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Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

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-PF and its separate instructions is at www.irs.gov/form990nf

Onen to Public Inspection

Eco	r palone	dar year 2014 or tax year beginning	troini 550-i i and its se				agopi. Tabei	to t titure inspection
		foundation		, 2014,	and endin	ĭ		, 20
							Identification number	
_		ant Stand Ministries, Inc.				56-2279		
		and street (or P.O box number if mail is not de	elivered to street address)	R	oom/suite	B Telephone number (see instructions) (828) 264 - 0850		
		wn, state or province, country, and ZIP or fore	wan nastal and					
	-	, NC 28607	ign postai code			C If exempt	ion application is pending,	check here
		all that apply: Initial return	Initial satura	of a former public char	:5.	n 4 5		
•	OHOUR !	Final return	Amended ret	,	ity	J. Foreig	n organizations, check he	re P
		Address change					n organizations meeting th	
H	Check 1		ction 501(c)(3) exempt priva		·		here and attach computat	
Ī	_	on 4947(a)(1) nonexempt charitable trus		axable private foundat	ion	E If private	foundation status was terr 07(b)(1)(A), check here	ninated under
$\overrightarrow{\Gamma}$			J Accounting method:		Accrual	1		_
	end of y	year (from Part II, col (c),	Other (specify)		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	F If the four	ndation Is In a 60-month te ction 507(b)(1)(B), check f	rmination
	ine 16)	· · · · · · · · · · · · · · · · · · ·	(Part I, column (d) must be	on cash basis.)	···			
P	art I	Analysis of Revenue and Ex			T	\		(d) Disbursements
		amounts in columns (b), (c), and (d) may no		(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions))	books	ın	come	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., receive	ed (attach schedule)	11,940				
	2	Check ► if the foundation is not require	d to attach Sch B			*******		
	3	Interest on savings and temporary cash	n investments			<u> </u>	777	
	4	Dividends and interest from securities						
	5a	Gross rents						
	b	Net rental income or (loss)						
ē	6a	Net gain or (loss) from sale of assets no						
Revenue	b	Gross sales price for all asset pa fine a VE	D	H			11, 11, 11, 11, 11, 11, 11, 11, 11, 11,	
Š	7	Capital gain net income (from Part IV, li						
œ	8	Net short-term capital gain		-11	 -,1'- i,-'- -			
	9	Income modifications AUG. 1 8.201	1 1 0 / 1			······································		
		Gross sales less returns and ailowances		, , , , , , , , , , , , , , , , , , , 	ļ	·····	+	, ', , , , , , , , , , , , , , , , , ,
	b	Less Cost of goods OGDEN, L	<u> </u>		-	*********************		
	11	Gross profit of (loss) (attach schedule) Other income (attach schedule)	, , , , , , , , , , , , , , , , , , ,	71	ļ			**************************************
	12	Total. Add lines 1 through 11		12,011	 	0	71	
	13	Compensation of officers, directors, trus		12,013				
S	14	Other employee salaries and wages .	,	· 				
enses	15	Pension plans, employee benefits		····				
	16a	Legal fees (attach schedule)			 			
Ü	b	Accounting fees (attach schedule)			1			
ive	С	Other professional fees (attach schedul						
trat	17	Interest						
isi	18	Taxes (attach schedule) (see instruction	· ·					
Ē	19	Depreciation (attach schedule) and dep	1					
Ad	200	Occupancy						
pu	2 k	Travel, conferences, and meetings	L L	,	ļ	····		
g	,22	Printing and publications		·				
tin	23	Other expenses (attach schedule)	,	95	5			95
era	भिद्धान्नः य	Total operating and administrative ex	· ·		_			
Operating and Administrative Exp	25	Add lines 13 through 23	<u> </u>	95		0		95
_	20	Contributions, gifts, grants paid Total expenses and disbursements.		8,518				8,518
_	277	Subtract line 26 from line 12:	Add lines 24 and 25 .	8,613	· · · · · · · · · · · · · · · · · · ·	0		8,613
	25 26 27 17 17 17 17 17 17	Excess of revenue over expenses an	nd dishursamanta	3 300				
	£ .	Net investment income (if negative, el		3,398	-	0		
1	. B	Adjusted net income (if negative, enter	,		 		71	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
			 /	L	. I		, / _	I

p,	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
	21 t #E	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	220	3,618	3,618
	2	Savings and temporary cash investments			
	3	Accounts receivable >			
		Less: allowance for doubtful accounts ▶		1	
	4	Pledges receivable >			· · · · · · · · · · · · · · · · · · ·
		Less: allowance for doubtful accounts		ĺ	
	5	Grants receivable		• • • • • • • • • • • • • • • • • • • •	
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	'			İ	
S	8	Less: allowance for doubtful accounts Inventories for sale or use	-		
Assets	9	Prepaid expenses and deferred charges			
As	1				
	10a	3 ()			
	1	Investments - corporate stock (attach schedule)			
	1	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis	Ť	1	
	10	Less, accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment: basis		}	
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item l)	220	3,618	3,618
	17	Accounts payable and accrued expenses			
10	18	Grants payable			
Ë	19	Deferred revenue			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)	0	0	
S		Foundations that follow SFAS 117, check here			
alances	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
Net Assets or Fund B.	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here ▶ X			
Ĕ		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ş	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	220	3,618	
Ψ	30	Total net assets or fund balances (see instructions)	220	3,618	
Š	31	Total liabilities and net assets/fund balances (see	220	3,010	
		instructions)	220	3,618	
Pa	art II			3,010	<u></u>
		net assets or fund balances at beginning of year - Part II, column (a), line 3			
		of-year figure reported on prior year's return)			224
		amount from Part I, line 27a			220
		standard and maked of the land O (Admits 2). It			3,398
				3	2 (10
		ınes 1, 2, and 3 . .	• • • • • • • • • • • • • •		3,618
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (h) lino 20	5	2 (10
U	ı vlal	not assets of fund balances at end of year (line 4 fillings line 5) - Part II, Co	numm (D), mne 30	6	3,618

Form 990-PF (2014)

(a) List and describe the	Losses for Tax on Investments and Investments (s) of property sold (e.g., real estate, se, or common stock, 200 shs MLC Co.)	(b) How acquired	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo , day, yr)
1a				
b				
С				
d				
е				<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		in or (loss) (f) minus (g)
a		<u></u>		
<u>b</u>				
<u>c</u>				
d				
Consists only for control of course		Soundation on 19/31/60	-	
Complete only for assets showing	gain in column (h) and owned by the f		(I) Gains (C	ol (h) gain minus it less than -0-) or
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	Losses (from col (h))
a		3,44		
b				
c				
d				
8				
Capital gain net income or (net cap		ter in Part I, line 7	2	
3 Net short-term capital gain or (loss	` '	•		
. • • •	column (c) (see instructions). If (loss),	•		
		7	3	
	er Section 4940(e) for Reduc		ent Income	
f section 4940(d)(2) applies, leave this Was the foundation liable for the section of "Yes," the foundation does not qualify	on 4942 tax on the distributable amour	• •	, 	Yes X No
1 Enter the appropriate amount in ea	ch column for each year; see the inst	ructions before making any entri	es.	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as		(d) tribution ratio divided by col (c))
2013	3,368			
2012	6,092			
2011	5,470			
2010	4,527			
2009	33,287	8,8	373 3	.751493
2 Total of line 1, column (d)			2 3	.751493
3 Average distribution ratio for the 5-	year base period - divide the total on seen in existence if less than 5 year		3 0	.750299
number of years the foundation ha	s been in existence it less than 5 year	is	3 0	. 750299
4 Enter the net value of noncharitable	e-use assets for 2014 from Part X, lin	e5	4	
5 Multiply line 4 by line 3			5	0
6 Enter 1% of net investment income	e (1% of Part I, line 27b)		6	
7 Add lines 5 and 6			7	0
8 Enter qualifying distributions from I	Part XII, line 4		8	8,613
· • -	line 7, check the box in Part VI, line 1b	b, and complete that part using a	1% tax rate. See the	

orm	: 1990-PF(2014) Covenant Stand Ministries, Inc. 56-22795	28	P	age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see inst			age 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		,	
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here X and enter 1% of Part I, line 27b	, ,, ,,,		
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . 2			0
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . 4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			0
6	Credits/Payments:			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
1	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded ▶ 11			
	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.	_		
	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. > \$ (2) On foundation managers. > \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers. \$			v
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
3	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	:	х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
•	If "Yes," attach the statement required by General Instruction T.	•		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	NC			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			, , , , , , , , , ,
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			
	associate Deat VIV		₹7	

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

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		279528	ı	Page 5
Pa	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	. 11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	. 12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	. 13	X	
	Website address > N/A			
14	The books are in care of ▶ Kelly P Melton Telephone no. ▶ 82	8-264-0	850	
	Located at ▶ PO Box 2477, Boone, NC ZIP+4 ▶ 28	607		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	. 16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90.22.1). If			
_	"Yes," enter the name of the foreign country			
Ра	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	·· • • · · · · · · · · · · · · · · · ·		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):		ŧ	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X N	0	İ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X N		ł	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X N			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X N	0	-	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?	0		
	foundation agreed to make a grant to or to employ the official for a period after			
b	termination of government service, if terminating within 90 days.)	0		
	FO 4044/-1\ 0 1-	45		
	organizations relying on a current notice regarding disaster assistance (see instructions)?	. 1b		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2014?	. 1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	. 10		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2014? Yes X N	,		
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions.)	. 2b		Х
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	•,,,,,			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	,		
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2014.)	3b]	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	. 4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	. 4b		X

Pa	t VII-B	Statements Rega	rding Activitie	s for	Which Forr	<u>n 4720</u>	May Be	Requi	red (co	<u>ntinued</u>)		
5a	During the y	ear did the foundation	pay or incur any am	ount to:						_			
	(1) Carry o	n propaganda, or other	wise attempt to influ	ence le	gislation (section	n 4945(e))?	<i>.</i> [Yes	X No			
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,												
directly or indirectly, any voter registration drive?													
(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No													
	(4) Provide	a grant to an organizat	tion other than a cha	arıtable,	etc., organizati	on desc	ribed in	_					
	section	4945(d)(4)(A)? (see ins	structions)					[Yes	X No			
	(5) Provide	for any purpose other	than religious, chari	table, so	cientific, literary	, or edu	cational	_					
purposes, or for the prevention of cruelty to children or animals? Yes X No													
b	If any answ	er is "Yes" to 5a(1)-(5),	did any of the trans	sactions	fail to qualify u	nder the	exceptions	describe	d in				
	Regulations	section 53.4945 or in a	a current notice rega	ardıng d	ısaster assıstar	nce (see	instructions)	?		<u></u>	_5b		
	Organizatio	ns relying on a current	notice regarding dis	aster as	sistance check	here				▶ 📗			
С	If the answe	er is "Yes" to question 5	ia(4), does the foun	dation c	laim exemption	from the	e tax	_					
	because it r	naintained expenditure	responsibility for the	e grant?		<i>.</i>		[Yes	No			
	If "Yes," atta	ach the statement requi	red by Regulations	section	53 4945-5(d).								
6a		dation, during the year	•		•				_				
		al benefit contract? .						-	Yes	X No			
b	Did the four	dation, during the year	, pay premiums, dire	ectly or	indirectly, on a	persona	I benefit conf	ract?			6b		X
	If "Yes" to 6	b, file Form 8870.							_	_			
	-	during the tax year, wa	-	-	•			. [X No			
		the foundation receive					_				7b		
Pai		nformation Abou	t Officers, Dire	ctors	, Trustees,	Found	dation Ma	nager	s, High	ly Paid	Empl	oyee	ıs,
		nd Contractors											
<u>1 L</u>	ist all office	rs, directors, trustees	, foundation mana							 -			
		(a) Name and address		hou	e, and average rs per week	(If not paid, employee i				fit plans	(e) Expe	ense ad allowar	
					ed to position	en	ter -0-)	and def	erred com	pensation			
-	R Parse			Presi							_		
		Row, Boone, NC		••••	5.00		0		0			0	
	B Parso			Vice			•			•			•
	Ly P Mel	Row, Boone, NC		Sec/T	0.00		. 0_			0			0
	-	, Boone, NC 286		Sec/1	3.00		0			0			^
<u> </u>	OX 2477	, Boone, NC 280	101		3.00	_			-				0
2 (omnensatio	on of five highest-paid	employees (other	than th	nose included	on line	1 - soo instr	uctions	If none	onter			—
	NONE."	m or mo mgmost-para	cimpioyees (otile)	tiidii ti	ioso included	011 11116	1 - 366 111311	uctions,	. 11 110116,	, Gillei			
		 -							(d) Contr	butions to			
	(a) Name and	address of each employe	e paid more than \$50,	000	(b) Title, and a hours per w		(c) Comper	sation	employe	e benefit	(e) Expe		
	•				devoted to po		(0) 00			l deferred : nsation	otner a	allowan	ces
NON										-	-		
				·					-				
					İ								
			_									_	
												-	
Total	number of o	ther employees paid ov	rer \$50,000		<u> </u>				<u></u>	>			0
EEA					·- ·-						Form 99	0-PF ((2014)

Covenant Stand Ministries, Inc.

56-2279528

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Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	n Managers, Highly P	aid Employees,
3 Five highest-paid independent contractors for professional services (see instructions)	. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
Tall IAA Cultilles		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informations and other beneficiaries served, conferences convened, research papers produced, etc.	mation such as the number of	Expenses
1 International Beneficence: Supported three children in		
third-world countries through international outreach		
ministry		1,368
2 Ministry Support: Supported various ministries by		
donations to aid their respective missions		
2 Miggiorge Grandwick local miggiorge by 25 day		5,950
3 Missions: Supported local missionary to Africa		
		1,200
4		1,200
Part IX-B Summary of Program-Related Investments (see instructions)		<u></u>
Describe the two lorgest program related investments made by the foundation during the toy use of land 1	10	

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
	•
2	<u> </u>
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	

EEA

Form 990-PF (2014)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	n found	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6_	Minimum investment return. Enter 5% of line 5	6	0
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating to	ounda	tions
	and certain foreign organizations check here ▶ X and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2014 from Part VI, line 5 2a]	
þ	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
_	line 1	7	
Da	rt XII Qualifying Distributions (see instructions)		-
<u>ra</u>			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a_	8,613
b	Program-related investments - total from Part IX-B	1b_	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b_	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 .	4	8,613
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	8,613
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	e found	ation
	qualifies for the section 4940(e) reduction of tax in those years.		

1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	line 7	······			
2	Undistributed income, if any, as of the end of 2014:				
a	Enter amount for 2013 only			+	
b					
3	Excess distributions carryover, if any, to 2014:		1201 1 1000 1 1	, , , , , , , , , , , , , , , , , , ,	nn
а	From 2009				
b	From 2010			-	
c	From 2011				
d	From 2012				
e	From 2013 3,396				
f	Total of lines 3a through e	E1 E70			
4	Qualifying distributions for 2014 from Part XII,	51,579	·····		······································
-	line 4: ►\$ 8,613				
а	Applied to 2013, but not more than line 2a				
	Applied to undistributed income of prior years				· ,
-	(Election required - see instructions)				•
c	Treated as distributions out of corpus (Election			· 1 ·	······································
·	required - see instructions)				
ď	Applied to 2014 distributable amount		· · · · ·	hath	
e	Remaining amount distributed out of corpus	8,613		•••••••••••••••••••••••••••••••••••••••	······································
5	Excess distributions carryover applied to 2014	0,013	···		
•	(If an amount appears in column (d), the same		***************************************		······································
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
•	indicated below:			·	
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 .	60,192			
b	Prior years' undistributed income. Subtract	00,192		1 11 11 11 11 11 11 11 11 11 11 11 11 1	· · · · · · · · · · · · · · · · · · ·
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed			'7171° '111111111 ' , , , , 11111	· · · · · · · · · · · · · · · · · · ·
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable	1:11:	-	· · · · · · · · · · · · · · · · · · ·	+ 11. ' , 117111
	amount - see instructions				
е	Undistributed income for 2013. Subtract line		· · · · · · · · · · · · · · · · · · ·		'''
	4a from line 2a Taxable amount - see	· ·			
	instructions				
f	Undistributed income for 2014. Subtract lines		***************************************		······································
	4d and 5 from line 1. This amount must be		+		
	distributed in 2015				
7	Amounts treated as distributions out of corpus				YH
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2009 not			1	
	applied on line 5 or line 7 (see instructions)	33,287			
9	Excess distributions carryover to 2015.			·····	· · · · · · · · · · · · · · · · · · ·
	Subtract lines 7 and 8 from line 6a	26,905			
	Analysis of line 9:			1 110711 11071	
	Excess from 2010	***************************************			
b	Excess from 2011				
С	Excess from 2012				
d	Excess from 2013 3,396			†	
е	Excess from 2014 8 , 613			1	

Part	XIV Private Operating Four	ndations (see instri	<u>uctions and Part \</u>	VII-A, question 9)		
1a	If the foundation has received a ruling or	determination letter that	it is a private operating			
	foundation, and the ruling is effective for	2014, enter the date of th	ne ruling	>	2011-02-0	03
b	Check box to indicate whether the found	ation is a private operatin	ng foundation describe	d in section	4942(j)(3) or 4	942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	· · · · · · · · · · · · · · · · · · ·	Prior 3 years	<u> </u>	- 0/1. /
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for each year listed	0	(0) 2013	(6) 2012	(4) 2011	0
b	85% of line 2a		···			
-						
С	Qualifying distributions from Part XII, line 4 for each year listed	8,613	3,396	6,108	5,470	23,587
d	Amounts included in line 2c not used directly for active conduct of exempt activities .					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	8,613	3,396	6,108	5,470	23,587
3	Complete 3a, b, or c for the		Ì			
	alternative test relied upon:		}			
а	"Assets" alternative test - enter: (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					0
С	"Support" alternative test - enter:					
·	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties) (2) Support from general public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Informa	• •	•	e foundation had	\$5,000 or more	in assets at
	any time during the yea	ır - see instruction	s.)			
1	Information Regarding Foundation M					
а	List any managers of the foundation wh before the close of any tax year (but on	o have contributed more ly if they have contributed	than 2% of the total co d more than \$5,000). (ontributions received by See section 507(d)(2))	the foundation	
	Gwyn Parsons,					
b	List any managers of the foundation wh ownership of a partnership or other enti				ortion of the	
	N/A,		<u></u> .			
2	Information Regarding Contribution,	Grant, Gift, Loan, Scho	larship, etc., Progra	ms:		
	Check here ▶ if the foundation onlunsolicited requests for funds. If the foundation	•	•	•	•	
	other conditions, complete items 2a, b,		•	,	,	
а	The name, address, and telephone num		the person to whom a	pplications should be a	ddressed:	
	990APP					
b	The form in which applications should b	e submitted and informat	on and materials they	should include:		
С	Any submission deadlines:					
d	Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fie	lds, kinds of institutions	, or other	
	factors:					

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient		<u> </u>				
 Paid during the year 								
Compassion International								
12290 Voyager Parkway, Colorado				i				
Colorado Springs, CO 80921		NC	Child sponsorship	1,368				
		ĺ						
Center for Judeo-Christian Studies			Support outside					
PO Box 750815			ministry, study					
Dayton, OH 45475		NC	facets of belief	450				
			1					
Appalachian House of Prayer								
PO Box 2227		,	To support local					
Boone, NC 28607-2227		NC	ministry	5,000				
Lenoir First Wesleyan Church								
906 Creekway Dr NW			To support local					
Lenoir, NC 28645		NC	ministry	500				
Overland Missions								
700 S Courtenay Pkwy			Support missions					
Merritt Island, FL 32952		NC	to Africa	1,200				
		ļ						
		İ						
		ļ						
Total			▶ 3a	8,518				
b Approved for future payment								
]						
		ļ						
		1						
Total			▶ 3b					
lotal		<u> </u>		<u> </u>				

EEA

Part XVI-A Analysis of Income-Producing	Activities			·	
Enter gross amounts unless otherwise indicated.		d business income	Excluded by se	ction 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a Thrift shop consign			05	71	
b					
c					
d					
e			<u> </u>		
f					
g Fees and contracts from government agencies	 -				
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments .			 		
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate: a Debt-financed property					
b Not debt-financed property			 		
6 Net rental income or (loss) from personal property	, -		 		
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			 	· · · · · · · · · · · · · · · · · · ·	
9 Net income or (loss) from special events	<u> </u>				
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a			 		
b			1		
С					
d					
е					
12 Subtotal. Add columns (b), (d), and (e)				71	
13 Total. Add line 12, columns (b), (d), and (e)				13	71
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to the					
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
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Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	
Part XVI-B Relationship of Activities to the Explain below how each activity for which income	ome is repor	ted in column (e) of F	Part XVI-A contril	outed importantly to the	

Preparer

Use Only

EEA

Firm's name

Firm's address ► PO Box 2477

▶ Gwyn R Parsons CPA PLLC

Boone NC 28607

Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Did the organization directly or indirectly engage in any of the following with any other organization described No Yes in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: Х 1a(1) (2) Other assets Х 1a(2) b Other transactions: Х 1b(1) Х 1b(2) (2) Purchases of assets from a noncharitable exempt organization X Х 1b(4) X 1b(5) Χ (6) Performance of services or membership or fundraising solicitations 1b(6) Х c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? **b** If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of penury, 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 taxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return 8-12-15 Gwyn 'R Parsons CPA President Here with the preparer shown below Yes No (see inst)? Date Signature of officer or trustee Title Print/Type preparer's name Date PTIN Paid Gwyn R Parsons CPA 08-12-2015 Gwyn R Parsons CPA P01338921 self-employed

Firm's EIN

Phone no

▶

828-264-0850

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Employer identification number

OMB No 1545-0047

Cove	nant Stand Mini	stries, Inc.	56-2279528
Organ	ization type (check one	e):	
Filers	of:	Section:	
Form 9	990 or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foun	dation
		527 political organization	
Form 9	990-PF	∑ 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	no
		501(c)(3) taxable private foundation	
Check	if your organization is c	covered by the General Rule or a Special Rule.	
Note.), (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule. See
Gener	al Rule		
X	•	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions property) from any one contributor. Complete Parts I and II. See instructions tributions.	
Specia	al Rules		
	For an organization de regulations under sect 13, 16a, or 16b, and the	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 9 hat received from any one contributor, during the year, total contributions of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Comp	990-EZ), Part II, line ne greater of (1)
Ц	contributor, during the	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive year, total contributions of more than \$1,000 exclusively for religious, chantal purposes, or for the prevention of cruelty to children or animals. Complete F	able, scientific,
	contributor, during the contributions totaled in during the year for an General Rule applies	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive year, contributions exclusively for religious, charitable, etc., purposes, but in more than \$1,000. If this box is checked, enter here the total contributions that exclusively religious, charitable, etc., purpose. Do not complete any of the part to this organization because it received nonexclusively religious, charitable, etc., purpose.	to such t were received arts unless the etc., contributions
990-E2	Z, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules does not file Sc st answer "No" on Part IV, line 2, of its Form 990; or check the box on line H certify that it does not meet the filing requirements of Schedule B (Form 990,	of its Form 990-EZ or on its

Name of org	anization	1	
Covenant	Stand	Ministries.	Inc

Employer identification number 56-2279528

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Gwyn R Parsons PO Box 2477 Boone, NC 28607	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Candace Waters PO Box 156 Creston, NC 28615-0156	\$6,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person

Federal Supporting Statements	2014 PG 01_
Name(s) as shown on return	FEIN
Covenant Stand Ministries, Inc.	56-2279528

Form 990PF, Part VII-A, Line 10 Substantial Contributors Schedule Statement #114

Name

Gwyn Parsons

Address

PO Box 2477

Boone, NC 28607-2477

Name

Candace Waters

Address

PO Box 156

Creston, NC 28615-0156

	Your Social Security Number 56-2279528		Charitable	26 55	PG 01 Statement #106				
Federal Supporting Statements		Line 23 - Other Expenses Schedule	Adjusted net income		I, Line 11 - Other Income Schedule	Adjusted net income 0 71	<u>0</u>		
Fed		Form 990PF, Part I, L	Revenue Net and expenses investment		Form 990PF, Part I,	Revenue Net and expenses investment 71 0	71		
	Name(s) as shown on relum Covenant Stand Ministries. Inc.		Description	Bank charges Penalties Totals		Description Thrift shop consignment	Totals		

Federal Supporting Statements Name(s) as shown on return Covenant Stand Ministries, Inc. Page 01 Your Social Security Number 56-2279528

Form 990PF, Part XV, Line 2 Application Submission Information

Grant Program

CSM

Applicant Name

Gwyn R. Parsons

Address

PO Box 2477 Boone, NC 28607

Telephone

828-264-0850

Email Address

Form & Content

For individuals: Statement of need, including \$ amount(s). Statement of income, supported by documentation such as paystubs, tax returns, or unemployment form. Explanation of steps taken to meet need prior to application and proposed plan to become self-sufficient in future as regards such need.

For ministries: Statement of need or purpose, including \$ amount(s). Proposed plan for meeting need.

Submission Deadline

None

Restrictions on Award

Individuals applying for assistance must demonstrate willingness to become self-sufficient; must prove that attempts have been made toward that goal prior to application.

Ministries applying for aid must present bona fide outreach plan and agree to financial transparency as regards use of grants.