Tel # 270-245-7811	coras						

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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	d orga	anız	atıo	n co	ompe	nsa	ited any curren	t officer, director	r, or trustee
				(()					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					than c		Reportable	Reportable	Estimated
realite and The	hours per					is both			compensation from	amount of
	week (list any	officer and a director/trustee)						from	related	other
	hours for	a d	nst	Officer	еу	ä	Former	the	organizations	compensation
	related organizations	ا ق کُل	[ğ	eg	loy	ğ	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	below dotted	ial t	1 8		흥	88	ĺ	(W-2/1099-WIGC)		organization and related
	line)	Individual trustee or director	<u> </u>		Key employee	ğ	l			organizations
	1	tee	Institutional trustee) ~ '	SSU.	1		1	_
			ď			Highest compensated employee				
					_					
(1) Rev William A. Ebert, President			Ì					}		
				1			İ	0	o	
(2) Rev Daniel Ebert IV, Vice President	-						_	<u>_</u>		
				1			ĺ	0	o	,
(3) Mrs. Ethel Bradley, Secretary / Treasurer							_			
				1			İ) o	o	1
(4) Rev Lawrence Richardson, Board Member										
		1					1	0	o	
(5)										
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(13)			Т	\vdash			Т		<u> </u>	
<i>3</i>	†	1								
(14)			t	! -	t		┢			
(14)	†	1								

(A) Name and title		(B) Average hours per week (list any hours for related organizations below dotted line)	office Individua	not che unless er and	Position leck most s person d a dire	more	is both	n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation related organization (W-2/1099-M	n from	Esti amo o compo froi organ and	mated punt of ther ensation mither enization related enizations	
(15)				ě			it ed					 .		
(16)								_						
(17)														
(18)														
(19)														
(20)														
(21)						_								
(22)														
(23)														
(24)														
(25)														
1b c d	Sub-total Total from continuation sheets to Part Total (add lines 1b and 1c)	l VII, Sectio 	n A				·	▶ ▶	0 0		0 0	· · · · ·		0
2	Total number of individuals (including but reportable compensation from the organic	t not limited	d to th	iose	e list	ted	abov	e) w				of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc						emp	oloyee, or high	nest compe	nsated	3	Yes	No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$	150,	000)? /	f "Ye	s,"			r such	4		√
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or inc	lividual	5		1
Section	on B. Independent Contractors								<u> </u>					<u>·</u>
1	Complete this table for your five highest compensation from the organization. Repyear.													эх
	(A) Name and business add	Iress							(B) Description of s	ervices	C	(C) Compens	ation	
NA_														
						-								
								<u> </u>						
2	Total number of independent contractor received more than \$100,000 of compen-							o th	nose listed ab	ove) who		· · · · · · · · · · · · · · · · · · ·		

Form **990** (2014)

Part	VIII	Statement of Reve						
		Check if Schedule O	o contains a res	sponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts its	1a	Federated campaigns	s 1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	1b	0		ì		
S, G	С	Fundraising events .	1c	0				
ar ar	d	Related organizations	1d	0				
inil	е	Government grants (con	tributions) 1e	0				
tion I	f	All other contributions, g	-					
草草		and similar amounts not inc	luded above 1f	154,675				
a tr	g	Noncash contributions include	ded in lines 1a-1f \$					
	h	Total. Add lines 1a-1	<u>f</u>	▶	154,675			
Jue .				Business Code	:			
e e	2a							
Program Service Revenue	b							
	C							·
	d							
	e	A11 - A1						
rog	f	All other program ser						
	<u>9</u> 3	Total. Add lines 2a-2 Investment income				 -		
		and other similar amo			432	o	o	432
	4	Income from investmen	·	ond proceeds	0	0	0	432
	5	Royalties			0	0	0	
		,	(ı) Real	(II) Personal				
	6a	Gross rents		0				
	ь	Less, rental expenses	(0	ļ		ļ	
	С	Rental income or (loss)	(0				
	d	Net rental income or	(loss) .		0	О	0	
	7a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory		0				
	b	Less cost or other basis		1				
		and sales expenses		0				
	С	Gain or (loss) .						
	d	Net gain or (loss)	•		. 0	0	0	<u>_</u>
venue	8a	Gross income from fu events (not including \$						
Other Reven		of contributions reported See Part IV, line 18 .	ed on line 1c)	a o				
ŧ,		Less: direct expenses						
		Net income or (loss) f		events . 🕨	0		0	
	9a	Gross income from ga	=					
	1	See Part IV, line 19 .	•	·				
	b	Less. direct expenses		0				
	C	Net income or (loss) f		tivities	0	0	0	
	10a	Gross sales of in returns and allowance	•					
	١.	-	•	-				
	b	Less, cost of goods s		ventory		-		
	С	Net income or (loss) i	_,	Business Code	0	0	0	
	11-	iviiscellarieous P	1646LING	Duamess Code	اء			
	11a b				0			
					0			
	d	All other revenue			0			
	e	Total. Add lines 11a-	 -11d	•	0			
	12	Total revenue. See			155.107			433

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	ll other organization	s must complete co	lumn (A).
	Check if Schedule O contains a respon		ne in this Part IX .		
Do no 8b, 9b	t include amounts reported on lines 6b, 7b, , 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 domestic organizations and domestic governments See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	96,973 91	96973.91		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0	0		
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	0	0	
7 8	Other salaries and wages	37,406.47	0	37,406.47	0
9	section 401(k) and 403(b) employer contributions) Other employee benefits	0 4,862.45	0	0 4,862.45	0
10 11	Payroll taxes	1,290	0	1,290	0
a b	Management	0	0	0	0
c d	Accounting	1,415.97 0	0 0	1,415 97 0	0
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	0	0	0	0
g 12	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) Advertising and promotion	0	0	0	0
12 13 14	Advertising and promotion Office expenses Information technology	2,931.08 32.89	0 0	2,931.08 32.89	0
15 16	Royalties	10,061 39	0	0 10,061.39	0
17 18	Travel	21,593 70	0	21,593.70	0
19	for any federal, state, or local public officials Conferences, conventions, and meetings	0	0	0	0
20 21	Interest	0	0	0	0
22 23	Depreciation, depletion, and amortization . Insurance	13,002	0	13,002	0
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	Office Equipment	1,542.21	0	1,542.21	0
b	Books & ebooks	316.29	0	316.29	
c	Guards	5,349.57	0	5,349.57	0
d	All other expenses. Misselfers and	4 227 55	0	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	0
e 25	All other expenses Miscellaneous Total functional expenses. Add lines 1 through 24e	1,907.09 198,685 02	96,973.91	1,907.09 101,711.11	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	133,333 32	55,515.51	18444111	

Part X Balance Sheet

	31 C X	Check if Schedule O contains a response or note to any line in this Par	t X		
			(A) Beginning of year		(B) End of year
\neg	1	Cash—non-interest-bearing	30,875	1	27,308
	2	Savings and temporary cash investments	499,663	2	474,900
	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	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary		,	
ts		organizations (see instructions) Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
Ä	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment cost or			
	_	other basis. Complete Part VI of Schedule D 10a 1,279,348	- -		
	b	Less. accumulated depreciation	1,115,670		1101866
	11	Investments—publicly traded securities		11	0
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments – program-related. See Part IV, line 11	0		0
	14	Intangible assets	0	14	0
	15 16	Total assets. Add lines 1 through 15 (must equal line 34)	0	15	0
_	17	Accounts payable and accrued expenses	1,646,208		1604074
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	0
ý	22	Loans and other payables to current and former officers, directors,			<u> </u>
Liabilities		trustees, key employees, highest compensated employees, and			
Ē		disqualified persons. Complete Part II of Schedule L	0	22	0
Ë	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	0	25	o
	26	Total liabilities. Add lines 17 through 25	0	26	0
S		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
e S		complete lines 27 through 29, and lines 33 and 34.			-
ā	27	Unrestricted net assets	0	27	0
ä	28	Temporarily restricted net assets	0	28	0
P	29	Permanently restricted net assets	0	29	0
or Fund Balances		complete lines 30 through 34.			
ō	30			20	
šet	31	Capital stock or trust principal, or current funds	530,538		502,208
ASS	32	Retained earnings, endowment, accumulated income, or other funds .	<u>1,115,670</u> 0		1,101,866
Net Assets	33	Total net assets or fund balances	1,646,208		1,604,074
Z	34	Total liabilities and net assets/fund balances	1,646,208		1,604,074
_			1,040,200		Form 990 (2014)

_	4/
Page	1 2

						gc - -
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				<u></u>	<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1			15	5,107
2	Total expenses (must equal Part IX, column (A), line 25)	_2			19	<u>8,685</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			(-43	,578)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			1,64	6,208
5	Net unrealized gains (losses) on investments	5				0
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10			1,60	2,630
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			<u>.</u>		
			_		Yes	No
1	Accounting method used to prepare the Form 990 🕜 Cash 🔲 Accrual 🔲 Other				į	,
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olaın	ın		-	
	Schedule O					
2a				2a		✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled	or		j	
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis			1	i	
þ	· · · · · · · · · · · · · · · · · · ·			2b		✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on	a		ŀ	
	separate basis, consolidated basis, or both.				ł	
	Separate basis Consolidated basis Both consolidated and separate basis		. 1		٠ ١	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or		nt		1	
	of the audit, review, or compilation of its financial statements and selection of an independent account		`	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın	ın	-		
	Schedule O.				l	
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set	torth	- 1			_
	the Single Audit Act and OMB Circular A-133?	• •		3a		✓_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?		- 1			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	uaits.		3b	266	
				Form	990	(2014)

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

2014

Open to Public Inspection

Name	of the organization					Employer identification	number
	tian Training and Missionary Fellow					23-21	
Par					- _		ns.
	organization is not a private foundate		•		•	•	
1 2	☐ A church, convention of churc☐ A school described in section			Dea in Section	on 17	υ(b)(1)(A)(i).	
3	A hospital or a cooperative ho			n section 17	O(b)(1) // A //iii)	
4	A medical research organization hospital's name, city, and state	on operated in c					iii). Enter the
5	An organization operated for section 170(b)(1)(A)(iv). (Com	the benefit of a	college or university	owned or op	perate	ed by a government	al unit described in
6 7	☐ A federal, state, or local gover An organization that normally described in section 170(b)(1)	receives a sub-	stantial part of its sup				the general public
8	A community trust described in			Part II \			
9	An organization that normally			•	a con	tributions members	hin fees, and aross
J	receipts from activities related support from gross investme acquired by the organization a	d to its exempt ent income and	functions—subject to unrelated business	certain exc taxable inco	eptioi me (li	ns, and (2) no more ess section 511 ta	than 331/3% of its
10	An organization organized and			•			
11	An organization organized and one or more publicly supported the box in lines 11a through 11	d organizations	described in section 50	09(a)(1) or se	ction	509(a)(2). See secti	on 509(a)(3). Check
а	☐ Type i A supporting organize the supported organization(standard organization. You must contact the support of the support	s) the power to r	egularly appoint or ele				
b	b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C.						
c	c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.						y integrated with,
d	d Type III non-functionally integrated A supporting organization operated in connection with its supported organization that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V.						
е	Check this box if the organize functionally integrated, or Ty	ation received a	a written determination	from the IRS	S that	it is a Type I, Type I	I, Type III
f	Enter the number of supported						
g			ported organization(s).				<u> </u>
	(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 organisted in your good document	verning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			(See mandenons)	Yes	No		
(A)							
(B)							
(C)							
(D)							<u> </u>
(E)							-
Tota	I						

supported organization

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to gualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (a) 2010 Calendar year (or fiscal year beginning in) ▶ (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Gifts. grants, contributions, membership fees received (Do not include any "unusual grants.") 254,052 237,964 231,440 207,106 154,675 1,085,237 revenues levied the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. 254,052 237,964 231,440 207,106 154,675 1,085,237 The portion of total contributions by each person (other governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 24,000 Public support. Subtract line 5 from line 4. 1,061,237 Section B. Total Support **(b)** 2011 Calendar year (or fiscal year beginning in) (a) 2010 (c) 2012 (d) 2013 (e) 2014 (f) Total 7 Amounts from line 4 . 254,052 237.964 231,440 207,106 154,675 1,085,237 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources 853 855 433 3,146 573 432 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 0 Total support. Add lines 7 through 10 11 1,088,383 12 Gross receipts from related activities, etc (see instructions) . . 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) Section C. Computation of Public Support Percentage 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 98 % Public support percentage from 2013 Schedule A, Part II, line 14 15 15 94 % 16a 331/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization $\overline{\mathbf{V}}$ 331/3% support test-2013. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2013. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

OMB No 1545-0047

110,			
	an Training and Missionary Fellowship		23-2150107
Pai			ids or Accounts.
	Complete if the organization answered		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor		
	funds are the organization's property, subject to the	e organization's exclusive legal contro	ol? ☐ Yes ☐ No
6	Did the organization inform all grantees, donors, a	and donor advisors in writing that gra-	nt funds can be used
	only for charitable purposes and not for the bene	fit of the donor or donor advisor, or f	or any other purpose
		<u> </u>	· · · · · · · Yes 🗌 No
Par	t 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., recrea	tion or education) 🔲 Preservation o	f a historically important land area
	Protection of natural habitat	☐ Preservation o	f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution	on in the form of a conservation
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		. 2a
b	Total acreage restricted by conservation easement	ts ,	. 2b
С	Number of conservation easements on a certified	nistoric structure included in (a)	
d	Number of conservation easements included in	· · · · · · · · · · · · · · · · · · ·	
		• • • • • • • • • •	. 2d
3	Number of conservation easements modified, tran	sferred, released, extinguished, or teri	
	tax year ▶	, , ,	, 0
4	Number of states where property subject to conse	rvation easement is located ▶	
5	Does the organization have a written policy re	*	spection, handling of
	violations, and enforcement of the conservation ea		•
6	Staff and volunteer hours devoted to monitoring, in	aspecting, and enforcing conservation	 -
	-	, 3, 1, 1, 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	3. 7
7	Amount of expenses incurred in monitoring, inspec	cting, and enforcing conservation ease	ements during the year
	▶\$	g,g	omenic deimig me ,ea
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	f section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization reports	conservation easements in its revenue	
_	balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easeme		
Par	Organizations Maintaining Collection	s of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered		
1a			
	works of art, historical treasures, or other similar	assets held for public exhibition, ed	ducation, or research in furtherance of
	public service, provide, in Part XIII, the text of the		
b	If the organization elected, as permitted under S	FAS 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, ed	ducation, or research in furtherance of
	public service, provide the following amounts relat		,
	(i) Revenue 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		
-	following amounts required to be reported under S		
а	Revenue included in Form 990, Part VIII, line 1	· -	▶ €
	Assets included in Form 990, Part X		•
U	resole mended in FUIII 330, FAILA		– 35

Part	Organizations Maintaining	Collections of	Art, His	torical 1	Freasures	, or O	ther Similar A	∖ssets	(cont	inued)
3	Using the organization's acquisition, a collection items (check all that apply).									
а	☐ Public exhibition		d	☐ Loan	or exchang	ae proq	ırams			
b	☐ Scholarly research				_					
С										
4	Provide a description of the organizat XIII		and expla	ain how t	hey further	the or	ganization's ex	empt p	urpose	ın Part
5	During the year, did the organization	solicit or receive	donation	s of art,	historical ti	easure	s, or other sim	ıılar		
	assets to be sold to raise funds rather								Yes	☐ No
Part	IV Escrow and Custodial Arra	ingements.							•	
	Complete if the organization 990, Part X, line 21.						•		on Fo	orm
1a	Is the organization an agent, trustee,	custodian or oth	ner intern	nediary fo	or contribut	ions o	r other assets	not		
									Yes	□ No
b	If "Yes," explain the arrangement in Pa	art XIII and compl	ete the fo	illowing t	able:					
								Amoun	t	
С	Beginning balance					10	3			
d	Additions during the year					10	1			
е	Distributions during the year .					16	•			
f	Ending balance					11				
2a	Did the organization include an amoun									☐ No
	If "Yes," explain the arrangement in Pa	art XIII. Check her	e if the e	xplanatio	n has been	provid	ed in Part XIII			
Par	Endowment Funds.									
	Complete if the organization						· · · · · · · · · · · · · · · · · · ·			
		(a) Current year	(b) Pri	or year	(c) Two year	rs back	(d) Three years ba	ick (e)	Four yea	ars back
1a	Beginning of year balance									
b										
С	c Net investment earnings, gains, and									
	losses									
d										
е										
	programs				1			ŀ		
f	Administrative expenses									· <u> </u>
g	End of year balance									
2	· · · · · · · · · · · · · · · · · · ·									
а										
b										
С	-									
	The percentages in lines 2a, 2b, and 2	c should equal 10	00%.							
3a	Are there endowment funds not in the	e possession of the	he organi	zation th	at are held	and ad	Iministered for	the		
	organization by:								Ye	s No
	(i) unrelated organizations									
	(ii) related organizations									
b	If "Yes" to 3a(ı), are the related organı		equired o	n Sched	ule R?				Bb	
4	Describe in Part XIII the intended uses					•	•			
Part	<u> </u>				· · · · · · · · · · · · · · · · · · ·					
	Complete if the organization		" to For	n 990. F	art IV. line	11a. S	See Form 990). Part	X. line	10.
-	Description of property	(a) Cost or o			or other basis		Accumulated		Book va	
	• • •	(investm			ther)		epreciation	(0)	200K V	
1a	Land							_		
b	Buildings				1,208,564		110,009		- 1	008 555
c	Leasehold improvements				1,200,304		1 10,009			098,555
d	Equipment				70784		67 470			2 244
e	Other			 	10/84		67,473		_	3,311
	Add lines 1a through 1e (Column (d) m	nust equal Form 9	90. Part	X. columi	1 (B), line 10)c)	•			101 966
			, · u.t.	., 00101111	. ,5,,	· · · ·	· · · · · · · · · · · · · · · · · · ·		<u>_</u>	<u> 101,866</u>

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

Employer identification number

Ob: - 4.	Tarinan and Mississes Fol	lawshin					2150107	
Part		on Activiti	es Outside	the United States. Comp	olete if the organiza			" on
	Form 990, Part IV, line							
1	For grantmakers. Does the assistance, the grantees' eli-							
	grants or assistance?						□Yes	☑No
•	For grantmakers. Describe	s in Don't 1/ t	ha araanizati	an'a aragaduras for mani	toring the use of	ito granto	and other	
2	assistance outside the Unite		ne organizati	on's procedures for morn	ioning the use of	ns grams	and one	1
3	Activities per Region. (The fo			1	1	ĭ		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed a program servidescribe specific service(s) in reg	ice, ype of	(f) Tota expenditure and investn in regio	es for nents
(4)	Foot Asia and the Besifie		2	Cronts, Instituto]	EC	770 47
_('')	East Asia and the Pacific	0	3	Grants: Institute			30,	770.47
(2)	East Asia and the Pacific	0	3	Grants: Pastors			32,	586.96
(3)	man Ania and Aba Danisa		2	Samues	Lunkaan of building	.	7	C16 40
_(0)	East Asia and the Pacific	0	3	Services	upkeep of building	15	<u>, , , , , , , , , , , , , , , , , , , </u>	616.48
(4)								
(5)								
_(0)								
(6)								
(7)								
								
(8)	 							
(9)								
(10)		 			ļ		-	
(11)								
(4.0)								
(12)	 							
(13)								
(14)						i		
11-7					 			
(15)				 				
(16)			ţ.					
(.0)								
(17)								_
3a b	Sub-total	0	3				96	<u>,973.91</u>
D	sheets to Part I	0	0					0

c Totals (add lines 3a and 3b)

0

96,973 91

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

	3			h					
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, EMV, appraisal, other)
Ξ			East Asia Pacific	General Support	56,770.47 check	check	0	0 NA	NA
ର									
ල									
€									
<u> </u>									
9									
3									
. <u>@</u>									
6									
<u>6</u>									
Ê									
(12)									
(13)									
14									
(15)									
(16)									
8	Enter total nu	mber of recipi	ent organizations lis	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt	ognized as charities	s by the foreign coun	try, recognized as t	tax-exempt	

Enter total number of recipient organizations listed above that are recognized as changes by the reby the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities

က

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Part III

Part III can be duplic	Part III can be duplicated it additional space is needed.	is needed.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of Valuation (book, FMV, appraisal, other)
(1) Food & clothing, education	East Asia Pacific	70	32,586.96	32,586.96 Check / cash	0	0 NA	NA
(2)							
(3)							
(4)							
(5)							
(9)							
(2)					:		
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
						Sch	Schedule F (Form 990) 2014

Page	4

•			
Part	V Foreign Forms		
1	Was the organization a U.S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).	☐ Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	☐ Yes	☑ No

✓ No

☐ Yes

Part V Supplemental Information

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

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

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2014

Department of the Treasury Internal Revenue Service ► 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.

Open to Public Inspection

Name of the organization	Employer Identification number
Christian Training and Missionary Fellowship	23-2150107
Part VI line 8b: There were no committees	
Part VI line 11. This form is sent out by email to its governing body, then there is a	telephone call or email if there is any questions or
problems.	
Part VI line 19. The CTMF governing documents and financial statements are available.	ble upon request by the public.
Tank writing to the original government of the state of t	