

EXTENSION GRANTED TO 11/15/17  
Return of Private Foundation

Form **990-PF**

Department of the Treasury  
Internal Revenue Service

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.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

**2016**

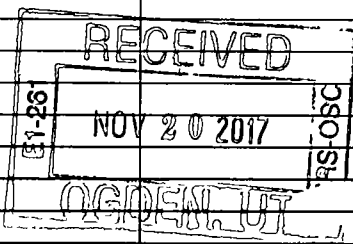
Open to Public Inspection

For calendar year 2016 or tax year beginning

, and ending

Name of foundation <b>GLOBAL CHRISTIAN INTERACTION, INC.</b>		A Employer identification number <b>39-1695712</b>
Number and street (or P O box number if mail is not delivered to street address) <b>9667 SOUTH 20TH STREET</b>	Room/suite	B Telephone number <b>(414) 281-1100</b>
City or town, state or province, country, and ZIP or foreign postal code <b>OAK CREEK, WI 53154-4931</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ <b>6,349,088.</b> (Part I, column (d) must be on cash basis)	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	484,500.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	27.	27.	27.	STATEMENT 1
	4 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				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain			0.	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total Add lines 1 through 11		484,527.	27.	27.	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees				
	c Other professional fees				
	17 Interest				
	18 Taxes				
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses <b>STMT 2</b>	145,880.	0.	0.	145,560.
	24 Total operating and administrative expenses. Add lines 13 through 23	145,880.	0.	0.	145,560.
	25 Contributions, gifts, grants paid	322,000.			322,000.
26 Total expenses and disbursements. Add lines 24 and 25	467,880.	0.	0.	467,560.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	16,647.				
b Net investment income (if negative, enter -0-)		27.			
c Adjusted net income (if negative, enter -0-)			27.		



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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	15,182.	12,633.	12,633.
	2 Savings and temporary cash investments	2,874.	3,880.	3,880.
	3 Accounts receivable ▶ 29,387.			
	Less: allowance for doubtful accounts ▶	29,387.	29,387.	29,387.
	4 Pledges receivable ▶			
	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 ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment basis ▶			
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other	STMT 3	343,980.	343,980.	287,963.
14 Land, buildings, and equipment: basis ▶	179,200.			
Less: accumulated depreciation	STMT 4 ▶	179,200.		
15 Other assets (describe ▶ STATEMENT 5)		6,000,000.	6,015,225.	6,015,225.
16 Total assets (to be completed by all filers - see the instructions. Also, see page-1, item-I)		6,391,423.	6,405,105.	6,349,088.
Liabilities	17 Accounts payable and accrued expenses	77.	77.	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ STATEMENT 6)	9,781.	6,816.	
	23 Total liabilities (add lines 17 through 22)	9,858.	6,893.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ▶ <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 ▶ <input checked="" type="checkbox"/>			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	6,381,565.	6,398,212.	
30 Total net assets or fund balances	6,381,565.	6,398,212.		
31 Total liabilities and net assets/fund balances	6,391,423.	6,405,105.		

Part III Analysis of Changes in Net Assets or Fund Balances		
1 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	6,381,565.
2 Enter amount from Part I, line 27a	2	16,647.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	6,398,212.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	6,398,212.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
b	NONE			
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(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		
a				
b				
c				
d				
e				
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2015	263,473.	16,037.	16.429070
2014	325,532.	27,192.	11.971609
2013	407,695.	47,125.	8.651353
2012	313,473.	139,437.	2.248134
2011	462,526.	419,686.	1.102076
2	Total of line 1, column (d)	2	40.402242
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	8.080448
4	Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	14,726.
5	Multiply line 4 by line 3	5	118,993.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	0.
7	Add lines 5 and 6	7	118,993.
8	Enter qualifying distributions from Part XII, line 4	8	467,560.

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. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

Table with 11 rows for excise tax calculations. Includes sub-rows 6a-6d for credits and payments. Total amount owed is 0.

Part VII-A Statements Regarding Activities

Table with 10 rows of activity questions. Includes Yes/No columns. Questions cover political campaigns, unrelated business income, and state registration. Most 'No' boxes are checked.

**Part 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)		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)		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	X	
14 The books are in care of ► <u>KAREN HOFFMAN</u> Telephone no. ► <u>414-281-1100</u> Located at ► <u>9667 S. 20TH STREET, OAK CREEK, WI</u> ZIP+4 ► <u>53154</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► <u>15</u> N/A		
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b 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)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>	1b	X
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► _____ b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► _____	2b	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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, Form 4720, to determine if the foundation had excess business holdings in 2016.) N/A	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4a	X
	4b	X

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here  **5b**

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? **SEE STATEMENT 8**  Yes  No  
If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No **6b**

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? **N/A** **7b**

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

**1** List all officers, directors, trustees, foundation managers and their compensation.

(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) Expense account, other allowances
<b>SEE STATEMENT 7</b>		0.	0.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1). 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) Expense account, other allowances
<b>NONE</b>				

Total number of other employees paid over \$50,000 **0**

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶ 0

**Part IX-A** Summary of Direct Charitable Activities

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.	Expenses
1 MTC OUTREACH LLC	145,560.
2	
3	
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 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
<b>Total.</b> Add lines 1 through 3 <span style="float: right;">▶</span>	0.

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, 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	14,950.
c	Fair market value of all other assets	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	14,950.
e	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	14,950.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	224.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,726.
6	<b>Minimum investment return.</b> Enter 5% of line 5	6	736.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2016 from Part VI, line 5	2a	
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	

**Part 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	467,560.
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	
b	Cash distribution test (attach the required schedule)	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	467,560.
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	0.
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6	467,560.

**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)

N/A

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

**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 ▶ 08/05/92

b Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	27.	0.	0.	0.	27.
b 85% of line 2a	23.	0.	0.	0.	23.
c Qualifying distributions from Part XII, line 4 for each year listed	467,560.	263,473.	325,532.	407,695.	1,464,260.
d Amounts included in line 2c not used directly for active conduct of exempt activities	322,000.	150,000.	200,000.	202,700.	874,700.
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	145,560.	113,473.	125,532.	204,995.	589,560.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					0.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	491.	535.	907.	1,571.	3,504.
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)					0.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from an exempt organization					0.
(4) Gross investment income					0.

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 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 before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

**MICHAEL H. POLASKI**

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 ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**MICHAEL H. POLASKI**

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**Part XV** Supplementary Information (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future 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 recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
BULGARIA FOR JESUS 69 VESLETZ ST. SOFIA, BULGARIA, BULGARIA	N/A	FOREIGN ORGANIZATION	TO PROVIDE BASIC NEEDS FOR SYRIAN REFUGEES AND TO SUPPORT FOREIGN MISSION WORK	63,000.
RIPPLES INTERNATIONAL P.O. BOX 1236 MERU, KENYA, KENYA	N/A	FOREIGN ORGANIZATION	TO SUPPORT THE NEW START CENTRE IN MERU, KENYA	259,000.
<b>Total</b> <span style="float: right;">▶ 3a</span>				
<b>b Approved for future payment</b>				
NONE				
<b>Total</b> <span style="float: right;">▶ 3b</span>				





**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](http://www.irs.gov/form990).

OMB No 1545-0047

**2016**

Name of the organization

Employer identification number

**GLOBAL CHRISTIAN INTERACTION, INC.**

**39-1695712**

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

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private 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) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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. ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA 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

**GLOBAL CHRISTIAN INTERACTION, INC.**

**39-1695712**

**Part I Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MICHAEL H. POLASKI 321 EAST OAKWOOD OAK CREEK, WI 53154	\$ 475,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	RONALD GLODOSKI 8215 MALLARD DR. RACINE, WI 53402	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	DAVID GLODOSKI 10470 SO. WEST 165TH ST. MIAMI, FL 33157-3057	\$ 3,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>GLOBAL CHRISTIAN INTERACTION, INC.</b>	Employer identification number <b>39-1695712</b>
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**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
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization

Employer identification number

**GLOBAL CHRISTIAN INTERACTION, INC.**

**39-1695712**

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed

(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		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
J.P. MORGAN MONEY MARKET ACCOUNT	27.	27.	27.
TOTAL TO PART I, LINE 3	27.	27.	27.

FORM 990-PF OTHER EXPENSES STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSE - MISCELLANEOUS	320.	0.	0.	0.
DIRECT ACTIVITES (MTC OUTREACH)	145,560.	0.	0.	145,560.
TO FORM 990-PF, PG 1, LN 23	145,880.	0.	0.	145,560.

FORM 990-PF OTHER INVESTMENTS STATEMENT 3

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
GOLD	COST	343,980.	287,963.
TOTAL TO FORM 990-PF, PART II, LINE 13		343,980.	287,963.

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 4

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER	5,023.	5,023.	0.
CAMCORDER	4,068.	4,068.	0.
COMPUTER	1,681.	1,681.	0.
BEDS	1,033.	1,033.	0.
VIDEO	3,251.	3,251.	0.

SONY TRIAX STUDIO SYSTEM	28,963.	28,963.	0.
SONY TRIAX STUDIO SYSTEM	28,963.	28,963.	0.
SONY RACK MOUNT KIT	166.	166.	0.
FUJINON 2/3 IN. IF	2,739.	2,739.	0.
FUJINON 2/3 IN. IF	2,739.	2,739.	0.
FUJINON SEMI SERVO KIT	1,512.	1,512.	0.
FUJINON SEMI SERVO KIT	1,512.	1,512.	0.
VINTEN 11 SYSTEM	4,582.	4,582.	0.
VINTEN 11 SYSTEM	4,582.	4,582.	0.
VINTEN PAN BAR CLAMP	286.	286.	0.
VINTEN PAN BAR CLAMP	286.	286.	0.
ROSCOR 100 METER TRIAX CABLE	535.	535.	0.
ROSCOR 100 METER TRIAX CABLE	535.	535.	0.
CANON XL H1 HD CAMCORDER	8,712.	8,712.	0.
CANON TRIPOD ADAPTER TA-100	132.	132.	0.
VINTEN 8 HEAD GRAY	2,497.	2,497.	0.
SONY ANYCAST STATION LIVE CONTENT PRODUCER	16,732.	16,732.	0.
SONY HDV VIDEOTAPE RECORDER	3,366.	3,366.	0.
DESKTOP COMPUTER	9,339.	9,339.	0.
LAPTOP COMPUTER	2,279.	2,279.	0.
SOFTWARE	1,599.	1,599.	0.
MONITOR	920.	920.	0.
CABLE/AUDIO EQUIPMENT	3,480.	3,480.	0.
SDI CARD	2,138.	2,138.	0.
VIDEO MONITORS	3,600.	3,600.	0.
SCANNER	250.	250.	0.
STADICAM	4,000.	4,000.	0.
MICROPHONES	1,200.	1,200.	0.
CAMBO V-40 250 CRANE CAMERA	12,500.	12,500.	0.
HEADPHONES	400.	400.	0.
COMPUTER TABLES	400.	400.	0.
OFFICE CHAIRS	600.	600.	0.
COMPUTERS	3,600.	3,600.	0.
DSR 45AP DIGITAL VIDEOCASSETTE RECORDER	9,000.	9,000.	0.
<b>TOTAL TO FM 990-PF, PART II, LN 14</b>	<b>179,200.</b>	<b>179,200.</b>	<b>0.</b>

FORM 990-PF	OTHER ASSETS		STATEMENT 5
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
ZAO PARUS TV BROADCASTING RIGHTS	4,500,000.	4,500,000.	4,500,000.
ZAO TVZ BROADCASTING RIGHTS	1,500,000.	1,500,000.	1,500,000.
MTC OUTREACH OPERATING ACCOUNT	0.	15,225.	15,225.
<b>TO FORM 990-PF, PART II, LINE 15</b>	<b>6,000,000.</b>	<b>6,015,225.</b>	<b>6,015,225.</b>

FORM 990-PF	OTHER LIABILITIES	STATEMENT	6
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
SURG CARES FOUNDATION		6,816.	6,816.
REIMBURSEMENTS PAYABLE		2,965.	0.
TOTAL TO FORM 990-PF, PART II, LINE 22		9,781.	6,816.

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 7

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN CONTRIBUTION	PLAN EXPENSE ACCOUNT
MICHAEL H. POLASKI 321 EAST OAKWOOD ROAD OAK CREEK, WI 53154	PRES/TREAS/DIR 3.00	0.	0.	0.
MICHAEL J. POLASKI <del>224 EAST OAKWOOD ROAD</del> OAK CREEK, WI 53154	SEC/DIRECTOR 3.00	0.	0.	0.
CATHERINE J. POLASKI 5329 HIGHWAY 38 FRANKSVILLE, WI 53126	DIRECTOR 3.00	0.	0.	0.
MARY B. DONOHUE 9667 SOUTH 20TH STREET OAK CREEK, WI 53154	ASST SEC 3.00	0.	0.	0.
GERALD C. MCLEAN 9667 SOUTH 20TH STREET OAK CREEK, WI 53154	MANAGER 3.00	0.	0.	0.
DARLA J MCLEAN 9667 SOUTH 20TH STREET OAK CREEK, WI 53154	MANAGER 3.00	0.	0.	0.
ANDREW S. MCLEAN 9667 SOUTH 20TH STREET OAK CREEK, WI 53154	MANAGER 3.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT  
PART VII-B, LINE 5C

STATEMENT 8

GRANTEE'S NAME

RIPPLES INTERNATIONAL

GRANTEE'S ADDRESS

P.O. BOX 1236  
MERU, KENYA, KENYA

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
50,000.	01/06/16	

PURPOSE OF GRANT

TO SUPPORT THE NEW START CENTRE IN MERU, KENYA

DATES OF REPORTS BY GRANTEE

12/31/2016

GRANTEE'S NAME

RIPPLES INTERNATIONAL

GRANTEE'S ADDRESS

P.O. BOX 1236  
MERU, KENYA, KENYA

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
50,000.	05/05/16	

PURPOSE OF GRANT

TO SUPPORT THE NEW START CENTRE IN MERU, KENYA

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DATES OF REPORTS BY GRANTEE

12/31/2016



GRANTEE'S NAME

RIPPLES INTERNATIONAL

GRANTEE'S ADDRESS

P.O. BOX 1236  
MERU, KENYA, KENYA

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
59,000.	09/08/16	

PURPOSE OF GRANT

TO SUPPORT THE NEW START CENTRE IN MERU, KENYA

DATES OF REPORTS BY GRANTEE

12/31/16

GRANTEE'S NAME

RIPPLES INTERNATIONAL

GRANTEE'S ADDRESS

P.O. BOX 1236  
MERU, KENYA, KENYA

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
50,000.	11/15/16	

PURPOSE OF GRANT

TO SUPPORT THE NEW START CENTRE IN MERU, KENYA

DATES OF REPORTS BY GRANTEE

12/31/16

GRANTEE'S NAME

BULGARIA FOR JESUS

GRANTEE'S ADDRESS

69 VESLETZ ST.  
SOFIA, BULGARIA, BULGARIA

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
15,750.	06/27/16	

PURPOSE OF GRANT

TO PROVIDE BASIC NEEDS FOR SYRIAN REFUGEES AND TO SUPPORT FOREIGN MISSION WORK

DATES OF REPORTS BY GRANTEE

12/31/16

GRANTEE'S NAME

BULGARIA FOR JESUS

GRANTEE'S ADDRESS

69 VESLETZ ST.  
SOFIA, BULGARIA, BULGARIA

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
15,750.	07/20/16	

PURPOSE OF GRANT

TO PROVIDE BASIC NEEDS FOR SYRIAN REFUGEES AND TO SUPPORT FOREIGN MISSION WORK

DATES OF REPORTS BY GRANTEE

12/31/16

GRANTEE'S NAME

BULGARIA FOR JESUS

GRANTEE'S ADDRESS

69 VESLETZ ST.  
SOFIA, BULGARIA, BULGARIA

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
15,750.	09/08/16	

PURPOSE OF GRANT

TO PROVIDE BASIC NEEDS FOR SYRIAN REFUGEES AND TO SUPPORT FOREIGN MISSION WORK

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DATES OF REPORTS BY GRANTEE

12/31/16

GRANTEE'S NAME

BULGARIA FOR JESUS

GRANTEE'S ADDRESS

69 VESLETZ ST.  
SOFIA, BULGARIA, BULGARIA

<u>GRANT AMOUNT</u>	<u>DATE OF GRANT</u>	<u>AMOUNT EXPENDED</u>
15,750.	11/15/16	

PURPOSE OF GRANT

TO PROVIDE BASIC NEEDS FOR SYRIAN REFUGEES AND TO SUPPORT FOREIGN MISSION WORK

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DATES OF REPORTS BY GRANTEE

12/31/16

2016 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	C o n v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	COMPUTER	04/24/91	SL	7.00		16	5,023.				5,023.	5,023.		0.	5,023.
2	CAMCORDER	05/08/91	SL	7.00		16	4,068.				4,068.	4,068.		0.	4,068.
3	COMPUTER	07/31/92	SL	7.00		16	1,681.				1,681.	1,681.		0.	1,681.
4	BEDS	09/18/92	SL	7.00		16	1,033.				1,033.	1,033.		0.	1,033.
5	VIDEO	11/03/92	SL	7.00		16	3,251.				3,251.	3,251.		0.	3,251.
6	SONY TRIAX STUDIO SYSTEM	12/29/06	200DB	7.00		MC17	28,963.				28,963.	28,963.		0.	28,963.
7	SONY TRIAX STUDIO SYSTEM	12/29/06	200DB	7.00		MC17	28,963.				28,963.	28,963.		0.	28,963.
8	SONY RACK MOUNT KIT	12/29/06	200DB	7.00		MC17	166.				166.	166.		0.	166.
9	FUJINON 2/3 IN. IF	12/29/06	200DB	7.00		MC17	2,739.				2,739.	2,739.		0.	2,739.
10	FUJINON 2/3 IN. IF	12/29/06	200DB	7.00		MC17	2,739.				2,739.	2,739.		0.	2,739.
11	FUJINON SEMI SERVO KIT	12/29/06	200DB	7.00		MC17	1,512.				1,512.	1,512.		0.	1,512.
12	FUJINON SEMI SERVO KIT	12/29/06	200DB	7.00		MC17	1,512.				1,512.	1,512.		0.	1,512.
13	VINTEN 11 SYSTEM	12/29/06	200DB	7.00		MC17	4,582.				4,582.	4,582.		0.	4,582.
14	VINTEN 11 SYSTEM	12/29/06	200DB	7.00		MC17	4,582.				4,582.	4,582.		0.	4,582.
15	VINTEN PAN BAR CLAMP	12/29/06	200DB	7.00		MC17	286.				286.	286.		0.	286.
16	VINTEN PAN BAR CLAMP	12/29/06	200DB	7.00		MC17	286.				286.	286.		0.	286.
17	ROSCOR 100 METER TRIAX CABLE	12/29/06	200DB	7.00		MC17	535.				535.	535.		0.	535.
18	ROSCOR 100 METER TRIAX CABLE	12/29/06	200DB	7.00		MC17	535.				535.	535.		0.	535.

628111 04-01-16

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2016 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	Conv No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction in Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
19	CANON XL H1 HD CAMCORDER	12/29/06	200DB	7.00	MC17	8,712.				8,712.	8,712.		0.	8,712.
20	CANON TRIPOD ADAPTER TA-100	12/29/06	200DB	7.00	MC17	132.				132.	132.		0.	132.
21	VINTEN 8 HEAD GRAY	12/29/06	200DB	7.00	HY17	2,497.				2,497.	2,497.		0.	2,497.
22	SONY ANYCAST STATION LIVE CONTENT PRODUCER	12/29/06	200DB	7.00	HY17	16,732.				16,732.	16,732.		0.	16,732.
23	SONY HDV VIDEOTAPE RECORDER	12/29/06	200DB	7.00	HY17	3,366.				3,366.	3,366.		0.	3,366.
24	DESKTOP COMPUTER	05/31/07	200DB	7.00	MC17	9,339.				9,339.	9,339.		0.	9,339.
25	LAPTOP COMPUTER	05/31/07	200DB	7.00	MC17	2,279.				2,279.	2,279.		0.	2,279.
26	SOFTWARE	05/31/07	200DB	3.00	HY17	1,599.				1,599.	1,599.		0.	1,599.
27	MONITOR	05/31/07	200DB	7.00	HY17	920.				920.	920.		0.	920.
28	CABLE/AUDIO EQUIPMENT	05/31/07	200DB	7.00	HY17	3,480.				3,480.	3,480.		0.	3,480.
29	SDI CARD	05/31/07	200DB	7.00	HY17	2,138.				2,138.	2,138.		0.	2,138.
30	VIDEO MONITORS	08/27/08	200DB	7.00	HY17	3,600.			1,800.	1,800.	1,800.		0.	1,800.
31	SCANNER	08/27/08	200DB	7.00	HY17	250.			125.	125.	125.		0.	125.
32	STADICAM	08/27/08	200DB	7.00	HY17	4,000.			2,000.	2,000.	2,000.		0.	2,000.
33	MICROPHONES	08/27/08	200DB	7.00	HY17	1,200.			600.	600.	600.		0.	600.
34	CAMBO V-40 250 CRANE CAMERA	08/27/08	200DB	7.00	HY17	12,500.			6,250.	6,250.	6,250.		0.	6,250.
35	HEADPHONES	08/27/08	200DB	7.00	HY17	400.			200.	200.	200.		0.	200.
36	COMPUTER TABLES	08/27/08	200DB	7.00	HY17	400.			200.	200.	200.		0.	200.

628111 04-01-16

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2016 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	Convention	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction in Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
37	OFFICE CHAIRS	08/27/08	200DB	7.00	HY17	HY17	600.			300.	300.	300.		0.	300.
38	COMPUTERS	08/27/08	200DB	7.00	HY17	HY17	3,600.			1,800.	1,800.	1,800.		0.	1,800.
39	DSR 45AP DIGITAL VIDEOCASSETTE RECORDER	08/27/08	200DB	7.00	HY17	HY17	9,000.			4,500.	4,500.	4,500.		0.	4,500.
	* TOTAL 990-PF PG 1 DEPR						179,200.			17,775.	161,425.	161,425.		0.	161,425.