

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490





See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see the separate instructions.

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2016 Open to Public Inspection

<u>A</u>	For th	e 2016 calendar year, or tax year beginning , and ending			
В	Check if a	applicable C Name of organization		D Employer	identification number
	Address o	change VOICE OF CALVARY MINISTRIES		1	
\equiv	Name cha	Doing business as		64-0	564343
		Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone	
	Initial retu		_ 	601-	969-3088
	Final retur terminated	ed .		l	
	Amended	JACKSON MS 39203		G Gross rece	ipts \$ 1,601,108
H		r Name and address of principal officer	H(a) is this a gro	oup return for su	bordinates? Yes X No
	Арріісацю	on pending PHIL REED			Ä. Ä.
		531 WEST CAPITOL STREET	H(b) Are all sub	-	
_		JACKSON MS 39203		" attach a list (see instructions)
	Tax-exer	mpt status X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527			
<u>J</u>	Website		H(c) Group exe		
$\overline{}$			Year of formation 1	975	M State of legal domicile MS
<u></u>	<u>art I</u>	Summary			
	1 1	Briefly describe the organization's mission or most significant activities			
93		REBUILDING COMMUNITIES THROUGH THE GOSPEL BY PROVIDING			
aŭ		BUILD STRONG INDIVIDUALS, FAMILIES, CHURCHES & COMMUNITI			
Governance	ł	FULL POTENTIAL IN CHRIST, PHYSICALLY, SPIRITUALLY, ECONO			Y.
30	2 (Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 2	5% of its net assets	3 1 1	
જ		Number of voting members of the governing body (Part VI, line 1a)		3	11
ies	4 !	Number of independent voting members of the governing body (Part VI, line 1b)		4	11
Activities &	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)		5	18
Act	6	Total number of volunteers (estimate if necessary)		6	0
	20 7a ⁻	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0
	b l	Net unrelated business taxable income from Form 990-T, line 34	DV	7b	0
1	2	O to the second accords (Deal VIII) Page 450	Prior Yes	3,338	Current Year 1,536,160
n O Revenue	8 (Contributions and grants (Part VIII, line 1h)		4,183	48,148
5	9 1	Program service revenue (Part VIII, line 2g)		6,300	1,300
<u>بۇ</u>	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0,300	13,000
Ç	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1 92	3,821	1,598,608
-00		Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0,313	576,592
6		Grants and similar amounts paid (Part IX, column (A), lines 1–3)	- 30	0,313	370,392
	14 1	Benefits paid to or for members (Part IX, column (A), line 4)	93	4,748	1,027,420
98	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<u> </u>	1,710	1,021,420
Expenses7	16a	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 37,513	7-24	W. Jest	· · · · · · · · · · · · · · · · · · ·
쏬	1 5	A Committee of the comm		8,009	521,597
_	1 "	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,070	2,125,609
	1	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		9,249	-527,001
<u></u>	19	Revenue less expenses Subtract line 18 from line 12	Beginning of Cu		End of Year
Sts	20	Total assets (Part X, line 16) 1711 RECEIVED 1711		8,477	1,841,731
Ass	21	Total liabilities (Part X, line 26)	66	0,149	380,404
Net Assets or	22	Net assets or fund balances Subtract line 21 from line 20 AUG 1 2 2017	1,98	8,328	1,461,327
	art II	· · · · · · · · · · · · · · · · · · ·			
- 1	Inder per	enalties of periury. I declare that I have examined this return, including accompanying schedules and stateme	nts, and to the best o	f my knowled	ige and belief, it is
tr	ue, corre	ect, and complete Declaration of preparer (other than officer) Les Complete Declaration of preparer h	as any knowledge		
		IN (RUL) Dead	· · · · · · · · · · · · · · · · · · ·	<u> </u>	8/08/17
Sig	gn	Signature of officer		Date	•
He		PHIL REED PRES	SIDENT/CEC)	
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	Date /	/ Check	If PTIN
Pai	id	SCOTT A. HODGES SCOTT A. HODGES	1/17	17 self-em	
Pre	ерагег	Firm's name > TANN, BROWN & RUSS CO., PLLC		ırm's EiN ▶	20-5630688
Us	e Only	1501 LAKELAND DRIVE, SUITE 300			
_		Firm's address JACKSON, MS 39216-4841		Phone no	601-354-4926
Ма	y the IR	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Form 990 (2016) VOICE OF CALV	ARY MINISTRIES	64-0564343	Page 2
•	n Service Accomplishments ontains a response or note to		
1 Briefly describe the organization's missi REBUILDING COMMUNITI BUILD STRONG INDIVID	on ES THROUGH THE GOS UALS,FAMILIES,CHUR	PEL BY PROVIDING HOLIS CHES & COMMUNITIES THA PIRITUALLY, ECONOMICALL	T REACH THEIR
Did the organization undertake any sign prior Form 990 or 990-EZ? If "Yes," describe these new services or		ar which were not listed on the	Yes X No
3 Did the organization cease conducting, services? If "Yes," describe these changes on Sol	or make significant changes in how it	conducts, any program	Yes X No
4 Describe the organization's program se	rvice accomplishments for each of its (4) organizations are required to repo	three largest program services, as measured rt the amount of grants and allocations to othe	-
COUNSELING AND ASSIST HAS ACQUIRED AND REH. FOR LOW TO MODERATE HURRICANE KATRINA EV. HUD'S NEIGHBORHOOD ST	TANCE TO VETERANS ABILITATED HUNDRED INCOME HOMEOWNERS. ACUEES. THE MINISTABILIZATION PROGRESOUSES FOR LOW TO	S PROGRAMS, THE MINIST AND OTHERS IN NEED. T S OF VACANT AND DILAPI WE HAVE ALSO BUILT N TRIES HAS RECEIVED TWO AM FUNDING TO ACQUIRE MODERATE INCOME BUYERS	RIES PROVIDES HE MINISTRIES DATED HOUSES EW HOMES FOR GRANTS FROM AND
RETURNING VOLUNTEERS ASSIST IN ITS COMMUN OPPORTUNITIES IN HOU GREEN SPACE PRESERVA ECONOMICALLY DEPRIVE WOULD NOT BE ABLE TO RACIAL RECONCILIATION	FROM ALL ACROSS TITY DEVELOPMENT PRISING REHABILITATION AND NEIGHBORH DISTRICT PROVIDING AFFORD THE SERVICEN AND BY SERVANTS	, THE MINISTRIES SOLIC HE COUNTRY TO COME TO	ITS NEW AND MISSISSIPPI AND VOLUNTEER , COMMUNITY ES IN HO OTHERWISE THE CONTEXT OF DESPAIR. WE
LOCAL YOUTH WHICH IN WHICH EMPHASIZED TUT	CLUDED A SUMMER CA ORIALS IN READING	ts of \$ (Revent E MINISTRIES ORGANIZED MP, AFTER SCHOOL MENTO AND MATH, HEALTHY LIFE T AND CHARACTER EDUCAT	ACTIVITIES FOR RSHIP PROGRAM STYLE
4d Other program services (Describe in So (Expenses \$	chedule O) including grants of \$) (Revenue \$	1
4e Total program service expenses ▶	1,937,521	7 (1.000)	
DAA	-		Form 990 (2016)

Part IV	Checklist of	Required Schedules	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_	l	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)]	1	
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	Í	ĺ	
	Part III	_5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	- 1	ł	
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	- 1	1	
	"Yes," complete Schedule D, Part I	_6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	İ	į	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	_7		_ <u>X</u> _
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	ľ	ľ	
	complete Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	ļ	ļ	
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or	i	ŀ	
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	ľ	Ì	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		1	
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		1	
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	Í	İ	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	}	l	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	Ì	1	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		}	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		- 1	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	- 1	}	
	fundraising, business, investment, and program service activities outside the United States, or aggregate		}	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	1	İ	
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>x</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		l	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		1	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	1		
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		- 1	
	If "Yes," complete Schedule G, Part III	19		<u> </u>
		Form	. 990	(2016)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		Í	
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c	1	
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	ł	1	
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or	ĺ		
	disqualified persons? If "Yes," complete Schedule L, Part II	_26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	1		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c]	\mathbf{x}
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	- }		
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	i		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	ł	1	
	or IV, and Part V, line 1	34		_ <u>X</u> _
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	- [
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	j	}	
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	İ		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	}	- 1	
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
		For	n 990	(2016)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					,	
4.	Enterthe country and an Day 2 of France 1990 Fig. 1990 Fig. 1991	ا . ا	7.0	.		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0	,		1	i im Fed
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	U		,	1.13	1.30
С	Did the organization comply with backup withholding rules for reportable payments to vendors and						
2-	reportable gaming (gambling) winnings to prize winners?				1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		7 (,			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	_18	3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1			2b	X	
n -	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a	 -	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				3b		├
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authors are strongly and the calendar year.	•				[1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	iai			. !	<u> </u>	3,
	account)?				4a	1 1 2 2 2 2	X
b	If "Yes," enter the name of the foreign country					26	聯
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial According to the control of	ounts				Sept.	
	(FBAR)					4 E	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	^			5a		X
р	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelfer transaction	17			5b		
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				٠. ا		x
L	organization solicit any contributions that were not tax deductible as charitable contributions?	or			6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions gifts were not tax deductible?	O1			6b		
7	Organizations that may receive deductible contributions under section 170(c).					1000 P	200
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	ds					
u	and services provided to the payor?	-0			7a	Lat. Minde	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was						
-	required to file Form 8282?				7¢		X
ď	If "Yes," indicate the number of Forms 8282 filed during the year	7d		,		世期	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contr	act?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form		s regi	ured?	7g		
h	if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	n file a l	Form	1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained i	by the			, 1,1 1,5 1,5 1,5 1,5 1,5 1,5 1,5 1,5 1,5		
	sponsoring organization have excess business holdings at any time during the year?				8		
9	Sponsoring organizations maintaining donor advised funds.				100	Ente	- `
а	Did the sponsoring organization make any taxable distributions under section 4966?				9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9ь		
10	Section 501(c)(7) organizations. Enter	, ,					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			1	Ap x	*
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	L	· · · ·-	steep per	· kk	
11	Section 501(c)(12) organizations. Enter				1/4**	4 ,	
а	Gross income from members or shareholders	11a	<u> </u>			٠,	l
þ	Gross income from other sources (Do not net amounts due or paid to other sources				2, 2, 4	v	1
	against amounts due or received from them)	[11b]				-	ŀ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1		l		12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	_12b	L		, *s.	•	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				12-		
а	Is the organization licensed to issue qualified health plans in more than one state?				13a		
L	Note. See the instructions for additional information the organization must report on Schedule O						
b	Enter the amount of reserves the organization is required to maintain by the states in which	13b	Ì			٠- أ	l
_	the organization is licensed to issue qualified health plans	130	<u> </u>				
C	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	130			14a		X
14a b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				14b		
	in 100, flag it med a form 720 to report these payments. If 140, provide an explanation in concease of						

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management No Yes 11 Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 11 Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 X The governing body? 8a $\overline{\mathbf{x}}$ Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a 10a Did the organization have local chapters, branches, or affiliates? If "Yes." did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a 想得 b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X 12c describe in Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure MS List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Other (explain in Schedule O) Own website Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records 20 531 WEST CAPITOL STREET PHIL REED 601-969-3088 MS 39203

JACKSON

		4 1
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and	ī
•	Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees; and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for	bo: off	x, unle	Pos check ess pe nd a d	rson ı	than or s both r/truste	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	((, 2, , , , , , , , , , , , , , , , , ,	organization and related organizations
(1) WILLIS FINLEY										
	1.00				}	} }				
CHAIRMAN	0.00	X		X				0	0	0
(2) BRETT BAXTER						[]				
	1.00			l						_
SECRETARY	0.00	X	<u> </u>	X		 		0	0	0
(3) RAMEL COTTON		['	1	-						
	1.00			ļ		1				
BOARD OF SERVANTS	0.00	X		L	<u> </u>		<u> </u>	0	0	0
(4) RONNIE CRUDUP, J		İ	ļ		İ		Ì	Ì		
	1.00					} ;		1		
BOARD OF SERVANTS	0.00	X			<u> </u>	-		0	0	0
(5) SADIE PALMER		1	Ì		{		ł	ł		
	1.00		}	}	}	}	}			
BOARD OF SERVANTS	0.00	X		-		 		0	0	0
(6) PATTY PATTERSON		ì		ł	l	{		ł		
	1.00		Į					_		
BOARD OF SERVANTS	0.00	X	<u> </u>	├ ─	├			0	0	0
(7) PAT VANDER POL	7 00		l		1	}				
	1.00		İ							
BOARD OF SERVANTS	0.00	X	-	├	-	 		0	0	0
(8) PRIMUS WHEELER	1 00	}	}	1		}	l			
	1.00	37	ł			1		O	o	o
BOARD OF SERVANTS	0.00	X	-	-	┢	┼	├	<u>_</u>	0	0
(9) LESTER WILLIAMS	1.00			}		ļ)		
	0.00	x						o	o	0
BOARD OF SERVANTS	0.00	┼≏	-	+-	+-	+-		ļ		<u> </u>
(10) PHIL REED	40.00]		1				
PRESIDENT/CEO	0.00			x		1		115,000	0	7,124
	0.00	┼	-	1	+-	+-	╁	120,000	<u> </u>	,,123
(11)	ļ	1								
							1	[

Pai	τνι	Check if Schedule C	D contains a	a response o	r note to any line i	n this Part VIII		
		Official II Confidence			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a- Total. Add lines 1a-1f	1f	334,500	1,536,160			
	!!_	Total. Add lines 1a-11		Busn Code				الدمانية بعرسميسات والدمانيومي
[등	2a	FAMILY AND YOUTH PRO	OGRAMS		47,561	47,561		
Se	b	OTHER			587	587		
Program Service Revenue	С							
Sen	d							
E	е							
ğ	f	All other program service rever	nue	L	40.140			
<u>-</u>	g	Total. Add lines 2a-2f		<u> </u>	48,148			
	3	Investment income (including of and other similar amounts) Income from investment of tax-		•	1,177			1,177
l	5	Royalties		<u> </u>			Francisco Sur a sua	The state of the s
	6a b	(i) Real Gross rents Less rental exps	,000	(II) Personal		94 Table		
	C	7 (0.116)	,,000	>	13,000			13,000
	d 7a b	Net rental income or (loss) Gross amount from sales of assets other than inventory Less cost or other	s	(II) Other 2,623				
		basis & sales exps		2,500				
	С	Gain or (loss)		123				123
	d	Net gain or (loss)			123			
Other Revenue		Gross income from fundraising ever (not including \$ of contributions reported on line 1c See Part IV, line 18				· .	The state of the s	
Ě		Less direct expenses	b[
Ü		Net income or (loss) from fund Gross income from gaming activitie See Part IV, line 19		<u> </u>				
	Ь	Less direct expenses	b					
		Net income or (loss) from gan	ning activities					<u> </u>
	10a	Gross sales of inventory, less returns and allowances						
		Less cost of goods sold	b		- ·		-	
	<u>_</u> c	Net income or (loss) from sale		Buan Cada		 		1
	<u> </u>	Miscellaneous Revenue	<u> </u>	Busn Code	4			
	11a			-	 			1
	b			 	 			
	0							
	d							
	42		nns	•	1,598,60	8 48,148	3 (14,300
	12	Total revenue. See instruction	0.10					Form 990 (2016)

Form 990 (2016)

Part IX Statement of Functional Expenses

Form 990 (2016)

DAA

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (B) (A) (C) (D) Do not include amounts reported on lines 6b, expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 179,272 179,272 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 397,320 397,320 individuals See Part IV, line 22 Y- 674 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 the fire with the me · 常体的人物生态 斯拉。今 14,000 Benefits paid to or for members Compensation of current officers, directors, 122,124 114,553 4,518 trustees, and key employees 3,053 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 729,388 684,165 26,988 18,235 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 103,478 110,318 4,082 2,758 9 Other employee benefits 65,590 61,523 2,427 1,640 10 Payroll taxes Fees for services (non-employees) Management Legal 50,557 50,557 Accounting c Lobbying with the second Professional fundraising services See Part IV, line 17 investment management fees Other (If line 11g amount exceeds 10% of line 25, column 153,379 <u>5,6</u>66 143,912 3,801 (A) amount, list line 11g expenses on Schedule O) 14,888 4,018 5,548 5,322 Advertising and promotion 12 3,038 622 553 1,863 13 Office expenses 14 Information technology Royalties 15 52,975 4,908 57,883 16 Occupancy 3,874 4,513 639 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 8,214 8,209 20 21 Payments to affiliates 15,035 32,639 17,604 22 Depreciation, depletion, and amortization 78,933 73,625 5,308 23 Insurance 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If 1. 14 line 24e amount exceeds 10% of line 25, column . 16 / . (A) amount, list line 24e expenses on Schedule O) 48,882 48,248 582 PROPERTY TAXES AND LICENS 52 26,542 29,978 3,399 37 MAINTENANCE AND REPAIR 6,333 19,072 11,987 752 SUPPLIES 3,254 17,730 14,476 TRAINING, DUES & SUBSCR. 1,891 1,891 All other expenses 2,125,609 1,937,521 150,575 37,513 25 Total functional expenses Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here following SOP 98-2 (ASC 958-720)

Form 990 (2016)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 320,678 Cash-non-interest bearing 1 86,760 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 3.000 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 31,112 Notes and loans receivable, net 7 23,603 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 2,516,443 other basis Complete Part VI of Schedule D 10a 806,074 2,278,688 10b 1,710,369 10c b Less accumulated depreciation 11 Investments—publicly traded securities 11 12 12 Investments-other securities See Part IV, line 11 Investments—program-related See Part IV, line 11 14,763 13 14,763 13 14 14 Intangible assets 3,236 3,236 Other assets See Part IV, line 11 15 2,648,477 16 1,841,731 16 Total assets. Add lines 1 through 15 (must equal line 34) 112,303 102,831 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Sec. 255 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and 15,000 10,000 22 disqualified persons Complete Part II of Schedule L 320,526 267,573 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 212,320 of Schedule D 660,149 26 Total liabilities. Add lines 17 through 25 26 X and Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 249,935 213,266 27 Unrestricted net assets 1,573,393 1,083,061 28 Temporarily restricted net assets 165,000 165,000 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 1,988,328 33 1,461,327 33 Total net assets or fund balances 1,841,731 2,648,477 34 Total liabilities and net assets/fund balances

orm	990 (2016) VOICE OF CALVARY MINISTRIES 64-056434	13		Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,5	98,	608
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,1	25,	609
3	Revenue less expenses Subtract line 2 from line 1	3		<u>27,</u>	001
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,9	88,	328
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	1,4	61,	<u> 327</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	·			
_				Yes	No_
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			· 1000000000000000000000000000000000000	513
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				143
	Schedule O		- 1 miles	3	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		```	4	ñ.,)
	reviewed on a separate basis, consolidated basis, or both		, *		
	Separate basis Consolidated basis Both consolidated and separate basis			12 30 2	·
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		1933	100	12
	separate basis, consolidated basis, or both		3.00		
	X Separate basis Consolidated basis Both consolidated and separate basis		1.44 2.586		NAME OF
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in		公务		4
	Schedule O			75.0	200
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required guide or guide, explain why in Schodule O and describe any stens taken to undergo such audits		3b	1 1	

Form **990** (2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047 **2016**

Open to Public

Internal Revenue Service

Name of the organization

VOICE OF CALVARY MINISTRIES

Employer identification number 64-0564343

_P:	irt I	Reas	on for Public Charity	Status (All organizations	must co	mplete t	his part) See instruction	S					
The	orga	nization is not a	a private foundation because	it is (For lines 1 through 12, che	eck only or	ne box)							
1		A church, cor	nvention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(<i>/</i>	A)(i).						
2		A school desc	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E (Form	990 or 990)-EZ))							
3		A hospital or	a cooperative hospital servici	e organization described in sect	ion 170(b)	(1)(A)(iii)	•						
4		A medical res	earch organization operated	in conjunction with a hospital de	scribed in	section 1	70(b)(1)(A)(iii). Enter the hospi	tal's name,					
		city, and state	•										
5		_	•	a college or university owned or	roperated	by a gove	rnmental unit described in						
		•	b)(1)(A)(iv). (Complete Part	•	-6: 4 7 0/	L. V. 4. V. 4. V							
6	V		•	vernmental unit described in sec									
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)											
8		A community	trust described in section 17	70(b)(1)(A)(vi). (Complete Part I	1)								
9		-	=	ribed in section 170(b)(1)(A)(ix									
		or university of university	or a non-land grant college of	agriculture (see instructions) E	nter the na	me, city, a	and state of the college or						
10		An organization	on that normally receives (1)	more than 33 1/3% of its suppo	rt from cor	tributions	, membership fees, and gross						
		•	•	ot functions—subject to certain e d unrelated business taxable inc	-	• •							
		acquired by the	ne organization after June 30	, 1975 See section 509(a)(2). ((Complete	Part III)							
11				xclusively to test for public safety									
12				clusively for the benefit of, to pe									
				ations described in section 509(at describes the type of supportin				3					
	а	Type I. A	supporting organization ope	rated, supervised, or controlled t	by its supp	orted orga	inization(s), typically by giving						
				er to regularly appoint or elect a implete Part IV, Sections A an		the direc	tors or trustees of the						
	b		• •	pervised or controlled in connecti		supported	d organization(s), by having						
	~			ing organization vested in the sa									
			ion(s) You must complete										
	С	Type III f	unctionally integrated. A surfed organization(s) (see insti	upporting organization operated ructions) You must complete I	in connect	ion with, a	ind functionally integrated with, D, and E.						
	d			. A supporting organization oper) 					
	_	that is not	t functionally integrated. The	organization generally must sati	sfy a distril	oution req	uirement and an attentiveness						
			•	ust complete Part IV, Section									
	е			eived a written determination from			Type I, Type II, Type III						
	f		nber of supported organization	-functionally integrated supporting	ig organiza	ition							
	g		ollowing information about the					<u> </u>					
		e of supported	(II) EIN	(iii) Type of organization	(IV) Is the o	organization	(v) Amount of monetary	(vi) Amount of					
		ganization	, ,	(described on lines 1–10	1 .	ır governing	support (see	other support (see					
				above (see instructions))		ment?	instructions)	instructions)					
					Yes	No _							
(A)													
(B)					Ì								
(C)													
(D)													
(E)													
					+	 							
Tota													
For F	aper	work Reduction	Act Notice, see the Instruction	ns for Form 990 or 990-EZ.			Schedule	A (Form 990 or 990-EZ) 2016					

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 (a) 2012 (b) 2013 (c) 2014 (d) 2015 (b) 2013 (c) 2014 (d) 2015	1,536,160	(f) Total
membership fees received (Do not include any "unusual grants") 1,142,368 1,329,313 1,886,933 1,853,338 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 1,142,368 1,329,313 1,886,933 1,853,338		7,748,112
organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 1,142,368 1,329,313 1,886,933 1,853,338	1,536,160	
furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 1,142,368 1,329,313 1,886,933 1,853,338	1,536,160	
	1,536,160	
	1,5,4	7,748,112
The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)		
6 Public support. Subtract line 5 from line 4	5 y ~ ~	7,748,112
Section B. Total Support		
Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015	(e) 2016	(f) Total
7 Amounts from line 4 1,142,368 1,329,313 1,886,933 1,853,338	1,536,160	7,748,112
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 26,618 12,430 14,915 1,300	14,177	69,440
9 Net income from unrelated business activities, whether or not the business is regularly carried on	1	
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)		
11 Total support. Add lines 7 through 10 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	经产品的基础	7,817,552
12 Gross receipts from related activities, etc. (see instructions)	12	317,058
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3))	
organization, check this box and stop here	_ 	<u></u>
Section C. Computation of Public Support Percentage		
Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	99.11%
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	97.86%
16a 33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check	this	
box and stop here. The organization qualifies as a publicly supported organization		▶ X
b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, cl	check	
this box and stop here. The organization qualifies as a publicly supported organization		▶ ∐
17a 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is	S	
10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in		
Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported	1	_
organization		▶ []
b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line	e	
15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.		
Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly		
supported organization		▶ []
Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see		. —
instructions		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	\Box	(f) Total
1	Giffs, grants, contributions, and membership fees received (Do not include any "unusual grants")						\top	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
C	Add lines 7a and 7b			The first section is			_	
8	Public support. (Subtract line 7c from line 6)			San Allenda		非特別的基	100	
Sec	tion B. Total Support	I	L		1	<u> </u>		
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	\top	(f) Total
9	Amounts from line 6						\neg	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
, b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						_	
С	Add lines 10a and 10b	 					-	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is for the	organization's first,	second, third, four	th, or fifth tax year	as a section 501(c)	(3)		
	organization, check this box and stop here	·				-,		>
Sec	tion C. Computation of Public Su							
15	Public support percentage for 2016 (line 8,			(f))		-	5	%_
16_	Public support percentage from 2015 Sche						6	%_
	tion D. Computation of Investme					1-		
17	Investment income percentage for 2016 (iii			column (f))) -	7	<u>%</u>
18	Investment income percentage from 2015			14 and line 15 is m	ore than 33 1/20/		8	<u> %_</u>
19a	33 1/3% support tests—2016. If the organization is not more than 33 1/3%, check this bo							▶ □
b	33 1/3% support tests—2015. If the organ							-
D	line 18 is not more than 33 1/3%, check this							▶ □
20	Private foundation. If the organization did							▶ ∏

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A	ΑII	Supporting	Orga	nizations
-----------	-----	------------	------	-----------

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
ļ		
1		 }
<u> </u>	 	ļ <u>-</u>
2		
		1
3a	\$ 30 c c	5 - 1
3b		
· , ,		
3c		
)
4a	. t	****
1	, ,	- 1
4b		
σiλ.	4.4	游
	30.4	研究
4c	A SURVEYORS	2493
40	क्रक्र	. v
N.		
	414	
-30	No.	
5a	300	Garage .
5b	المشششد	
5c		
	٧ . , ٧, ٥	
:	2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	السديد.	
6	, ,	
		٠, ١
7		
8		 ,
		ı
9a		
9b		
		• •
9c		
10a		
	. 1	
10b		•

activities but for the organization's involvement Parent of Supported Organizations Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

2b 3a

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizat	tions	ogc 0
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov			
instructions. All other Type III non-functionally integrated supporting organizations must			
Section A - Adjusted Net Income	•	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or		-	
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
instructions for short tax year or assets held for part of year).			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other		*1	Mill was been
factors (explain in detail in Part VI)	; · ı	And the state of	1 6 45 700 45
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4	<u> </u>	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recovenes of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
Adjusted net income for pnor year (from Section A, line 8, Column A)	1	CAT OF THE CAT	
2 Enter 85% of line 1	2	177	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	· · · · · · · · · · · · · · · · · · ·	
4 Enter greater of line 2 or line 3	4	1. 2. 2. 2. 13. 1984 A	
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		(, , , , , , , , , , , , , , , , , ,	
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally integrated Ty	pe III s	upporting organization (see	

Part	V Type III Non-Functionally Integrated 509(a)(3) Su	ipporting Organization	ons (continued)	
	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	·		
2	Amounts paid to perform activity that directly furthers exempt purposes of	supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of supported	ed organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization	n is responsive		
	(provide details in Part VI) See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	т — — Т		/!!!\
		(i)	(ii)	(iii) Distributable
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	
			Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016	*		• ~ ;
2	(reasonable cause required-explain in Part VI) See			
	instructions.	,		A
3	Excess distributions carryover, if any, to 2016			, 1
a		5 - 9 - 1		
b	,	,		
	From 2013	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ر بر بر بر مهرم کی م	
	From 2014	7 (4 4 8 1 8 1 W 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M	ないというないないのではないという。 小事	心無知為實際學以如為
	From 2015		18 Th-3 A	- Part 1984 - 1997 - 1994
	Total of lines 3a through e			6 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Applied to underdistributions of prior years	2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2	, " " " "	
<u>h</u>	Applied to 2016 distributable amount	2 2 25 15 15 15 15 15 15 15 15 15 15 15 15 15	はない 大学 (ない) はいない	***
<u>i</u> _	Carryover from 2011 not applied (see instructions)		五十年五十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二	
	Remainder Subtract lines 3g, 3h, and 3i from 3f	23 11 1	The state of the s	The same of the sa
4	Distributions for 2016 from		The state of the state of the	
	Section D, line 7			* **
	Applied to underdistributions of prior years	* *		
	Applied to 2016 distributable amount			
	Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2016, if			1
5	any Subtract lines 3g and 4a from line 2. For result	•		,
	greater than zero, explain in Part VI. See instructions			<u> </u>
	Remaining underdistributions for 2016 Subtract lines 3h			
6	and 4b from line 1 For result greater than zero, explain in		,	l Y
	Part VI See instructions			
	Excess distributions carryover to 2017. Add lines 3j			
7				· · · · · · · · · · · · · · · · · · ·
	and 4c			
8	Breakdown of line 7			ļ
a	Excess from 2013	∾ ,		
	Excess from 2014			
	Excess from 2015			ļ
	Excess from 2016			<u> L</u>
e	LACESS HOTH 2010		Schedule	e A (Form 990 or 990-EZ) 2016

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

SCHEDULE D (Form 990)

Internal Revenue Service

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public

Name of the organization Employer identification number VOICE OF CALVARY MINISTRIES 64-0564343 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 1 Held at the End of the Tax Year 2a a Total number of conservation easements 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1

Schedule D (Form 990) 2016 VOICE OF	CALVARY MI	NISTRIES		64-0564343	Page 2
Part III Organizations Maintaini	ng Collections of	Art, Historical Tr	easures, o	r Other Similar Ass	
3 Using the organization's acquisition, access collection items (check all that apply)	sion, and other records,	check any of the follow	ving that are a	significant use of its	
a Public exhibition	d 🗌	Loan or exchange pro	grams		
b Scholarly research	e 🗍	Other	-		
c Preservation for future generations					
4 Provide a description of the organization's of	collections and explain h	now they further the org	ganization's exc	empt purpose in Part	
XIII					
5 During the year, did the organization solicit	or receive donations of	art, historical treasures	s, or other simil	lar	
assets to be sold to raise funds rather than		rt of the organization's	collection?		Yes No
Part IV Escrow and Custodial A					
Complete if the organization 990, Part X, line 21.	on answered "Yes'	on Form 990, Pa	rt IV, line 9,	or reported an amou	ınt on Form
1a Is the organization an agent, trustee, custoo	lian or other intermedia	ry for contributions or o	other assets no	ot	
included on Form 990, Part X?					Yes No
b If "Yes," explain the arrangement in Part XII	I and complete the follo	wing table:			
				1	Amount
c Beginning balance				1c	
d Additions during the year				1d	
e Distributions during the year				1f	· · · · · · · · · · · · · · · · · · ·
f Ending balance2a Did the organization include an amount on I	Form 990 Part X line 2	1 for escrow or custor	tial account lial		Yes No
b If "Yes," explain the arrangement in Part XII					
Part V Endowment Funds.	· Check here is the exp	and a south pro-			
Complete if the organization	on answered "Yes'	on Form 990, Pa	rt IV, line 10	D.	
	(a) Current year	(b) Pnor year	(c) Two year		ack (e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and					
losses					
d Grants or scholarships					
e Other expenditures for facilities and					
programs					
f Administrative expenses			ļ		
g End of year balance		<u> </u>			
2 Provide the estimated percentage of the cu	rrent year end balance	(line 1g, column (a)) he	eld as.		
 a Board designated or quasi-endowment ► 	%				
b Permanent endowment ► %					
c Temporarily restricted endowment ▶	%				
The percentages on lines 2a, 2b, and 2c sh		71 . I I . I	d d fo	46-	
3a Are there endowment funds not in the poss	ession of the organizati	on that are neig and ac	aministerea for	tne	Yes No
organization by					3a(ı)
(i) unrelated organizations					3a(ii)
(ii) related organizationsb If "Yes" on line 3a(ii), are the related organization	zatione lieted as require	od on Schedule R?			3b
4 Describe in Part XIII the intended uses of the					
Part VI Land, Buildings, and Eq		ment idnos			
Complete if the organization		" on Form 990, Pa	rt IV, line 1	1a See Form 990, Pa	art X, line 10
Description of property	(a) Cost or other		other basis	(c) Accumulated	(d) Book value
	(investment)		her)	depreciation	
1a Land			669,864		669,864
b Buildings		1,4	167,732	439,048	1,028,684
c Leasehold improvements					
d Equipment		3	378,847	367,026	11,821
e Other	<u></u>				
Total. Add lines 1a through 1e (Column (d) must	equal Form 990, Part 2	K, column (B), line 10c)	<u> </u>	1,710,369

Part VII	Investments—Other Securities.		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line	11b See Form 990, Part X, line 12
	(a) Description of security or category	(b) Book value	(c) Method of valuation
	(including name of security)		Cost or end-of-year market value
(1) Financial	derivatives		
(2) Closely-he	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)		the second second and the second seco
Part VIII	Investments—Program Related.		
	Complete if the organization answered '	Yes" on Form 990, Part IV, line	11c See Form 990, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
_(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			as well to be a form to be a second and the first of the Million to the second of the
	nn (b) must equal Form 990, Part X, col (B) line 13.)	<u> </u>	《特殊》的《特殊》的《特殊》的《特殊》的《特殊》
Part IX	Other Assets.	Was" as Farm 000 Bort IV line	11d Soc Form 900 Part Y line 15
	Complete if the organization answered		(b) Book value
	(a) De	escription	(b) Book value
(1)			
(2)			
(3)			·
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	nn (b) must equal Form 990, Part X, col (B) line 15)		>
Part X	Other Liabilities.		
I alt X	Complete if the organization answered	"Yes" on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X,
	line 25	, ,	
1.	(a) Description of liability	(b) Book value	
	I income taxes		The Administration of the Control of
(2)			The state of the s
(3)			the state of the s
(4)			and the state of t
(5)			
(6)]
(7)			1
(8)			
(9)			
	nn (b) must equal Form 990, Part X, col (B) line 25)		
	r uncertain tax positions. In Part XIII, provide the text		ncial statements that reports the
•	hability for uncortain tax positions under FIN 48 (ASC		()

4b

4c

1,598,608

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

	Complete it the organization answered Tes on Form 600, 1	arery, mio rea		
1	Total expenses and losses per audited financial statements		1	2,125,609
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	· · · · · · · · · · · · · · · · · · ·
3	Subtract line 2e from line 1	()	3	2,125,609
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	<u>2,125,609</u>

Part XIII Supplemental Information.

a Investment expenses not included on Form 990, Part VIII, line 7b

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

b Other (Describe in Part XIII)

c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Schedule D (Form 990) 2016 VOICE OF CALVARY MINISTRIES

Part XIII Supplemental Information (continued)

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

2016

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

ž

X Yes 64-0564343 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States VOICE OF CALVARY MINISTRIES General Information on Grants and Assistance the selection criteria used to award the grants or assistance? Name of the organization Part

(h) Purpose of grant Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form or assistance REDEVELOPMENT (g) Description of noncash assistance 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 177,421 (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) 528 (p) EIN (1) COOP COMMUNITY OF NEW WEST JACKSON MS 39209 (a) Name and address of organization or government 1908 GRENADA STREET JACKSON Part II 2 4 9 9 6 6 3 8

For Paperwork Reduction Act Notice, see the Instructions for Form 990. $_{\mbox{\footnotesize DAA}}$ Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2016)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed Schedule I (Form 990) (2016) VOICE OF CALVARY MINISTRIES Part III Grants and Other Assistance to Domostic Individuals

	ו מוניוו כמון כל מעלווכמוכם וו מממוניסו ומי כלמכם	STATE OF STA				
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of noncash assistance
		recipients	cash grant	noncash assistance	FMV, appraisal, other)	
1 HOME	1 HOME MORTGAGE SUBSIDIES	ហ		397,320	COST	REDUCED SALE
8			;			=
m						
•						
ĸ						
9						
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b), and any other additional information.	vide the information re	quired in Part I, line	2; Part III, column (b)	, and any other additional II	nformation.

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

A DEED RESTRICTION IS ATTACHED TO THE RESIDENCE FOR A SPECIFIED NUMBER OF

YEARS, AND THE SUBSIDY MUST BE REPAID IF THE RESIDENCE IS SOLD OR

REFINANCED BY THE HOMEOWNER FOR A GAIN WITHIN THE SPECIFIED PERIOD.

Schedule I (Form 990) (2016)

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b

► Attach to Form 990 or Form 990-EZ.

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

2016
Open To Public Inspection

			-
Name	of the	orgonization	

Employer Identification number

varie of the organ	VOICE OF CALVARY N	ATNICAD TES					Employ			on nun	iber		
Part I	Excess Benefit Transaction		c)(3) section 5	01(c)	(4) 2	and 501(c)(29) or	64-0	3643	43				
	Complete if the organization answer							40b					
			onship between disc								(d)	Correc	ted?
1	(a) Name of disqualified person		organizatio	n			(c) Description of tran	nsactio	ו		Yes		No
(1)													
(2)													
(3)							<u> </u>						
(4)											<u> </u>		
(5)											Щ.		
(6)			·····								<u> </u>	<u> </u>	
under se	e amount of tax incurred by the organ ection 4958 e amount of tax, if any, on line 2, abo				ns di	uring the year		► \$ ► \$					
Part II	Loans to and/or From Inte	erested Perso	ns.										
	Complete if the organization answer	ered "Yes" on Forn	n 990-EZ, Part	V, line	38a	a or Form 990, Pa	rt IV, line 26, or if	the					
	organization reported an amount of												
	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	or from		(e) Onginal principal amount	(f) Balance due	(g) In	default?		proved ard or		/ritten ement?
				org	$\overline{}$	·				comn	nittee?		
				То	From			Yes	No	Yes	No	Yes	No
PHIL REP	ED	OFFICER		$ \mathbf{x} $		20.000	10,000		x	x		x	
(1)			OPERATING_	1		20,000	10,000	·	-	-	\vdash		\vdash
(2)				-									_
(3)													
(4)													
(5)				†		•							
(6)				+	$\mid - \mid$		<u> </u>		-	-			-
(7)				-						_			
(8)										-			
(9)										_			
10)													
Total						> \$	10,000	Ĺ		<u> </u>			
Part III	Grants or Assistance Ben Complete if the organization answer				7.								
	(a) Name of interested person	1 ' '	nship between intere and the organization		(c) Ai	mount of assistance	(d) Type of assistance		(e)	Purpos	e of assi	stance	
(1)													
(2)													
(3)													
(4)					<u> </u>		 						
(5)					<u> </u>								
(6)					<u> </u>			+-					
(7)								-					
(8)								+					

	form 990 or 990-EZ) 2016 VOICE OF	CALVARY MINIST	RIES	64-0564343	Page 2
Part IV	Business Transactions Involving				
	Complete if the organization answered "Yes"	on Form 990, Part IV, line 28a	, 28b, or 28c		
	(a) Name of interested person	(b) Relationship between	(c) Amount of	(d) Description of transaction	(e) Sharing
	,,	interested person and the	transaction	.,,	of org revenues?
		organization			Yes No
(1)					
(2)					
(3)					
(4)					
(5)			<u> </u>		
(6)			ļ		
(7)				<u> </u>	
(8)			ļ		
(9)			<u> </u>		
10)			<u> </u>		
Part V	Supplemental Information				
	Provide additional information for responses	to questions on Schedule L (se	ee instructions).		
				· — · · · · · · · · · · · · · · · · · ·	
	·				
					
					
					
					
		 			
			 		

Schedule L (Form 990 or 990-EZ) 2016

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

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

2016
Open to Public

OMB No 1545-0047

VOICE OF CALVARY MINISTRIES

64-0564343

Employer identification number

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE ORGANIZATION'S BOARD OF SERVANTS IS PROVIDED A COPY OF THE FORM 990 FOR
REVIEW BEFORE IT IS FILED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
BOARD MEMBERS AND EMPLOYEES ARE MADE AWARE OF THE CONFLICT OF INTEREST
POLICY, AND ANY CONFLICTS THAT ARISE ARE ADDRESSED AND RESOLVED IN A
TIMELY MANNER.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE BOARD OF SERVANTS REVIEW AND APPROVE THE PRESIDENT/CEO'S COMPENSATION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE ORGANIZATION'S GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.