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

OMB No 1545-0052

2015

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For cale	ndar year 2015, or tax year beginning	, 2015	and ending		<u> </u>	
	DOM PROJECT 7 BILLION		 "	В	Employer identification nun 47-1529392 Telephone number (see insti	
	PINE ST ENE, TX 79601-5912				(325) 673-673	
	,			С	If exemption application is	pending, check here 🕨 🛚 🗓
G Che	ck all that apply Initial return	Initial return of a form	ner public charity	D	1 Foreign organizations, chec	k here
	Final return Address change	Amended return Name change			2 Foreign organizations meet	
H Che		1(c)(3) exempt private f	oundation	1	here and attach computation	n ►
	Section 4947(a)(1) nonexempt charitable t	rust Other taxable	orivate foundation	E	If private foundation status under section 507(b)(1)(A)	
	n Part II, column (c), line 16)	counting method X C Other (specify) column (d) must be or		F	If the foundation is in a 60- under section 507(b)(1)(B)	month termination
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investme	nt .	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	income		income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (attach schedule)	203,896.				
	2 Ck ► if the foundation is not required to attach Sch B					
	3 Interest on savings and temporary cash investments					
	4 Dividends and interest from securities 5 a Gross rents					
	b Net rental income or (loss)			-		
R E V	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all					
V E	assets on line 6a 7 Capital gain net income (from Part IV, line 2)					
E N U	8 Net short term capital gain	, , , ,				
Ē	9 Income modifications 10 a Gross sales less returns and					
	allowances 10,085.					
	goods sold 1,404.					
	c Gross profit or (loss) (attach schedule). SEE ST 1 11 Other income (attach schedule)	8,681.			8,681.	
	(1)					
	12 Total. Add lines 1 through 11	212,577.		0.	8,681.	
	13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages	32,544. 36,946.			<u> </u>	
	15 Pension plans, employee benefits	30, 340.		RE	CENTED	
А	16a Legal fees (attach schedule) SEE ST 2	656.		N.E	CEIVED	· · · · · · · ·
D M	b Accounting fees (attach sch) SEE ST 3	6,032.	2		9	
Ņ	C Other prof fees (attach sch)		[] []	NO	V 18 2015 9	
O I P S E T R R	17 Interest 18 Taxes (attach schedule)(see instrs) SEE STM 4	6,561.				
A A	19 Depreciation (attach schedule) and depletion SEE STMT 5	14,580.		OG	DEN, UT	
N V G E	20 Occupancy					
_	21 Travel, conferences, and meetings 22 Printing and publications.	2,512.				
A E N X D P	23 Other expenses (attach schedule)					
E N	SEE STATEMENT 6	61,797.				
E N S E	24 Total operating and administrative expenses. Add lines 13 through 23	161,628.				
5	25 Contributions, gifts, grants paid	101,020.				
N D ENSES	26 Total expenses and disbursements Add lines 24 and 25	161,628.		0.	0.	0
	27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements	50,949.				
	b Net investment income (if negative, enter 0-)	30, 343.		0.	<u> </u>	-
	C Adjusted net income (if negative, enter -0-)		· · · · · · · · · · · · · · · · · · ·		8,681.	

Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1 242,097 Enter amount from Part I, line 27a 2 50,949 Other increases not included in line 2 (itemize) 3 3 Add lines 1, 2, and 3 4 293,046 Decreases not included in line 2 (itemize) 5 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 293,046

(a) List and de 2-story brick war	(b) How acquired P — Purchase D — Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a N/A					
b					
С					
d					
<u>e</u>				<u></u>	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain o (e) plus (f) i	
<u>a</u>					
<u>b</u>					
d d					
					
	showing gain in column (h) and owned b	by the foundation on 12/31	/69	(I) Comp. (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		(I) Gains (Co jain minus col. (k), an -0-) or Losses (but not less
a					
b					
<u> </u>					
<u>d</u>		<u></u>			
<u>e</u>				T	
2 Capital gain net income	or (net capital loss)If (loss), ent	enter in Part I, line 7 ter -0- in Part I, line 7	2		_
3 Net short-term capital ga	in or (loss) as defined in sections 1222(5) and (6)			
ın Part I, line 8	t I, line 8, column (c) (see instructions)		3	<u></u>	
	Inder Section 4940(e) for Reduce vate foundations subject to the section 4940			N/A	
'Yes,' the foundation does n	he section 4942 tax on the distributable a ot qualify under section 4940(e) Do not cunt in each column for each year, see the insection 4940 (e)	complete this part		Yes	No
(a) Base period years Calendar year (or tax yea	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as		(d) Distribution (b) divided by	n ratio
2014					·-
2013					
2012					
2011					
2010					
2 Total of line 1, column (4)		2		
3 Average distribution ratio	o for the 5-year base period — divide the ondation has been in existence if less than	total on line 2 by 5, or by t 5 vears			
4 Enter the net value of no	oncharitable-use assets for 2015 from Par	t X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		
	,		1	I .	
7 Add lines 5 and 6	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		7	_	
	ions from Part XII, line 4		7	_	

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)		
	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 instrs)			
	Domestic foundations that meet the section 4940(e) requirements in Part V,			0.
	check here ► and enter 1% of Part I, line 27b			
	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-)			0.
_	Add lines 1 and 2			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			0.
	Credits/Payments			
	2015 estimated tax pmts and 2014 overpayment credited to 2015			
	Exempt foreign organizations — tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			
	Total credits and payments. Add lines 6a through 6d Finter any penalty for undernayment of estimated tax. Check here. If Form 2220 is attached.			0.
	Enter any penalty for underpayment or estimated taxi shoot here			0.
	Tax due. If the total of files 5 and 6 is filere than file 7, effect amount owed			<u> </u>
	Overpayment, it like 7 is more than the total of mics 3 and 6, cited the amount overpaid			
	Little the amount of the to to be created to 2010 estimated tax			
	VII-A Statements Regarding Activities	$\neg \tau$	Yes	No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	103	X
		 		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1 b		Х
	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			
c	Did the foundation file Form 1120-POL for this year?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			
_	(1) On the foundation \$\ 0.\ (2) On foundation managers \$\ 0.\ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	ļ		
е	foundation managers \$ 0.	1		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	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			
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		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		Х
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	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 	6		v
_	with the state law remain in the governing instrument?	7	Х	X
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		_^	ļ
ъa	Enter the states to which the foundation reports or with which it is registered (see instructions) TX			
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 <i>General Instruction G² If 'No,' attach explanation</i>	8 b	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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names			
	and addresses	10	<u></u>	X
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Par	t VII-A	Statements Regarding Activities (continued)					
11	At any ti within th	me during the year, did the foundation, directly or indirectly, own a controlled entity e meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		х
12	Did the fo	oundation make a distribution to a donor advised fund over which the foundation or a disqualified persi privileges? If 'Yes,' attach statement (see instructions)	on had		12	Ì	х
13		foundation comply with the public inspection requirements for its annual returns and exemption	applicat	ion?	13	Х	
-		address					
14	The boo	ks are in care of PAY & COMPANY, P.C. Telephone		(325)	:	- <u>673</u>	6
		at P.O. BOX 2936 ABILENE TX ZIP + 4 >	<u> 796</u>	04-293			· — -
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	▶ 1	l	N/Ā	•	LI NI / A
		er the amount of tax-exempt interest received or accrued during the year		15	—т	Yes	N/A No
16	At any tii bank, se	me during calendar year 2015, did the foundation have an interest in or a signature or other authority of curities, or other financial account in a foreign country?	over a		16	103	Х
		name of the foreign country					
Par	t VII-B			-		1	
		m 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
ıa	-	he year did the foundation (either directly or indirectly) age in the sale or exchange, or leasing of property with a disqualified person?	Yes	XNo			
			∟ '೮3	<u> </u>			
	(2) Borr	ow money from, lend money to, or otherwise extend credit to (or accept it from) a ualified person?	Yes	X No			
		nish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
		compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfor t	nsfer any income or assets to a disqualified person (or make any of either available the benefit or use of a disqualified person)?	Yes	XNo			
	foun	ee to pay money or property to a government official? (Exception. Check 'No' if the idation agreed to make a grant to or to employ the official for a period after termination overniment service, if terminating within 90 days)	Yes	X No			
1) If any a	nswer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in ions section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)	2		1 b	N	/A
		ions section 53 4941 (d)-3 or in a current notice regarding disaster assistance (see instructions) ations relying on a current notice regarding disaster assistance check here	´ ▶	П		IN,	A
	J						
	that we	foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, re not corrected before the first day of the tax year beginning in 2015?			1 c		Х
2	Taxes of private	in failure to distribute income (section 4942) (does not apply for years the foundation was a operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
;	At the e	end of tax year 2015, did the foundation have any undistributed income (lines 6d Part XIII) for tax year(s) beginning before 2015?	Yes	XNo			
		list the years ▶ 20 , 20 , 20 , 20			[
ı		re any years listed in 2a for which the foundation is not applying the provisions of section 4942	(a)(2)				
	(relating	g to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 is listed, answer 'No' and attach statement — see instructions.)	(a)(2) to			N	/A
		rovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	here		<u> </u>		<u> </u>
	15	_ , 20 , 20 , 20					
3	a Did the	foundation hold more than a 2% direct or indirect interest in any business use at any time during the year?	Yes	X No			
	or disqu	did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation ualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approve Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to the foundation had excess business holdings in 2015)	-d	_	21	17	/3
_					3 b	N	/A
4	a Did the charitat	foundation invest during the year any amount in a manner that would jeopardize its ble purposes?			4 a		Х
	b Did the	foundation make any investment in a prior year (but after December 31, 1969) that could				}	
	jeopardi the tax	ze its charitable purpose that had not been removed from jeopardy before the first day of year beginning in 2015?			4 b		Х
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Dort VII D Ctotomonto Donoviling Activiti		A720 May Da Dag	4/-13	23332	<u> </u>	rage
Part VII-B Statements Regarding Activiti		14/20 Way Be Req	uirea (continuea)		$\overline{}$	т
 5 a During the year did the foundation pay or incu. (1) Carry on propaganda, or otherwise attempt 	-	n (section 4945(e))?	☐ Yes X	No		1
(2) Influence the outcome of any specific publi	ic election (see section			1		
on, directly or indirectly, any voter registra (3) Provide a grant to an individual for travel,		purposes?	F-4	No No		
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions	-			No		
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific	:, literary, or		1		
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in	<u>-</u>			No		
(see instructions)? Organizations relying on a current notice rega			: ▶ [¨	5	b 1	N/A
	•		L_	!		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsible. If 'Yes,' attach the statement required by Region 1.	sibility for the grant?		N/A Yes	No		Ì
6a Did the foundation, during the year, receive ar			s	.]	1	
on a personal benefit contract? b Did the foundation, during the year, pay premi			Yes X	No 6	b	X
If 'Yes' to 6b, file Form 8870				, [-		1
7 a At any time during the tax year, was the found			<u> </u>	No		_
b If 'Yes,' did the foundation receive any procee Part VIII Information About Officers, Di				**/ **	b	
and Contractors	rectors, rrustees,	roundation manag	gers, riigiliy raid L	Inploye	C3,	
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expe other	nse ac allowa	
SEE STATEMENT 8						
		32,544.	0.			0 .
		_				
2 Compensation of five highest-paid employees (or	ther than those included		ns). If none, enter 'NONE			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expe	nse ac r allowa	count, ances
NONE						
				 		
				 		
Total number of other employees paid over \$50,000		·	<u> </u>			

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
N/A	_
2	_
	_
NI other program-related investments. See instructions	
3	
	-
	-
otal. Add lines 1 through 3	<u> </u>

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Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. purposes a Average monthly fair market value of securities. 1 a **b** Average of monthly cash balances 1 b c Fair market value of all other assets (see instructions) 1 c d Total (add lines 1a, b, and c) 1 d 0 e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e 2 Acquisition indebtedness applicable to line 1 assets 2 3 3 Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1-1/2% of line 3 4 (for greater amount, see instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 6 Minimum investment return. Enter 5% of line 5 RartXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and do not complete this part.) and certain foreign organizations check here 1 Minimum investment return from Part X, line 6 1 2 a Tax on investment income for 2015 from Part VI, line 5 2 a **b** Income tax for 2015. (This does not include the tax from Part VI) 2 b c Add lines 2a and 2b 20 3 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes. 1 a a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 b **b** Program-related investments — total from Part IX-B 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes. Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3 a 3 b **b** Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 0. 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 0.

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Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

7 Amounts treated as distributions out of corpus 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 2010 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
2 Uncestablied income if any, as of the cert of 2015. a Enter amount for 2014 only b Total for prior years 20 _ 20 _ 20 3 Exess distributions carpover, if any, to 2015 a From 2010 b From 2011 c From 2012 d From 2013 d From 2014 f Total of lines 3a through, e 4 Qualifying distributions for 2015 from Part XII, line 4 \(\times \) \(\times \) Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions of of corpus (Election required - see instructions) d Applied to 2015 distributions for 2015 from 2015 d From 2016 f Treated as distributions out of corpus (Election required - see instructions) d Applied to 2015 distributed amount e Remaining amount distributed out of corpus (Election required - see instructions) d Applied to 2015 distributions carpove any one of the corpus for the amount appears in column (a) the same amount must be shown in column (a) 6 Enter the net total of each column as indicated below: a Corpus As limits if 4c, and 4c Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for mine 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has a line ab from line 2b c Enter the amount of prior years' undistributed income for form line 2b c Enter the amount of prior years' undistributed income for from line 2b c Enter the amount of prior years' undistributed income for from line 2b c Enter the amount of prior years' undistributed income for from line 1 This amount must be distributed income for 2015 Subtract line 4b from line 1 This amount must be distributed in 2016 c Amounts line 6c from line 6b Takelle amount must be distributed in 2016 c Amounts line 6c from line 6c from line 6c and line 6c from line 6c fr					0
a Enter amount for 2014 only bit Total for mery seas 2 0 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
b Total for prior years 20 . 20 . 20 . 30 3 Excess distributions carryover, if any, is 2015 a From 2010 b From 2011 c From 2012 d From 2013 f From 2014 i Total of lines 3a through e 4 Qualifying distributions for 2015 from Part XII, line 4 \$ \$ a Applied to 2014, but not more than line 2a b Applied to 2014, but not more than line 2a c Applied to 2014, but not more than line 2a b Applied to 2014, but not more than line 2a c Treated as distributions out of corpus (Election required — see instructions) d Applied to 2015 distributable amount Remaining amount distributed out of corpus c Excess distributions carryove applied to 2015 d From the 1 total of each column as indicated below: a Corpus Add lines 34, 45, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c C Enter the amount of prior years' undistributed income for which a notice of deficiency has been previously assessed of 4942(a) d Subtract line 6e from line 6b Taxable amount — see instructions d Subtract line 6e from line 6b Taxable amount — see instructions d Subtract line 6e from line 6b Taxable amount — see instructions d Subtract line 6e from line 6b Taxable amount — see instructions d Subtract line 6e from line 6b Taxable amount — see instructions d Subtract line 6e from line 6b Taxable amount — see instructions d Subtract line 6e from line 6b Taxable amount — see instructions d Subtract line 6e from line 6b Taxable amount — see instructions d Subtract line 6e from line 6b Taxable amount — see instructions d Subtract line 6e from line 6b Taxable amount — see instructions d Subtract line 6e from line 6b Taxable amount — see instructions d Subtract lines d side stributions out of corpus to satisfy requirements imposed by section 170(b) (1) for 4942(a) (3) (Election may be required — see instructions) d Subtract lines of and 8 from line 6a d Analysis of line 9 a Excess from 2011 b Excess from 2011 b Excess from 2011 b Excess from 2012	* **		-	0.	
Secess distributions carryover, if any, to 2015 a From 2010 b From 2011 c From 2013 e From 2014 f Total of lines 3a through e 4 Qualifying distributions for 2015 from Part XII, line 4 P S Applied to 2014, but not more than line 2a b Applied to undistributed income of prior years (Election required — see instructions) 6 Treated as distributions out of corpus (Election required — see instructions) 7 Applied to 2015 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryore applied to 2015 (If an amount appears in column (a), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add line 31, 4x, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 6 Enter the amount of prior years' undistributed income for mine 2b 6 Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed 6 Subtract line 6c from line 8b Taxable amount — see instructions 9 Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016 7 Amounts treated as distributions carryover from 2010 not applied on line 50 line 7 (see instructions) 9 Excess distributions carryover from 2010 not applied on line 50 line 7 (see instructions) 9 Excess from 2011 b Excess from 2011 b Excess from 2011 b Excess from 2012	- }		0.		
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4d and 5 from line 1 This amount must be distributed in 2016 7 Amounts treated as distributions out of corpus 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 2010 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012	f Undistributed income for 2015. Subtract lines				
7 Amounts treated as distributions out of corpus 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 2010 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012	4d and 5 from line 1. This amount must be				0.
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions) 8	7 Amounts treated as distributions out of				
may be required — see instructions) 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012	corpus to satisfy requirements imposed by				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012	may be required — see instructions)	l o.			
applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012	S Evenes distributions corrupter from 2010 not				
Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012	applied on line 5 or line 7 (see instructions)	0.			
10 Analysis of line 9 a Excess from 2011 b Excess from 2012	9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	0.			
a Excess from 2011 b Excess from 2012	10 Analysis of line 9				
b Excess from 2012	- ·				1
		1			
	c Excess from 2013	1			
d Excess from 2014		1			
e Excess from 2015		1			

Form 990-PF (2015) KINGDOM PROJECT				47-1529392	Page 10
Part-XIV Private Operating Foundat					N/A
1 a If the foundation has received a ruling or dete is effective for 2015, enter the date of the	ruling			_ · •\	
b Check box to indicate whether the foundat		erating foundation of		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for	Tax year (a) 2015	(b) 2014	Prior 3 years (c) 2013	(d) 2012	(e) Total
each year listed		ļ		 	
b 85% of line 2a. c Qualifying distributions from Part XII.		<u></u>		 	
line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities				 	
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon				}	
a '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					
c 'Support' alternative test - enter					
 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 Information assets at any time during th	(Complete this e year — see ir	s part only if the structions.)	foundation ha	d \$5,000 or more	in
1 Information Regarding Foundation Manage		han 20/ of the tatal a		l bu the foundation bef	ara tha
a List any managers of the foundation who have close of any tax year (but only if they have LATIMER BOWEN	e contributed more	than \$5,000) (See	e section 507(d)(2).)	ore the
b List any managers of the foundation who own a partnership or other entity) of which the NONE	10% or more of the foundation has a	e stock of a corporation of a corporatio	on (or an equally larg	ge portion of the owner	ship of
10112					
2 Information Regarding Contribution, Gran Check here X if the foundation only marequests for funds. If the foundation make complete items 2a, b, c, and d	ikes contributions to	preselected charitab	ole organizations and		
a The name, address, and telephone number o	r e-mail address of	the person to whom a	applications should b	e addressed	
, , , ,					
SEE STATEMENT 9					
b The form in which applications should be	submitted and info	rmation and materi	ais they should incl	uae.	
SEE STATEMENT FOR LINE 2A				-	
c Any submission deadlines:					
SEE STATEMENT FOR LINE 2A		-11	-1.1- 6-11 1 1 1		for all and
d Any restrictions or limitations on awards,	such as by geogra	pnicai areas, charita	able fields, kinds of	institutions, or other	tactors.
CEE CHAMENEUM DOD I THE OA					

Page 11

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 or substantial contributor	Foundation status of recipient		N/A Amount		
Name and address (home or business)	substantial contributor	recipient				
Name and address (home or business) a Paid during the year	substantial contributor	recipient				
Total			. <u>></u> 3a			
b Approved for future payment Total			▶ 31			

Part XVI-A Analysis of Income-Producing Activities

Ente	r gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)	
1	Program service revenue.	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)	
ā	1						
ŧ)						
(1						
•						<u> </u>	
1							
•	Fees and contracts from government agencies			<u> </u>			
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					·	
I	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.					0 601	
10	Gross profit or (loss) from sales of inventory	-				8,681	
11	Other revenue	ļ				<u> </u>	
	a						
	b			 			
	c			+			
	d	+					
	Subtotal Add columns (b), (d), and (e)					8,681	
12		L			13	8,681	
13	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate				13	0,001	

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
10	ORGANIZATION PROVIDES A FACILITY FOR THE CREATION AND DISPLAY OF THE ARTWORK OF
	RELIGIOUS PROPHETIC ARTISTS. FACILITY IS ALSO USED FOR INTER-DENOMINATIONAL
	RELIGIOUS SERVICES. ORGANIZATION SELLS THESE WORKS OF RELIGIOUS ART TO PROVIDE
-	FUNDS TO CONTINUE OUR WORK OF PROVIDING RELIGIOUS LITERATURE AND ARTWORK
	THROUGHOUT THE WORLD.
	THROUGHOUT THE WORLD.

Form 990-PF (2015) KINGDOM PROJECT 7 BILLION 47-1529392 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

									Yes	No
1 Did the o	rganization directly d in section 501(c) o	or indirectly eng	gage in any of the	he following wit	h any otl	her organization	า :27			
relating t	o political organizati	ions?	iei tiiaii sectioii	301(c)(3) 01gan	izations)	or in section 5	127,			
a Transfers	a Transfers from the reporting foundation to a noncharitable exempt organization of:							1		
(1) Cash								1 a (1)		X
(2) Othe	r assets							1 a (2)		X
b Other tra	nsactions									
(1) Sales	s of assets to a non-	charitable exem	npt organization					1 b (1)		_X_
(2) Purcl	nases of assets fron	n a noncharitab	le exempt orgar	nization				1 b (2)		_X
(3) Rent	al of facilities, equip	ment, or other	assets					1 b (3)		_X_
(4) Reim	bursement arranger	ments						1 b (4)		_X_
-	s or loan guarantee							1 b (5)		<u>X</u>
` •	rmance of services	•	•					1 b (6)		_X_
c Sharing o	of facilities, equipme	ent, mailing lists	s, other assets,	or paid employe	ees			1 c	L.,	_ <u>X</u> _
d If the ans	swer to any of the a	hove is 'Yes ' co	omplete the follo	owina schedule	Column	(h) should alw	avs show the fair i	market val	ue of	
the goods	swer to any of the a , other assets, or sen	vices given by th	e reporting found	lation If the foun	dation re	ceived less than	fair market value in	i .	uc oi	
	saction or sharing ar		<u>`</u>	<u></u>						
	(b) Amount involved	(c) Name of	noncharitable exemp	ot organization	(d)	Description of trans	sfers, transactions, and	sharing arrai	ngement	<u>s</u>
I/A										
							· ····································			
	- <u>-</u> -									
	·									
								_		
_										
										
							·	-		
2 a is the four	ndation directly or inc	directly affiliated	with or related to	one or more ta	y-eyemn	t organizations				
describe	d in section 501(c) of	of the Code (oth	ner than section	501(c)(3)) or in	section	527?		Yes	s [X]	No
b If 'Yes,'	complete the follows	ing schedule								
(a)	Name of organizati	on	(b) Type	of organization		(с) Description of rel	ationship		
N/A										
										
							 			
Under procept,	enalties of perjury, I declar and complete Declaration	of preparer (other th	ied this return, includi ian taxpayer) is based	ing accompanying sc d on all information c	nedules and f which pre	d statements, and to parer has any know	the best of my knowledg ledge	e and belief,	it is true,	1
Sign		<i></i>		11				May the	IRS disc	uss
lere	Add	ever		11/5/16	Γ	REASURER		this retui preparer (see ipst	shown b	elow
Signa	ture of officer of pustee			Date /	Tri			- Kee X	Yes	Ĺ No ∣
	Print/Type preparer's nar	me	Preparer's si	ignature		Date	Check if	PTIN		لـتــــــــــــــــــــــــــــــــــــ
Paid	R. L. HOBBY	STEVENS	R L	HOBBY STEV	/ENS	11/15/16	self-employed	P0036	9774	
reparer		RAY & COMPA			-		Firm's EIN ► 75-1			
Jse Only		O. BOX 29								
- July			X 79604-29	 36			Phone no (325	6) 673-	6736	
BAA				= -			, , , , , , , , , , , , , , , , , , , ,	Form 99		

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of the organization		Employer identification number
KINGDOM PROJECT 7 BILLION		47-1529392
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a pri	vate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the General	Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) orga	anization can check boxes for both the General Rule and a	Special Rule. See instructions.
General Rule		
X For an organization filing Form 990, 990-EZ	t, or 990-PF that received, during the year, contributions to te Parts I and II. See instructions for determining a contrib	taling \$5,000 or more (in money or autor's total contributions.
Special Rules		
\square under sections 509(a)(1) and 170(b)(1)(A)(vi)	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% sup that checked Schedule A (Form 990 or 990-EZ), Part II, line 13 ne year, total contributions of the greater of (1) \$5,000 or (0-EZ, line 1 Complete Parts I and II	. 16a. or 16b. and that
during the year, total contributions of more	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, or children or animals. Complete Parts I, II, and III	l from any one contributor, literary, or educational
during the year, contributions exclusively for \$1,000. If this box is checked, enter here the charitable, etc., purpose. Do not complete.	of (c)(7), (8), or (10) filing Form 990 or 990-EZ that received in religious, charitable, etc., purposes, but no such contribute total contributions that were received during the year for any of the parts unless the General Rule applies to this orgole, etc., contributions totaling \$5,000 or more during the year.	itions totaled more than ran <i>exclusively</i> religious, ganization bec <u>a</u> use
990-PE) but it must answer 'No' on Part IV lir	y the General Rule and/or the Special Rules does not file S ne 2, of its Form 990, or check the box on line H of its Form e filing requirements of Schedule B (Form 990, 990-EZ, or	n 990-EZ or on its Form 990-PF.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

LATIMER BOWEN P.O. BOX 2894 ABILENE, TX 79604 Name, address, and ZIP + 4 Total contributions Person [X] Payroll [Noncash Complete Part II for noncash contribution Type of contribution Payroll [Noncash Complete Part II for noncash contribution Type of contributions Person [Payroll Noncash Complete Part II for noncash contributions Type of contributions Number Name, address, and ZIP + 4 Total contributions Person [Payroll Total contributions Type of contributions Person [Payroll Noncash Complete Part II for noncash contributions Type of contributions Person [Payroll Noncash Complete Part II for noncash contributions Type of contributions	Patt	Contributors (see instructions) Use duplicate copies of Part I if additional space	is needed.	
P_O_ BOX_2894	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
Complete Part II for noncash contributions Person Payroll Noncash Number Name, address, and ZIP + 4 Total Contributions Person Payroll Noncash	1	P.O. BOX 2894	\$203,00 <u>0</u> .	Payroll Noncash (Complete Part II for
Payroll	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
Complete Part II for noncash Complete Part II for noncash contributions			\$	Payroll Noncash Complete Part II for
\$ Payroll Noncash (Complete Part II for noncash contributions) Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II for noncash contributions) Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II for noncash contributions) Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II for noncash contributions) Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash Payroll Noncash Payroll Noncash Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash Number Name, address, and ZIP + 4 Total contributions Person Payroll Noncash Noncash Noncash Noncash (Complete Part II for noncash contributions)	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
contributions Person			\$	Payroll Noncash (Complete Part II for
Payroll Noncash Noncash Complete Part II for noncash contributions	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
Contributions Person Payroll Noncash Complete Part II for noncash contributions Person Payroll Noncash contributions Person Payroll Payroll Payroll Payroll Noncash Person Payroll Noncash Noncash Noncash Noncash (Complete Part II for noncash N			\$	Payroll
Payroll Noncash Complete Part II for noncash contributions.) (a) Number Name, address, and ZIP + 4 Contributions Person Payroll Noncash	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
contributions Person Payroll Noncash (Complete Part II for			\$	Payroll Noncash Complete Part II for
Payroll Noncash (Complete Part II for	(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Payroli Noncash Complete Part II for

Page

1 to 1 of Part II

.KINGDOM PROJECT 7 BILLION

Employer identification number

47-1529392

itelvi lli	Noncash Property (see instructions) Use duplicate copies of Part II if additional sp	pace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		s s	
	<u> </u>	Y	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	
 			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		1	
	ļ	 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<u></u>	4	
	<u></u>	- \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
	<u> </u>	-	
	<u> </u>	†s	
		1	
BAA	Sch	edule B (Form 990, 990-E	Z, or 990-PF) (2015

1 to

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

of Part III

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

KINGDOM PROJECT 7 BILLION

BAA

Employer identification number

47	7 –	1	5	2	9	3	9	2	

	exclusively religious, charitable, et or (10) that total more than \$1,000 for the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional:	ne year from any one contrib ompleting Part III, enter the tota (Enter this information once Se	outor. Completed of exclusive	e columns (a) through (e) and ely religious, charitable, etc ,
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	N/A			
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee

2015

FEDERAL STATEMENTS

PAGE 1

KINGDOM PROJECT 7 BILLION

47-1529392

STATEMENT 1
FORM 990-PF, PART I, LINE 10C
GROSS PROFIT (LOSS) FROM SALES OF INVENTORY

ITEMS SOLD	 AMOUNT
	\$ 10,085.
GROSS SALES LESS RETURNS & ALLOWANCES	\$ 10,085.
NET SALES LESS COST OF GOODS SOLD	\$ 10,085. 1,404.
GROSS PROFIT FROM SALES OF INVENTORY	\$ 8,681.

STATEMENT 2 FORM 990-PF, PART I, LINE 16A LEGAL FEES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	TOTAL	\$ 656. \$ 656.	\$ 0.	\$ 0.	\$ 0.

STATEMENT 3 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

	_	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	TOTAL \$\frac{\$}{5}\$	6,032. 6,032.	\$ 0.	\$ 0.	\$ 0.

STATEMENT 4 FORM 990-PF, PART I, LINE 18 TAXES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES	TOTAL	\$ 6,561. \$ 6,561.	\$ 0.	\$ 0.	\$ 0.

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	U	- 4	

FEDERAL STATEMENTS

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KINGDOM PROJECT 7 BILLION

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STATEMENT 5 FORM 990-PF, PART I, LINE 19 ALLOCATED DEPRECIATION

DATE ACOUIRED	COST BASIS	PRIOR YR DEPR	METHOD_	RATE	CURRENT LIFE YR DEPR	NET INVEST	ADJUSTED NET INCOME
234 PINE STF 10/31/14	REET 214,415	1,147	S/L	0.0256	5,498	0	0
FURNITURE 11/30/14	20,641	737	200DB	0.2755	5,687	0	0
2 TABLETS 1/31/15	303		200DB	0.2	61	0	0
2 AIR'S(COME 1/31/15	PUTERS) 1,492		200DB	0.2	298	0	0
SECURITY SYS 2/06/15	STEM 3,001		200DB	0.1429	429	0	0
COMPUTER 3/31/15	1,264		200DB	0.2	253	0	0
POSTER STANI 4/30/15	527		200DB	0.1429	75	0	0
PEGASUS LIGH 8/31/15	HTING 1,115		200DB	0.1429	159	0	0
BARCODE SCAN 10/31/15	NNER/PRINTE 518	₹	200DB	0.1429	74	0	0
ALARM CAMERA 12/31/15	A'S 1,200		200DB	0.1429	171	0	0
234 PINE 5/31/15	31,409		S/L	0.0161	504	0	0
TRAILER 7/31/15	9,593		200DB	0.1429	1,371	0	0

STATEMENT 6 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE OFFICE OTHER PROMOTION REPAIRS & MAINTENANCE UTILITIES WEBSITE EXPENSES	\$ 2,936. 3,785. 14,034. 21,312. 3,138. 4,130. 12,462. TOTAL \$ 61,797.	\$ 0.	<u>\$</u> 0.	\$ 0.

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FEDERAL STATEMENTS

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KINGDOM PROJECT 7 BILLION

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STATEMENT 7 FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIPMENT

CATEGORY		 BASIS	_	ACCUM. DEPREC.	 BOOK VALUE	F.	AIR MARKET VALUE
AUTO./TRANSPORTATION EQUIP FURNITURE AND FIXTURES MACHINERY AND EQUIPMENT IMPROVEMENTS	TAL	\$ 9,593. 20,641. 9,420. 245,824. 285,478.	\$	1,371. 6,424. 1,520. 7,149. 16,464.	\$ 8,222. 14,217. 7,900. 238,675. 269,014.	\$	0. 0. 0. 269,014. 269,014.

STATEMENT 8 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	
HOBBY STEVENS P.O. BOX 2936 ABILENE, TX 79604	TREASURER 0			\$ 0.
LATIMER BOWEN P.O. BOX 2894 ABILENE, TX 79604	PRESIDENT 0	0.	0.	0.
DAVID BLACK 250 ELM COVE DR. ABILENE, TX 79602	VICE PRESIDENT 0	0.	0.	0.
LAURA JACOBS 1482 WESTWOOD ABILENE, TX 79603	SECRETARY 27.00	19,562.	0.	0.
SHANE BOWEN 1509 BEECHWOOD AVENUE NASHVILLE, TN 37212	DIRECTOR 40.00	12,982.	0.	0.
ASHLEY BOWEN 791 EDGEWATER TERRACE NEW BRAUNFELS, TX 78130	DIRECTOR 0	0.	0.	0.
WATSON BOWEN 301 CYPRESS STREET, SUITE 701 ABILENE, TX 79601	DIRECTOR 0	0.	0.	0.
BRYCE FOOTER 126 CREST DRIVE SAN MARCUS, TX 78666	DIRECTOR 0	0.	0.	0.
AMY BLACK 250 COVE DRIVE ABILENE, TX 79605	DIRECTOR 0	0.	0.	0.
	TOTAL	\$ 32,544.	\$ 0.	\$ 0.

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FEDERAL STATEMENTS

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KINGDOM PROJECT 7 BILLION

47-1529392

STATEMENT 9 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

LAURA JACOBS

CARE OF:

KINGDOM PROJECT 7 BILLION

STREET ADDRESS:

234 PINE STREET

CITY, STATE, ZIP CODE: TELEPHONE:

ABILENE, TX 79601

E-MAIL ADDRESS: FORM AND CONTENT: SUBMISSION DEADLINES: RESTRICTIONS ON AWARDS: