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Form 990-PF Department of the Treasury

Internal Revenue Se

EXTENDED TO NOVEMBER 15, 2017

Return of Private Foundation

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

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.lrs.gov/form990pf.

For calendar year 2016 or tax year beginning and ending Name of foundation A Employer identification number ACTS OUTREACH MINISTRIES INC. 01-0751210 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 6045 CENTURY OAKS DRIVE 423-899-6830 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here TN CHATTANOOGA, 37416 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: | X | Cash Accrual F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here (Part I, column (d) must be on cash basis.) **>**\$ 411,438. (d) Disbursements or charitable purpose (cash basis only) Part | Analysis of Revenue and Expenses (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome 53,150 N/A Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch B interest on savings and temporary cash investments 100. 100. STATEMENT 3 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 0 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income Total. Add lines 1 through 11 53,250 100. 13 Compensation of officers, directors, trusted
14 Other employee salaries arcurages
15 Pension plans, employee benefits
16a Legal fees
b Accounting fees
c Other professional fees
17 Interest
18 Taxes
S Depreciation and depletion
20 Occupancy
21 Travel, conferences, and meetings
22 Printing and publications
33 Other expenses
55 0 0. 14 Other employee salaries and ages VED AUG 0 4 2017 1,353 0 STMT 2 0. 13,383 23 Other expenses STMT 3 0 0. 24 Total operating and administrative 0 14,736 expenses. Add lines 13 through 23 0. 56,584 56,584. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 0 Add lines 24 and 25 71,320 56,584. 27 Subtract line 26 from line 12: -18,0708 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 100 N/A

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c Adjusted net income (it negative, enter -0-)

<u>For</u>	m 99	00-PF (2016) ACTS OUTREACH MINISTRIES			751210 Page 2
P	àrt	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
<u>:</u>			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		150,141.	138,438.	138,438.
		Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less; allowance for doubtful accounts			
	4	Pledges receivable ►		Į	
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			<u> </u>
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ď	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	investments - other			
	14	Land, buildings, and equipment basis ► 273,000.		İ	
		Less accumulated depreciation	273,000.	273,000.	273,000.
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	423,141.	411,438.	411,438.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Š	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi		Mortgages and other notes payable			
Ξ	22	Other liabilities (describe STATEMENT 4)	0.	6,367.	
_	23	Total liabilities (add lines 17 through 22)	0.	6,367.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
Fund Balances	26	Permanently restricted			
힡		Foundations that do not follow SFAS 117, check here			
Ę	ļ	and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
¥.	29	Retained earnings, accumulated income, endowment, or other funds	423,141.	405,071.	
Š	30	Total net assets or fund balances	423,141.	405,071.	
_	31	Total liabilities and net assets/fund balances	423,141.	411,438.	
F	art	Analysis of Changes in Net Assets or Fund Ba	alances		
Ξ					
1		I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	-	st agree with end-of-year figure reported on prior year's return)	423,141.		
2		r amount from Part I, line 27a	2	<u>-18,070.</u>	
3		er increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3			405,071.
5		reases not included in line 2 (itemize)		5	0.
<u>6</u>	Tota	i net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6_	405,071.
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_	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	048 -				Page 4
<u> </u>		 _	366	113414	icao	113)
18	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)					
D	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%					
	of Part I, line 27b					
	c 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-)					
3	Add lines 1 and 2	3				$\frac{2}{0}$.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				<u>2.</u>
	Credits/Payments:					
	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 6a	1				
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868) 6c 6c					
	Backup withholding erroneously withheld Tatalan alta and a second and	_				^
	Total credits and payments. Add lines 6a through 6d	-7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				2.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			_	
	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ Int VII-A Statements Regarding Activities					
_				т—	Vaa	No
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	'n		<u> </u>	162	No
	any political campaign?	^	-	18		X
Đ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)		• •	1 <u>b</u>		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ea or				
	distributed by the foundation in connection with the activities.			١.		٠,,
	Did the foundation file Form 1120-POL for this year?		••	1c		X
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.			2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	ŗ				1
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
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?	N/	'A	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	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		••	7_	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
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	<u></u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for caler	ndar	•			
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses S'	TMT	<u>5.</u>	10	X	ــــــــــــــــــــــــــــــــــــــ
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Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
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	,	X
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 ► RANDALL L. MCCOY Telephone no. ►423-8	99-6	830	
	Located at ► 6045 CENTURY OAKS DRIVE, CHATTANOOGA, TN ZIP+4 ►3			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	7310		
13	and enter the amount of tax-exempt interest received or accrued during the year	N	/A_	
40			Yes	No
10	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,	40	163	l
	securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
De	foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		12.0	
	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):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			•
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	Ì		
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	ł		ĺ
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	İ		
·	before the first day of the tax year beginning in 2016?	1c		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	''-		
٠.	defined in section 4942(j)(3) or 4942(j)(5)):			
	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
۰	before 2016? Yes X No			
	18 Mars II all the comments of the Comments of			
_	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
Q				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1		
	statement - see instructions.) N/A	2b		
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	1		
	during the year?			
b	If "Yes," did it have excess business holdings in 2016 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,	ļ		
	Form 4720, to determine if the foundation had excess business holdings in 2016) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			L
	had not been removed from reported before the first day of the tax year beginning in 2016?	Ah	I	Ţ

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prm 990-PF (2016) ACTS OUTREACH MINISTRIES Part VII-B Statements Regarding Activities for Which I		Paguirad (contin	01-07512	10 Page <u>6</u>
	romii 4720 May be r	required (contin)	<u> </u>	
5a During the year did the foundation pay or incur any amount to:	- 404E(-\\0		es X No	li
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			ווא בבו אי	
(2) Influence the outcome of any specific public election (see section 4955); of any voter registration drive?	or to carry on, unecting or mune		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		s X No	l l
(4) Provide a grant to an organization other than a charitable, etc., organization			38 LAL 140	
4945(d)(4)(A)? (see instructions)	□ ve	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or adjugational nurnoces, or f	•	38 (24 NO	
the prevention of cruelty to children or animals?	or cadeational parposes, or r		s X No	
b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni-	der the excentions described i		100	
section 53.4945 or in a current notice regarding disaster assistance (see instru	·	ii riogulationo	N/A	5ь
Organizations relying on a current notice regarding disaster assistance check h	•	••		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ned		
expenditure responsibility for the grant?		/A 🗆 Ye	s No	
If "Yes," attach the statement required by Regulations section 53.494		.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay promising on	Ye	s X No	1 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.		••		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	☐ Ye	s X No	1 1
b If "Yes," did the foundation receive any proceeds or have any net income attribute			N/A	7b
Part VIII Information About Officers, Directors, Trust		nagers, Highly	/	
Paid Employees, and Contractors				
List all officers, directors, trustees, foundation managers and their		14.50	(attains a second	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	compensation	allowances
RANDALL L. MCCOY	PRESIDENT & D	IRECTOR		
045 CENTURY OAKS DRIVE			_	_
CHATTANOOGA, TN 37416	5.00	0.	0.	0.
JEFF A. MOWERY	SECRETARY & D	IRECTOR		
5045 CENTURY OAKS DRIVE				•
CHATTANOOGA, TN 37416	2.00_	0.	0.	0.
	-	ļ		
	-	ļ		
	1			
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."		
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE				
		Į i	ļ	
				_
		L		
otal number of other employees paid over \$50,000			<u></u>	0
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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "N (a) Name and address of each person paid more than \$50,000		1,10
NONE	(b) Type of service	(c) Compensation
NONE		
		-
		-
Total number of others receiving over \$50,000 for professional services		ō
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	information such as the d, etc.	Expenses
MISSION TRIPS		
		13,525.
LOCAL OUTREACH		
		27,300.
3 DOMESTIC MINISTRY		
		15,759.
4		-
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines.	s 1 and 2.	Amount
1 N/A		741104111
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<u></u>	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	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	1a	0.
b	Average of monthly cash balances	1b	125,258.
C	Fair market value of all other assets	1c	273,000.
d	Total (add lines 1a, b, and c)	1d	398,258.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	398,258.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,974.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	392,284.
6	Minimum investment return. Enter 5% of line 5	6	19,614.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	19,614.
-	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	2.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	19,612.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	19,612.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	19,612.
P	art XII Qualifying Distributions (see instructions)		
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	56,584.
b	Program-related investments - total from Part IX-B	1b	0.
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	
þ	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	56,584.
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	_5	<u> </u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	56,584.
	Note: The amount on line 6 will be used in Part V, column (h), in subsequent years when calculating whether the foundation (malifiae fo	r the cection

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2015	2015	2016
1 Distributable amount for 2016 from Part XI,				
line 7				19,612.
2 Undistributed income, if any, as of the end of 2016		į	_	
a Enter amount for 2015 only			0.	····
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 35,231.				
b From 2012 34,967.				
c From 2013				
d From 2014				
e From 2015 29,394.				
f Total of lines 3a through e	99,592.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$ 56,584.			_	
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				19,612.
e Remaining amount distributed out of corpus	36,972.			
5 Excess distributions carryover applied to 2016 (if an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	136,564.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c 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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
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)	0.			
8 Excess distributions carryover from 2011	-			
not applied on line 5 or line 7	35,231.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	101,333.			
10 Analysis of line 9;				
a Excess from 2012 34,967.				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015 29,394.				
e Excess from 2016 36,972.				<u> </u>

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling						
IOUNGAIND AND THE CHIMA IS STROKE FOR ALLE AND AGE OF THE CHIMA						
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or	4942(j)(5)					
2 a Enter the lesser of the adjusted net Tax year Prior 3 years income from Part I or the minimum (a) 2016 (b) 2015 (c) 2014 (d) 20	D13 (e) Total					
	(e) 10tal					
investment return from Part X for						
each year listed						
b 85% of line 2a						
c Qualifying distributions from Part XII,						
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						
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:						
(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 Information (Complete this part only if the foundation had \$5,00	00 or more in assets					
at any time during the year-see instructions.)						
1 Information Regarding Foundation Managers:						
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation bef	fore the close of any tax					
year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)						
NONE						
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the owner other entity) of which the foundation has a 10% or greater interest.	rship of a partnership or					
NONE						
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:						
Check here In the foundation only makes contributions to preselected charitable organizations and does not accept unso	dicited requests for funds. If					
the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2						
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:						
JEFF MOWERY, 423-899-6830						
6045 CENTURY OAKS DRIVE, CHATTANOOGA, TN 37416						
b The form in which applications should be submitted and information and materials they should include:						
THE ACTIVITY BROCHURE OR FLYER MUST BE ATTACHED TO THE APPLICATION.						
c Any submission deadlines:						
APPLICATION MUST BE SUBMITTED 60 DAYS PRIOR TO THE ACTIVITY.						
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	<u>•</u>					
ELIGIBILITY FOR SCHOLARSHIP GRANTS - RECIPIENT MUST USE SCH	OLARSHIP FOR A					
CHRISTIAN BASED ACTIVITY AND MUST BE UNDER THE AGE OF 23.	Caraconti I VII A					
623601 11-23-16	Form 990-PF (2016)					

Part XV Supplementary Informati	<u></u>			
3 Grants and Contributions Paid During the		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid dunng the year				
MERICAN CANCER SOCIETY			LOCAL OUTREACH	100
MERICAN HEART ASSOCIATION			LOCAL OUTREACH	100
TITY KIDS WILDERNESS PROJECT			LOCAL OUTREACH	
TIT KIDS WIESERWESS TROUBET			DOCAD GUIREACH	100
HOLSTON UNITED METHODIST HOME			LOCAL OUTREACH	100
NATIONAL MARROW DONOR PROGRAM			LOCAL OUTREACH	100
	ONTINUATION SHEE	T(S)	► 3a	56,584
δ Approved for future payment NONE				

Unrelated business income

Excluded by section 512, 513, or 514

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
1 Program control revenue:	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code	· · · · · · · · · · · · · · · · · · ·	ade -		
a			ļ		
b		· · · · · · · · · · · · · · · · · · ·	1		
c				<u> </u>	
d	<u> </u>				
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash			 		
	1		1 1 1	100	
investments	-		14	100.	
4 Dividends and interest from securities	ļ				
5 Net rental income or (loss) from real estate:			-		
a Debt-financed property	<u></u>				
 Not debt-financed property 					
6 Net rental income or (loss) from personal			1 1		
property					
7 Other investment income		. <u></u>			
8 Gain or (loss) from sales of assets other					
than inventory	1 1				
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	-		 -		
• •			-		
11 Other revenue:	l				
a		·	-		
b					
C			ļ		
d					
e				· · · · · · · · · · · · · · · · · · ·	
12 Subtotal. Add columns (b), (d), and (e)		0.		100.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	100.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	a the Acc	mplichment of Ex		t Dumocoo	
Part AVI-B Relationship of Activities to	U LIIO ACCL	unbusiment of E	Kemb	t Purposes	
Line No. Explain below how each activity for which incor	me is reported	n column (e) of Part XVI-A	Contrib	uted importantly to the accor	nplishment of
▼ the foundation's exempt purposes (other than)	by providing fu	nds for such purposes).			•
		·· ··		· · · · · · · · · · · · · · · · · · ·	
					
	·				
					
	- 				
					
					
					
					
				 	
					
					
					
l e e e e e e e e e e e e e e e e e e e					

Form **990-PF** (2016)

Part	Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations										
1 D	d the ord	ganization directly or indi		he following	g with any other o	roanization	described in sect	on 501(c) of		Yes	No
		other than section 501(c)				-					
		from the reporting founda									
) Cash				,				1a(1)		X
•) Other	assets						••	1a(2)		X
•	•	sactions:						•	1.0,2,		
		of assets to a noncharital	ble exempt organization	1					1b(1)		X
•	•	ases of assets from a no							1b(2)		X
•	•	l of facilities, equipment,	_						1b(3)		X
•	•	oursement arrangements						-	1b(4)		X
	(5) Loans or loan guarantees							1b(5)		X	
-	•	rmance of services or me	mbership or fundraising	n solicitatio	ns				1b(6)		X
•	•	facilities, equipment, ma		_				-	1c		X
	-	ver to any of the above is	_			thould alwa	ave show the fair n	narket value of the god		sets	
01	services	s given by the reporting for the value of the goods,	oundation. If the founda	tion receive						5010,	
(a) Line		(b) Amount involved		_	exempt organizat	ion.	(d) December	of transfers, transactions	and shown a	~~~~	
(a) Line	ПО	(B) Aniount involved	(c) Name of no		exempt organizat	1011	(u) Description	of transfers, transactions	, and sharing a	rangeme	nts
	_			N/A							
	-+			_							
	_	. <u> </u>									
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		<u></u>	<u> </u>				· · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
			 -				 -		-		
0- 1-	the four	dation disasthi as Indisas	the affiliated with as sala	tod to one	or more toy ever		tions described				
		idation directly or indirect 501(c) of the Code (other	•			pt organiza	mons described		Yes	v	No
			, , , ,)) or in sect	1011 527 5				L Yes	لما	טאו ר
וו פ	res, co	mplete the following sch (a) Name of org			(b) Type of orga	nization		(c) Description of relat	tionship.		
		N/A	janization		(b) type of orga	IIIZGUOII		(c) Description of rela	uonamp		
		N/A									
											
							- <u></u> -				
											
	Under	penalties of perjury, I declare	that I have examined this re	tum, includin	a accompanying sch	dules and st	tatements, and to the	best of my knowledge			
Sigr Here	and be	blief, it is true, correct, and cor						has any knowledge	May the IRS return with the shown below	ne prepar v (see ins	er I
	Sign	ature of officer or trustee			Date		Title		<u> </u>		
		Print/Type preparer's na	ame V P	reparer's si	gnature	I	Date	Check If P	TIN		
Paic		PAT BIGGER	us 7	Patria	a l Bigg	-	7-19-17	self- employed	P00172	436	
Prep	arer	Firm's name ► HLB		LINS,	P.C. 00			Firm's EIN ▶ 58			
-	Only-				· ·						
	-	Firm's address ▶ 33	30 CUMBERL	AND B	OULEVARD	, # 9	900	 			
	ATLANTA, GA 30339						Phone no. 770	-433-1	711		

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, or 990-PF) and its instructions is at www.lrs.gov/form990 .

OMB No 1545-0047

Name of the organization

Employer identification number

A(CTS OUTREACH MINISTRIES INC.	01-0751210						
Organization type (check of	ine):							
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization							
	4947(a)(1) nonexempt chantable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charatable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
, ,	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule. See instructions.						
General Rule								
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributo							
Special Rules								
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supportant 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount in a complete Parts I and II.	a, or 16b, and that received from						
year, total contribu	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year								
but it must answer "No" or	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (n Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its f the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•						

-CHA- For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. - Schedule B (Form 990, 990-EZ, or 990-PF) (2016).

Name of organization

Employer identification number

ACTS OUTREACH MINISTRIES INC.

01-0751210

17C 1 D	OCTREMEN MINIBURIED INC.		0731410
Part I	Contributors (See instructions) Use duplicate copies of Part I if addit	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FIRST AMERICAN TITLE LENDING OF GA 6045 CENTURY OAKS DRIVE CHATTANOOGA, GA 37416	\$50,000.	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

ACTS OUTREACH MINISTRIES INC.

01-0751210

Part II	Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.				
(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		
.					
		\$			
(a) No. rom 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	(b) Description of noncash property given	(c) FMV (or-estimate) (See instructions)	(d) Date received		
art I					
		<u> </u>			
453 10-18-1		\$	990, 990-EZ, or 990-PF) (20		

Name of org	anization		Employer identification number				
3 CMC (NIMBEROU MINICADIEC INC		01 0751210				
Part III	the year from any one contributor. Complete of completing Part III, enter the total of exclusively religious	ributions to organizations described columns (a) through (e) and the follow s, charitable, etc., contributions of \$1,000 or	in section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations less for the year (Enter this info once)				
(a) No.	Use duplicate copies of Part III if addition						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
							
İ							
-		(e) Transfer of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
(a) No.							
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(a) Transfer of miss					
		(e) Transfer of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
							
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I		•					
							
<u> </u>		(e) Transfer of gift					
		(5) 114115151 51 9111	•				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Fait							
	(e) Transfer of gift						
	Tangatasaka						
}	Transferee's name, address, a	ng ZIP + 4	Relationship of transferor to transferee				

ACTS OUTREACH MINISTRIES INC.

Part XV | Supplementary Information

01-0751210

3 . Grants and Contributions Paid During th	e Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
NEW LIFE RANCH		-	LOCAL OUTREACH	100
NATIONAL MS SOCIETY			LOCAL OUTREACH	100
				100
ST. JUDE			LOCAL OUTREACH	100
THE CARING PLACE		v. i	LOCAL OUTREACH	100
UNION GOSPEL MISSION		\ <u>*</u>	LOCAL OUTREACH	100
WESTWOOD BAPTIST CHURCH			LOCAL OUTREACH	100
ON POINT			LOCAL OUTREACH	15,000
NEW HOPE PREGNANCY CARE CENTER			LOCAL OUTREACH	2,000
EAST BRAINERD CHURCH OF CHRIST			LOCAL OUTREACH	4,200
PRISON PREVENTION MINISTRIES			LOCAL OUTREACH	
Total from continuation sheets .				5,000 56,084

Part XV Supplementary Information	<u>TREACH MINISTRII</u> n			51210
3 . Grants and Contributions Paid During the \				
Recipient				
<u> </u>	show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Contribution	
DOMESTIC MINISTRY-TAYLOR JENKINS			DOMESTIC MINISTRY	2,30
DOMESTIC MINISTRY-KEITH HABERNAS			DOMESTIC MINISTRY	
OMESTIC MINISTRI-RETTI IMBERRAS			DOMESTIC MINISTRI	24
ADS PHOENIX MARKETING COMMUNCATION			DOMESTIC MINISTRY	
				96
HICKORY GROVE BAPTIST CHURCH			DOMESTIC MINISTRY	25
BIG OAK RANCH			DOMESTIC MINISTRY	
		-		12,00
CRU-MISSION TRIP			MISSION TRIPS	4,20
MISSION TRIP-KEITH HABERNAS			MISSION TRIPS	4.50
				4,72
INFLUENCERS CHURCH			MISSION TRIPS	1,15
MISSION TRIP-MIKE IOSLA			MISSION TRIPS	
				1,00
LEE UNIVERSITY	-		MISSION TRIPS	

ACTS OUTREACH MINISTRIES INC. 01-0751210

Recipient sin individual frequents as an individual frequents as an individual frequent services of any tourishand or an individual frequents and address (home or business) Primary of the property of the p	3. Grants and Contributions Paid During the	Year (Continuation)			
PRIENDS OF SAMARITAN'S PLACE MISSION TRIPS 1,006 MISSION HOUSE	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
FRIENDS OF SAMARITAN'S PLACE MISSION TRIPS 1,009 MISSION HOUSE	Name and address (home or business)	or substantial contributor	recipient	Contribution	
FRIENDS OF SAMARITAN'S PLACE MISSION TRIPS 1,009 MISSION HOUSE					
FRIENDS OF SAMARITAN'S PLACE MISSION TRIPS 1,009 MISSION HOUSE					
FRIENDS OF SAMARITAN'S PLACE MISSION HOUSE 1,000	EFCA DONOR SERVICES			MISSION TRIPS	
MISSION HOUSE					1,200,
MISSION HOUSE					
MISSION HOUSE					
MISSION HOUSE	FRIENDS OF SAMARITAN'S PLACE			MISSION TRIPS	
					1,000,
Tatal form continuation shoots				MISSION HOUSE	
Tatal for application sheets					
Table for continuous as shorts					
Tabl form continuation choses					
Tatal form continuation shorts					
Tatal form continuation shorts					
Total form continuation shoots					
Total from continuation chapts					
Tatal from sentinuction cheets					
Tatal from positionation phases					
Tatal form continuation choots					
Tatal form continuation chasts					
Take from postinuation shoots					
Tatal from continuation abouts					
Total from continuation cheefts					
Tatal from continuation charts					
Tatal from continuation charts					
Tatal from continuation chaets					
Total from continuation cheets					
Total from continuation chapts					
Total from continuation chapts					
Total from continuation chapte					
Total from continuation chapte					
Total from continuation chapte					
Total from continuation chapte					
Total from continuation chapte					
TOTAL TRUM GUITHURNOU XUMBIX	Total from continuation sheets			<u> </u>	

(A) (B) REVENUE NET INVESTMENT SOURCE PER BOOKS INCOME	
	(C) ADJUSTED NET INCOME
CHECKING INTEREST 100. 100.	
TOTAL TO PART I, LINE 3 100. 100.	

FORM 990-PF	TAX	ES	STATEMENT 2		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
REAL ESTATE TAXES	1,353.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	1,353.	0.		0.	

FORM 990-PF	OTHER EXPENSES		S'	ratement 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
UTILITIES REPAIRS AND MAINTENANCE	5,124. 8,259.	0.		0.
TO FORM 990-PF, PG 1, LN 23	13,383.	0.		0.

FORM 990-PF OTHER LIABILITIE	S	STATEMENT 4
DESCRIPTION	BOY AMOUNT	EOY AMOUNT
DUE TO MCCOY PROPERTIES	0.	6,367.
TOTAL TO FORM 990-PF, PART II, LINE 22	0.	6,367.

RANDALL L. MCCOY

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS STATEMENT 5
PART VII-A, LINE 10

NAME OF CONTRIBUTOR ADDRESS

9817 HIGHWAY 58 CHATTANOOGA, TN 37363