Form **990-PF** 

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

OMB No 1545-0052

Name	of foundation						A Employer identification	number
7A 7ATT	הבספראז פינ	1D T CMT X	N FOUNDĀT	TON			26-2691504	
			not delivered to street			Room/suite	B Telephone number	<del></del>
	93 ENCLAY						(507) 530-	5981
			and ZIP or foreign i	postal code		<del></del>	C If exemption application is p	
MIN	NNETONKA,	MN 5	5305					
Chec	ck all that apply:	===	ai return	Initial return of a fo	rmer public (	charity	D 1. Foreign organizations	s, check here 🕨 ► [
			l return	Amended return			Foreign organizations me check here and attach co	eting the 85% test,
Char	ck type of organiza		ress change	Name change exempt private foundation			1	· -
	Section 4947(a)(1)			Other taxable private founda	tion		E If private foundation sta under section 507(b)(1)	
	narket value of all			ting method: X Cash	Accr	rual	F If the foundation is in a	
(from	Part II, col. (c), i			Other (specify)			under section 507(b)(1)	
<u>▶\$</u>				umn (d) must be on cash b	asıs)			<del></del>
rart	(The total of amou	venue and Exp ints in columns (b) the amounts in co	enses ) (c) and (d) may not	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net	(d) Disbursements for charitable purposes
1				43,000.				(cash basis only)
2			required to attach Sch. B					
3	Interest on savings	and temporary						
4	Dividends and i	nterest from se	curities			<del>-,,-</del>		
- 1	a Gross rents	4					<del> </del>	
1.	b Net rental income o	`	not an lies 10	<del> </del>			<del> </del>	<del> </del>
<u>a</u>	6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all b assets on line 6a				<del></del>		<del></del>	
evenue 2		ome (from Part IV,	, line 2)			0.		
8	Net short-term	capital gain						
9	Gross sales less re			<del></del>				
1	a and allowances  b Less Cost of good	s sold		<del> </del>				
1	c Gross profit or (							
	Other income	•		300.		0.	0.	STATEMENT
12				43,300.		0.	0.	
13	•			0.		0.	0.	
14	Other employee Pension plans, e		-					
	a Legal fees							
	b Accounting fees		STMT 2	775.		0.	0.	
EX	c Other profession	nal fees			<del></del>			
9 17				}				
Strat 19	Depreciation and	i depletion						
ministrative Expens 05 61 81 11								
¥ 21	-		ngs	6,466.		0.	0.	
pue 22		lications	Consens 2	2 644	<del></del>			
Operating and	· <del>-</del>	and administra	STMT 3	3,514.		0.	0.	
era 24	Total operating expenses, Add			10,755.		0.	0.	(
Ö 25	Contributions, g	_		66,524.				66,52
26	Total expenses		ients.				_	
1	Add lines 24 and			77,279.		0.	0.	66,52
27	Subtract line 25	ETVED		<33,979.>				
	a Excess of evenue b Net investment Adjusted het in	income (if negat	tive, enter -0-)			0.		<del></del>
	Adjusted heBnd	ante (2017)	, enler q-)				0.	
3501 1	93 6 LHA F	or Paperwork	Reduction Act Notic	e, see instructions.				Form 990-PF (20

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See the Part VI instructions.

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If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate,

29,563.

66,524.

8 Enter qualifying distributions from Part XII, line 4

7 Add lines 5 and 6

	n 990-PF (2016) ANDERSON CHRISTIAN FOUNDATION		<u>-269:</u>			Page 4
P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	· see i	nstru	ction	IS)
18	a 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)		J			
1	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🚺 and enter 1%	11				0.
	of Part I, line 27b		1			
(	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	L				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3	<u> </u>			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<u> </u>			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments:					
a	2016 estimated tax payments and 2015 overpayment credited to 2016 6a	ا				
ł	Exempt foreign organizations - tax withheld at source					
	: Tax paid with application for extension of time to file (Form 8868)	]				
(	Backup withholding erroneously withheld	7				
7	Total credits and payments. Add lines 6a through 6d	7	]		-	0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax	11				
Pa	art VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven-	e in		T	Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	1)?		16		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ned or				
	distributed by the foundation in connection with the activities					
c	Did the foundation file Form 1120-POL for this year?			1c	~-	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .				'	
е	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?			2	- ~	X
	If "Yes," attach a detailed description of the activities.				, ,	1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	if				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	,	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	NT.	(/3	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	14	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
6	If "Yes," attach the statement required by General Instruction T.  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	a law				
	remain in the governing instrument?			6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	,		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					İ
	SD					1
þ	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	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				37
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	<del></del>	<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10	X	10045
			ror	m <b>990</b>	-Fr (	(2016)

•	b if any answer is "Yes" to Ta(1)-(6), dio <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	· .	i	l l
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1	
	Organizations relying on a current notice regarding disaster assistance check here	]		
c	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			
	before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
a	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	-		
	before 2016? Yes X No	, }		
	If "Yes," list the years >		1	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		1
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>&gt;</b>			
3а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	. }		
b	o 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,			
	Form 4720, to determine if the foundation had excess business holdings in 2016) N/A	35		
4a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
þ	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 secondly before the first day of the tax year beginning in 2016?	l an	1 1	Y

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Part VII-B Statements Regarding Activities for Which F	Form 4720 May Be R	equired (contin	nued)		
5a During the year did the foundation pay or incur any amount to:			1		T
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955); (	ectly,	}			
any voter registration drive?		Y	'es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	57	Y	es X No		1
(4) Provide a grant to an organization other than a charitable, etc., organization	in described in section		1		1
4945(d)(4)(A)? (see instructions)		Y	es X No		1
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f				
the prevention of cruelty to children or animals?	,,		es X No		j
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described				} .
section 53.4945 or in a current notice regarding disaster assistance (see instru	·	, riogulationio	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•				<del> </del>
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined			
expenditure responsibility for the grant?		- / - (	es No	- 1	
If "Yes," attach the statement required by Regulations section 53.4945		•/ **	63 [] 100		}
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	, ,		}		1
a personal benefit contract?	pay premiums on	r1 v	es X No		
• ***	Canada hanaid anatronia	L 1	1		<b>.</b>
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	Dersonal benefit contract?		<u> </u>	6b	X
If "Yes" to 6b, file Form 8870.		г,	िं चि	-	Ì
7a At any time during the tax year, was the foundation a party to a prohibited tax s		() <b>Y</b>	es X No	<del></del>	<del> </del>
<ul> <li>b If "Yes," did the foundation receive any proceeds or have any net income attributed.</li> <li>Part VIII Information About Officers, Directors, Truste</li> </ul>		History		7b	<del></del>
Paid Employees, and Contractors	ees, roundation Mar	nagers, <del>n</del> ignly			
List all officers, directors, trustees, foundation managers and their	Compensation				
List an officers, un ectors, a disters, roundation managers and then	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Eva	
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deterred	(e) Exp account	, other
TAKER B. ANDERGON	to position	enter -0-)	compensation	allowa	nces
JAMES R. ANDERSON	PRES/TREAS		1		
9893 ENCLAVE DRIVE	- 00				•
MINNETONKA, MN 55305	5.00	0.	0.		0.
KAREN S. ANDERSON	VP/ SECRETARY	1	1 1		
9893 ENCLAVE DRIVE	F 00				_
MINNETONKA, MN 55305	5.00	0.	0.		0.
RACHEL R. ANDERSON	BOARD MEMBER				
11405 FETTERLY ROAD WEST					
MINNETONKA, MN 55305	1.00	0.	0.		0.
SARAH E. ANDERSON	BOARD MEMBER				
3890 SUNSET DRIVE			1 1		
SPRING PARK, MN 55384	1.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	7.7.7		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account, allowar	ense other
(a) Harris and address of sacrificity so para interest and recognition	devoted to position	(C) Compensation	and deterred compensation	allowar	nces
NONE					
Total number of other employees paid over \$50,000	· · · · · · · · · · · · · · · · · · ·	<del></del>	<u> </u>		0
	<del></del>		Form !	990-PF	
			1 01111	• •	(=0.10)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	-269150	04 Page 7
Paid Employees, and Contractors (continued)  3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
<del>na kaominina na makambana na kaominina na kaominina na kaominina na kaominina na kaominina na makambana na kaominina na ka</del>	<del></del>	
(a) Name and address of each person paid more than \$50,000 (b) Type of service		c) Compensation
NONE		
		<del></del>
Total number of others receiving over \$50,000 for professional services	•	0
RartiXA Summary of Direct Charitable Activities	<del></del>	<u>-</u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Ex	xpenses
1 N/A		
	}	
2	1	
	-	
3	<u> </u>	
	-	
4		
	}	
Part IX-B Summary of Program-Related Investments	<del></del>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  1 N/A	Ar	mount
2		
All other program-related investments, See instructions.	<del> </del>	
3		
	1	
Total. Add lines 1 through 3		0.
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Part X Minimum Investment Return (All domestic foundations must co	mplete this part Foreign foundations, see	instructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	ourposes:	
Average monthly fair market value of securities	1a	0.
b Average of monthly cash balances	16	0. 82,718.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	82,718.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	82,718.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see ins	tructions) 4	1,241.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V.	line 4 5	81,477.
6 Minimum investment return. Enter 5% of line 5	6	4,074.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) foreign organizations check here and do not complete this part.)	private operating foundations and certain	
1 Minimum investment return from Part X, line 6	1	4,074.
2a 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	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	4,074.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	4,074.
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	4,074.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	-	66 524
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26 b Program-related investments - total from Part IX-B	110	66,524.
<ul> <li>Program-related investments - total from Part IX-B</li> <li>Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,</li> </ul>	purposes 2	<u></u>
3 Amounts set aside for specific charitable projects that satisfy the:	purposes	
	1 1	
	3a	
<ul> <li>b Cash distribution test (attach the required schedule)</li> <li>4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part )</li> </ul>	(III, line 4 4	66,524.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	(ii), iii ii	00,524.
income. Enter 1% of Part I, line 27b	5	n
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	66,524.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calc	<u> </u>	
4940(e) reduction of tax in those years.		3000011

Part XIII Undistributed Income (see instructions)

			<del>~</del>	
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2015	2015	2016
1 Distributable amount for 2016 from Part XI,				4,074.
line 7  2 Undistributed income, if any, as of the end of 2016	<del></del>			4,074.
a Enter amount for 2015 only			0.	
b Total for prior years:			<del></del>	
b form for prior yours.		0.		
3 Excess distributions carryover, if any, to 2016:			<del></del>	
a From 2011 3,244.				
b From 2012 65,170.				
c From 2013 33,980.				
d From 2014 185, 453.				
e From 2015 18,005.				
f Total of lines 3a through e	305,852.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$ 66,524.				
a Applied to 2015, but not more than line 2a		<del></del>	0.	
<b>b</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			·	4,074.
e Remaining amount distributed out of corpus	62,450.			
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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	368,302.	ľ		
b Prior years' undistributed income. Subtract	300,3021			
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				<del></del>
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	2 244			
not applied on line 5 or line 7	3,244.			
9 Excess distributions carryover to 2017.	265 050	}		
Subtract lines 7 and 8 from line 6a	365,058.		<del></del>	
10 Analysis of line 9:		}		
a Excess from 2012 65,170. b Excess from 2013 33,980.	}			
		,		
c Excess from 2014 185, 453. d Excess from 2015 18,005.				
e Excess from 2016 62, 450.	}	ļ		
6 FYF233 HOLLI 50 10   02 1 ± 30 •		<del></del>		T 000 DE (2010)

orm 990-PF (2016)  ANDERSON CHRISTIAN FOUNDATION  Part XIV. Private Operating Foundations (see instructions and Part VII-A, question 9)				26-2691504 Page 1			
Part XIV Private Operating F	A, question 9)	N/A					
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	or 2016, enter the date of t	he ruling	▶				
b Check box to indicate whether the found	dation is a private operatin	ig foundation described in	section	4942(j)(3) or 49	942(1)(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) 2013	(e) Total		
investment return from Part X for							
each year listed				<u> </u>			
<b>b</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				<u> </u>			
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		<del></del>					
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)			 		<del></del>		
(2) Support from general public							
and 5 or more exempt organizations as provided in				1			
section 4942(j)(3)(B)(iii)							
(3) Largest amount of support from							
an exempt organization							
(4) Gross investment income		a Abia a a bair	16 - 6 d-1	h = -1 CC 000	<del></del>		
Part XV Supplementary Info	rmation (Comple) he vear-see instri	ie this part only if ictions )	the foundation	nad \$5,000 or mor	e in assets		
<del></del>							
1 Information Regarding Foundation a List any managers of the foundation when the second seco	-	han 20% of the total centre	hutians received by the	foundation before the close	of nov toy		
year (but only if they have contributed i			bullons received by the	touridation before the close	UI any lax		
NONE		<del> </del>					
b List any managers of the foundation who other entity) of which the foundation has			or an equally large portion	on of the ownership of a pai	tnership or		
NONE							
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., Pro	grams:				
Check here ► X if the foundation the foundation makes gifts, grants, etc.							
a The name, address, and telephone num	<del></del>			<del></del>	<del></del>		
, , , , , , , , , , , , , , , , , , , ,							
<b>b</b> The form in which applications should	be submitted and informat	on and materials they sh	ould include;	<del></del>			
c Any submission deadlines;				<del></del>	<del></del>		
d Any restrictions or limitations on award	s. such as by gengraphica	areas, charitable fields	ands of institutions or	other factors			
e raily restrictions of miniations of aware	e, saon as sy geographica	i arous, enuritable helds, f	ands of montunous, of t	oner lactors.			
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3 Grants and Contributions Paid During the		Payment	<del></del>	<del></del>
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
<del></del>	or substantial contributor	recipient	<del></del>	·
Paid during the year			1	
CREATION MOMENTS, INC.	NONE	501(C)(3)	TO SUPPORT CHRISTIAN	
BOX 839	l l		MINISTRY OF PRESENTING	
FOLEY, MN 56329			BIBLICAL CREATION	
			ACCOUNT OF ORIGINS ON	
		<del> </del>	RADIO AND THROUGH	1,000
CIDEONE	NONE	501(C)(3)	GIFT TO PURCHASE AND	
GIDEONS PO BOX 140800	NONE	501(0)(3)	DISTRIBUTE BIBLES	
NASHVILLE, TN 37214		İ		600
GOOD NEWS FOR ISRAEL	NONE	501(C)(3)	GIFT TO SUPPORT	
6408 MINNETONKA BLVD			CHRISTIAN EDUCATION	
ST. LOUIS PARK, MN 55426		<del> </del>		500
GRACE CHURCH	NONE	501(C)(3)	GIFTS TO SUPPORT	
9301 EDEN PRARIE ROAD		}	CHRISTIAN MINISTRY AND	
EDEN PRARIE, MN 55347			PROCLAMATION OF THE GOSPEL OF THE BIBLE	56 610
		<del> </del>	GOSPEL OF THE BIBLE	56,610
HOUSE OF HOPE	none	501(C)(3)	GIFT TO SUPPORT	
PO BOX 26			CHRISTIAN MINISTRY OF	
MARSHALL, MN 56258		1	CARE FOR TROUBLED	
<del></del>		1	GIRLS.	2,500
	ONTINUATION SHEE	T(S)	<u> </u>	66,524
b Approved for future payment				
NONE				
NONE				
		<del> </del>	+	
7-11		<u> </u>	1	
Total	<del></del>		<b>▶</b> 3b	000 DE

\*\* SEE PURPOSE OF GRANT CONTINUATIONS 623611 11-23-16

Form 990-PF (2016)

Form 990-PF (2016) ANDERSON CHRIS	<u>26-</u>	2691504 Page 12			
Part XVI-A Analysis of Income-Produ	cing Activitie	s			
Enter gross amounts unless otherwise indicated.	Unrelated business income (a) (b)			ded by section 512 513, or 514 (d)	(e) Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
<u>a</u>	.				
b	· <del>    -</del>	<del></del>	-		
d			-		
e	l i				
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments	<del></del>				
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:	<b> </b>	<del></del> .			
a Debt-financed property	<del> </del>		-		
<ul> <li>b Not debt-financed property</li> <li>6 Net rental income or (loss) from personal</li> </ul>					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory				<u> </u>	
9 Net income or (loss) from special events	<u> </u>				
10 Gross profit or (loss) from sales of inventory			-		
11 Other revenue: a SALE OF CHRISTIAN BOOKS	451211	300.	01		
b	-3				
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		300.		0.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	300.
(See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities 1	to the Accom	plishment of Exe	empt	Purposes	
Line No. Explain below how each activity for which inci		<u> </u>			nlishment of
▼ the foundation's exempt purposes (other than					
	<del></del>	<del></del>			
		<del></del>		<del>_</del>	
		<del></del>			
		<del></del>			
		<del></del>			
					<del></del>

Form **990-PF** (2016)

623621 11-23-16

t XVII	Information Regarding	Transfers To and Transactions and	Relationships With Noncharitable
	<b>Exempt Organizations</b>		

1 Did the or	ganization directly or indir	ectly engage in any of the fo	ollowing with any other organization	on described in secti	on 501(c) of		res	NO
the Code	(other than section 501(c)	(3) organizations) or in sect	ion 527, relating to political organi	ızatıons?				
a Transfers	from the reporting founda	ation to a noncharitable exem	npt organization of:			i		~
(1) Cash	l					1a(1)		X
(2) Other	r assets					1a(2)		X
<b>b</b> Other tran	nsactions:							
(1) Sales	s of assets to a noncharitat	ble exempt organization				1b(1)		X
(2) Purci	hases of assets from a non	ncharitable exempt organizat	tion			1b(2)		Х
(3) Renta	al of facilities, equipment, o	or other assets				1b(3)		X
• •	bursement arrangements					1b(4)		X
	s or loan guarantees					1b(5)		X
• •	=	mbership or fundraising soli	citations			1b(6)		X
` '		iling lists, other assets, or pa				1c		X
			g schedule. Column (b) should alv	wavs show the fair r	narket value of the goods, ot		ets.	
	-		received less than fair market valu	•	- ·		,	
		other assets, or services rec		,		•••		
(a) Line no	(b) Amount involved		ritable exempt organization	(d) Description	of transfers, transactions, and sha	arıng arra	ngement	 ts
<u> </u>			/A	<del>                                     </del>	<del></del>			
			<del></del>					
				<del></del>				
				<del></del>				
			·	<del></del>				
	<del></del>			<del> </del>				
		<del></del>		<del> </del>				
<del></del>	<del></del>	<del></del>		<del>                                     </del>				
<del></del>	<del></del>		<del></del>		<del></del>			
<del></del>		<del></del>		+				
				<del></del>				
<del></del>				+				
				<del></del>				
				<del></del>	<del></del>			
		<del></del>		<del></del>	<del></del>			
		<u> </u>	<del></del>	<del></del>				
	•	•	o, one or more tax-exempt organiz	zations described		7		
	* *	r than section 501(c)(3)) or i	n section 527?		<u>L</u>	Yes	X	No
b If "Yes," c	omplete the following sche			r	<del></del>			
	(a) Name of org	anization	(b) Type of organization		(c) Description of relationshi	p		
	N/A			ļ				
				<del> </del>				
		<del></del>		ļ				
		<del>}</del>						
<del></del>	//	_/_/		L	<del></del> _			
1			cluding accompanying schedules and sta er than taxpayer) is based on all informat		May t	he IRS di	scuss th	is
Sign   Here		1/1/1		7	show	with the n below (		
<b>  _</b> _			1/-23-1	PRES/T	REAS	Yes		No
Sigi	nature of officer or trustee		Datě	Title				
	Print/Type preparer's na	<b>-</b>	rer's signature	Date	Check if PTIN			
Detail 1	WILLIAM J	· <b>/</b>			self- employed			
Paid '	CPA		LIAM J TAYLOR,	<u> </u>		3213		
Preparer	Firm's name >OLI	VER, RAINEY,	& WOJTEK LLP		Firm's EIN ► 75-21	3846	54	
Use Only								
			VAY, SUITE 300					
	SA	N ANGELO, TX	76901		Phone no. 325-94			
					For	m <b>990</b>	-PF	2016)

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual,	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
MARSHALL AREA CHRISTIAN SCHOOL	NONE	501(C)(3)	GIFT TO SUPPORT	
600 E. COLLEGE DRIVE	}		CHRISTIAN EDUCATION	
MARSHALL, MN 56258				500
SEARCH MINISTRIES	NONE	501(C)(3)	GIFT TO SUPPORT	
5038 DORSEY HALL DR			PROCLAMATION OF THE	
ELLICOTT CITY, MD 21042		1	GOSPEL OF THE BIBLE	
		1	THROUGH GROUP MEETINGS	2,400
		<del> </del>	Total or Allen	
VARIOUS CHRISTIAN ORGANIZATIONS	NONE	501(C)(3)	SUPPORT OF LOCAL	
VARIOUS CHRISTIAN ORGANIZATIONS		[31(3)(3)	CHRISTIAN	
SIOUX FALLS, SD 57110	1		ORGANIZATIONS	2,414
				<del></del>
		<del> </del>		
		1	<del>                                     </del>	
			-	
		<del> </del>	<del> </del>	
		}		
		}		
		ļ		
	+	<del> </del>	+	<del></del>
Total from continuation sheets	<del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·	5,314

ANDERSON CHRISTIAN FOUNDATION	26-2691504
Part,XV Supplementary Information	
38 Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF RECIPIENT - CREATION MOMENTS, INC.	
TO SUPPORT CHRISTIAN MINISTRY OF PRESENTING BIBLICAL CRE	ATION ACCOUNT
OF ORIGINS ON RADIO AND THROUGH MEDIA PRINT	
	·····

## 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 irs.gov/form990.

OMB No 1545-0047

2016

Name of the organization

Employer identification number

A	NDERSON CHRISTIAN FOUNDATION	26-2691504		
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 private foundation			
	527 political organization			
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation			
	is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	See instructions.		
General Rule				
	in filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling to one contributor. Complete Parts I and II. See instructions for determining a contributor's	•		
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% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, o or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount I, line 1. Complete Parts I and II.	r 16b, and that received from		
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 certify that it doesn't meet	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For i Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its For the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	m 990-PF, Part I, line 2, to		
LHA For Paperwork Red	uction 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

AMDERSON	CHOTCHTAN	FOUNDATION
TINDDITOOIL	CIMTOTIM	LOCKIDATION

ANDER	SON CHRISTIAN FOUNDATION		16-2691504
Part I	Contributors (See instructions) Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES R. ANDERSON  2801 SOUTH RIDGEVIEW WAY  SIOUX FALLAS, SD 57105	\$\$	Person X 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 Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
23452 10-18	-16	Schedule B (Forn	1 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

## ANDERSON CHRISTIAN FOUNDATION

26-2691504

MIDDIN	ON CHRIDITAN I COMPATION		2071304
Part II	Noncash Property (See instructions). Use duplicate copies of Pari	t 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
		s	
(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
		   \$	
523453 10-18-	16	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2016)

Name of orga	inization	<del></del>		Employer identification number	
	ON CHRISTIAN FOUNDATION		<del>-,,-</del>	26-2691504	
Part III	Exclusively religious, charitable, etc., contributers from any one contributor. Complete completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	olumns (a) through (e) and the for charitable, etc., contributions of \$1,000	llowina line	n 501(c)(7), (8), or (10) that total more than \$1,000 for entry. For organizations eyear (Enterthis info once) \$	
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
Part I	(b) r dipose or gill	(4, 000 0, giit		(a) Description of Hot girls held	
-		(e) Transfer of	gift		
	Transferee's name, address, and ZIP + 4		R	Relationship of transferor to transferee	
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
-		(e) Transfer of	aift		
}-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
		(e) Transfer of	gift		
-	Transferee's name, address, and ZIP + 4		R	elationship 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, address, an	(e) Transfer of		elationship of transferor to transferee	
-					

FORM 990-PF	OTHER	INCOME		STATEMENT 1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
SALE OF CHRISTIAN BOOKS		300.	0.	0.
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	300.	0.	0.
FORM 990-PF	ACCOUNT	ING FEES	\$	STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREPARATION	775	. 0	. 0.	. 0.
TO FORM 990-PF, PG 1, LN 16B	775	. 0	0.	0.
FORM 990-PF	OTHER I	EXPENSES	<u> </u>	STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	NET INVEST-		(D) CHARITABLE PURPOSES
POSTAGE	3,514	. 0	. 0.	0.
TO FORM 990-PF, PG 1, LN 23	3,514	. 0	. 0.	0.
		- <del> </del>	= =====================================	