Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Dep	artment of	the Treasury	!	ial security numbers							ection			
_		ue Service		ut Form 990 and its							Cuon			
<u> </u>			ndar year, or tax year beginnin		, 2016, a		ng D		ember 31 , 20 16					
$\overline{}$		applicable	C Name of organization CORNER	STONE MINISTRIES	INTERNATIONA	<u> </u>		ٻ	D Employer identification number					
_	Address	~	Doing business as			Deem/e		┈╂ <u></u>	Talaahaa	91-1550156				
님	Name ch	•	Number and street (or P.O box if	mail is not delivered to s	street address)	Room/s	uite		Telephone		_			
님	Initial reti		PO BOX 4002			<u> </u>				714-484-004	2			
_		rn/terminated		untry, and ZIP or foreign	n postal code				•					
_	Amended		TUSTIN, CA 92781						Gross rec		1,745,313			
Ш	Application	on pending	F Name and address of principal offi			_	. <i>I</i> II			bordinates? Y	_			
			2660 W WOODLAND DR. SUIT			$\neg \Gamma$)] H(b) A			included? 🔲 Y ist. (see instru				
<u> </u>		mpt status	✓ 501(c)(3)) () ◀ (insert no) 4947(a)(1) or	524	<u> </u>			•	cuoris)			
_	Website:			. 🗆 .	- 1				emption n					
	art I			ciation	LYea	ar of forma	ation	1992	M State o	f legal domicil	e WA			
		Summ		alon or most signi	ficant actuation:	DDOD	OC A TINI	C TUE	COSDEL	OF IESUS	CUDIST			
•	1	•	escribe the organization's mis	_										
Š	í		OSPEL RESTRICTED NATIONS								ING OUT			
Activities & Governance	•		ARIES, PLANTING CHURCHES	·						·				
8	1		is box D I if the organization		•	•			1 1	s net asset				
Ğ			of voting members of the gov	• • •	•				3		6			
S	1		of independent voting memb	-)	• •	4		4			
Ę	J		mber of individuals employed	•	•				5		18			
į			nber of volunteers (estimate i		(O) long 10				6	 	410			
•	1		elated business revenue from		• •				7a		0			
	b	Net unre	lated business taxable incom	or Year	<u> </u>	Current	Vear							
Revenue Ulo		Cantula	tions and arents (Dest VIII lin											
_ā			tions and grants (Part VIII, line					1,6	43,636		1,744,816			
Ž	1	-	service revenue (Part VIII, line											
Be.			ent income (Part VIII, column (
			venue (Part VIII, column (A), li						1		497			
	12		enue-add lines 8 through 11 nd similar amounts paid (Part		43,637		1,745,313							
	14	Bonofite	paid to or for members (Part	IV solumn (A) line	63 1-0)	MED	-09		58,203		729,088			
	15	Salarios	other compensation, employed	honofito (Port IV	oluma (Al-Jinga	5 10)	70		24 604		740.4.04			
ses	13	Jaianes,	other compensation, employed	e Dellellis (Fait IX, Ç	· Coluitiii_va/:*!!! 163 ·	J-10 1	100		34,691		<u>718,161</u>			
Expenses	1			al fundraising fees (Part IX, column (A), line 1 le) DEC 8. 291										
ă	1	O.11	45 + 154 - 1 - 445 - 1		2/2-11		ST1	<u> </u>	02.074		227.400			
	18	Total over	penses Add lines 12-17 /mus	et oqual Part IV col	240) (A) HIGO DE	المفاكلات	111	192,871			227,198			
	19	Revenue	penses (Part IX, column (A), II penses. Add lines 13–17 (mus · less expenses. Subtract line	18 from line 12	Iditiii (A); jiije že s	,,,,,,			85,765		1,674,447			
_ 9		rievende	less expenses. Oubtract line	TO HOITING 12 .	.,	· · ·	Beginning		57,872 ent Year	End of	70,866 Year			
Net Assets or Fund Balances	20	Total acc	sets (Part X, line 16)				 		68,762		976,629			
Ass	21		ollities (Part X, line 26)			• •	<u> </u>		60,000		970,029			
¥ E	22		its or fund balances. Subtract	t line 21 from line 2	n	• •	 		08,762		976,629			
	art II		ture Block			<u> </u>	L	<u> </u>	00,702		370,023			
			ry, I declare that have examined thi	s return, including acco	mpanying schedules	s and stat	ements, ar	nd to the	best of m	v knowledge a	and belief, it is			
			lete. Declaration of preparer (other the							,	2000, 1110			
	-		ote de	1 /	-			$\neg \neg$						
Sig	gn	Sign	ature of officer					Date						
He			PETER LEE,	EXECUTIVE	= D.DE				12,	1/201	7			
_		Type	or print name and title	-75-411/6				_		· / Ø1U]				
<u></u>		Print/Ty	pe preparer's name	Preparer's signature		10	Date	$\neg \neg$	Chacl. F	PTIN				
Pa		_				ļ			Check _ self-empl					
	epare		name Þ				-	Firm's	EIN ▶					
US	se Onl	y	address >					Phone						
Ma	v the IB		s this return with the prepare	r shown above? (e.	ee instructions)			1		[7]	/os 🗆 No			

Form **990** (2016)

Part,	II Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO SEEK THE LOST SHEEP OF GOD AND COMFORT THEM, MAKE THE DISCIPLES OF JESUS CHRIST, AND TO WORK TOGETHER
	IN HOLY SPIRIT, TO BUILD THE KINGDOM OF GOD IN THE GOSPEL RESTRICTED NATIONS WHERE CHRISTIANS ARE BEING PERSECUTED BECAUSE OF THEIR FAITH IN JESUS CHRIST.
	Did the organization undertake any significant program services during the year which were not listed on the
-	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
 4a	(Code: 1) (Expenses \$ 391,207 including grants of \$ 234,060) (Revenue \$)
	DELIVERING BIBLES AND CHRISTIAN LITERATURES TO THE PERSECUTED CHURCH IN THE GOSPEL RESTRICTED NATIONS
	SUCH AS NORTH KOREA, CHINA, ISLAMIC NATIONS, AND ISRAEL WITH THE COMBINED EFFORT OF OTHER PARTNERING
	MINISTRIES, MISSION ORGANIZATIONS, AND INDIVIDUAL MISSIONARIES. WE ALSO BROADCASTING OVER SHORT WAVE AND
	APPS TO REACH BELIEVERS AND CHRISTIAN LEADERS IN NORTH KOREA AND OVERSEAS. WE DISTRIBUTED 22,162 BIBLE TO
	NORTH KOREA. 3,187 MANGA (CARTOON) BIBLE FOR CHILDREN. WE BROUGHT 155 STUDY BIBLE TO KOREAN-CHINESE
	WHO RESIDE IN NORTHEAST CHINA. WE ALSO SENT 2,662 HELIUM BALLOONS INTO NORTH KOREA WITH THE HELP OF 410
	VOUNTEERS. WE DELIVERED 16,848 CHINESE BIBLES AND BROUGHT IN 11,534 COMMENTARY BIBLES TO CHINA. IN ADDITION
	2,100 COPIES OF VIETNAMESE BIBLES AND 382 COPIES OF MANGA MESSIAH WE BROUGHT INTO VIETNAM. 960 MONGOLIAN
	BIBLES AND 4,300 UYGUR BIBLES WERE DISTRIBUTED IN FOUR CITIES. IN ADDITION TO PRINTED BIBLE, WE USE
	RADIO TO DELIVER BIBLE AND TEACHING FOR LEADERS.
4b	(Code: 2) (Expenses \$ 356,942 including grants of \$ 234,108) (Revenue \$)
40	RAISE UP LEADERS IN THE RESTRICTED NATIONS FOR THEM TO MINISTER TO PROPOGATING THE GOSPEL OF JESUS
	CHRIT BY HAVING BIBLE SCHOOL, SEMINARIES, AND CONFERENCES ALONG WITH THE OTHER MINISTRIES, MISSIONARIES,
	AND ORGANIZATIONS. EQUIP POTENTIAL LEADERS AMONG KOREAN LIVING IN KOREA AND LIVING AROUND THE WORLD
	TO ENTER INTO THE RESTRICTED MISSION FIELD. DISTRIBUTE NEWSLETTERS AND PRAYER LETTERS TO INFORM THE
	NEEDS OF SUPPORTING LEADERS AND CUREENT SITUATION OF THE PERSECUTED CHURCH IN THE RESTRICTED NATIONS.
	187 LECTURERS ARE MOBILIZED TO TEACH 330 STUDENTS IN 6,274 HOURS AMONG CHINESE SEMINARY AND 21 MINORITY
	LEADERS RECEIVED THE TRAINING. WE CONTINUALLY SUPPORT THE SEMINARY IN INDIA TO RAISE UP THE LEADERS
	FOR CHURCH PLANTING.
	······································
4c	(Code. 3) (Expenses \$ 360,023 including grants of \$ 102,420) (Revenue \$)
	FACILITATING AND SUPPORTING OTHER MINISTRIES AND MISSIONARIES FOR NETWORKING AND PARTNERING IN DELIVERING
	AND TEACHING THE WORD OF GOD AND TRAINING PEOPLE TO BE MISSIONARIES IN THE RESTRICTED NATIONS. TWO MISSION
	CONFERENCES WERE HELD IN 2016 AND TOTAL OF 903 PARTICIPANTS JOINED ALONG WITH 224 CHILDREN. AFTER THE
	CONFERENCE, 12 WEEK COURSES ARE OFFERED TO CONTINUE TO LEARN TO BE A MISSIONARY. WE HELD 3 TRAINING FOR
	DIASTER RECOVERY AND 605 STUDENTS PARTICIPATED. 166 PEOPLE JOINED FOR THE 16 SHORT TERM MISSIONS TO CHINA
	ALONG THE BORDER OF NORTH KOREA.
	······
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 270,152 including grants of \$ 158,500) (Revenue \$)
4e	Total program service expenses ▶

Part	IV I	Checklist	of Dog	uirad	20	hadulae
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			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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u>√</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
ŭ	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
-	"Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8_		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		√
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		√
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		•	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11b		<u>√</u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11c	✓	
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		√
	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>
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		<u></u>
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	1	<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, 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	\	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	√	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		√
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>√</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		· -
		ــــــــــــــــــــــــــــــــــــــ	. <u>99</u> 0	(2016)

Part	V Checklist of Required Schedules (continued)			
•			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓_
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		
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			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21	✓	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	/	
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		✓
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	}		
	through 24d and complete Schedule K. If "No," go to line 25a	24a		√
D	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
	to defease any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
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		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior		1	
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	1	1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	230		-
20	current or former officers, directors, trustees, key employees, highest compensated employees, or		1	
	disqualified persons? If "Yes," complete Schedule L, Part II	26	1	✓
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			
00	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			j
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		/
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		✓
C	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		✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		√ _
30	conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		
	Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
00	complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	20		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33		✓
	or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
00	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	26		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		-
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		✓_
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	√	<u> </u>
		Forr	n 990	(2016)

Part				_
	Check if Schedule O contains a response or note to any line in this Part V	···		, []
_			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 1		1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			اــــا
_	reportable gaming (gambling) winnings to prize winners?	1c		 -
2a				
_	Statements, filed for the calendar year ending with or within the year covered by this return 2a 18			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	 -
•	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		1
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 authority			{
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4-		1
L	·	4a		
b	If "Yes," enter the name of the foreign country:	}		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			1 }
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		-
b b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
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	 		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1		1
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		ļ,
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	<u></u>	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	
10	Section 501(c)(7) organizations. Enter:	}		
а	Initiation fees and capital contributions included on Part VIII, line 12	}		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	} :		
11	Section 501(c)(12) organizations. Enter:	} :		1
a	Gross income from members or shareholders	1		1
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	{		i
40-	against amounts due or received from them.)	12a		{
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	IZA	 	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	}	}
ıs a	Is the organization licensed to issue qualified health plans in more than one state?	13a	 	
a	Note. See the instructions for additional information the organization must report on Schedule O.	1.54	 	
b	Enter the amount of reserves the organization is required to maintain by the states in which		İ	1
	the organization is licensed to issue qualified health plans	[[1
С	Enter the amount of reserves on hand	1		1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	1
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O.	14b	 	† <u> </u>

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change	s in Sc hed ule 0. S	ee ins	truct	ions.
Secti	Check if Schedule O contains a response or note to any line in this Part VI on A. Governing Body and Management	<u> </u>		_•	<u> [√]</u>
3601	on A. Governing Body and Management			Yes	No
1a	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.	1a 6			
b 2	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 any other officer, director, trustee, or key employee?		2	✓	
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or other		3		/
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 9 Did the organization become aware during the year of a significant diversion of the organization Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?	on's assets? elect or appoint	4 5 6		√ √ √
b	Are any governance decisions of the organization reserved to (or subject to approva stockholders, or persons other than the governing body?		7b		1
8	Did the organization contemporaneously document the meetings held or written actions ur the year by the following:	ndertaken during			
a b	The governing body?		8a 8b	√	
9 Socti	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule Con B. Policies (This Section B requests information about policies not required by the	D	9	ada \	✓
Secu	on B. Policies (This Section B requests information about policies not required by the	e internal neven	ue Co	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exemption of the control of t		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body befo	re filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	•			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	✓_	
c b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Did the organization regularly and consistently monitor and enforce compliance with the		12b	√	
13	describe in Schedule O how this was done		12c 13	√	
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the deliberation	and approval by	14	✓	
а	The organization's CEO, Executive Director, or top management official		15a		1
b	Other officers or key employees of the organization		15b		✓
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or sim	ilar arrangement			
b	with a taxable entity during the year?		16a		✓
Cook	participation in joint venture arrangements under applicable federal tax law, and take steps organization's exempt status with respect to such arrangements?	to sateguard the	16b		
<u>Secti</u>	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► CALIFORNIA				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a available for public inspection. Indicate how you made these available. Check all that apply.	and 990-T (Section	501(c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Sc Describe in Schedule O whether (and if so, how) the organization made its governing docume financial statements available to the public during the tax year.	ents, conflict of int		_	, and
20	State the name, address, and telephone number of the person who possesses the organization PETER LEE, 2660 W WOODLAND DR. SUITE 105, CA 92801 (714)484-0042	on's books and re	cords:	>	

	(2016)	

Page 7

		
Part _, VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	, and
•	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 no	r any related	d orga	anız	atıo	n c	ompe	nsa	ated any curren	t officer, director	, or trustee.	
***				(()						
(A)	(B)	٠.			ition			(D)	(E)	(F)	
Name and Title	Average					than one than the second		Reportable	Reportable	Estimated	
	hours per					or/trust			compensation from	amount of	
	week (list any hours for	악	'n	Q	<u>چ</u>	3.₹	7	from the	related organizations	other compensation	
	related	Individual trustee or director	Institutional trustee	Officer	Key employee	등등	Former	organization	(W-2/1099-MISC)	from the	
	organizations	lual	on	7	륗	ye c	~	(W-2/1099-MISC)		organization	
	below dotted line)	, גני	al tı		γe	Į				and related organizations	
	,	stee	ารเ		0	ens		·		organizations	
			æ			Highest compensated employee					
		·									_
(1) ISAAC LEE	60							:			
2660 W WOODLAND DR. #105, ANAHEIM, CA				✓				48,460	0		0
(2) PETER LEE	60										
2660 W WOODLAND DR. #105, ANAHEIM, CA				✓				48,460	0		0
(3) Y.I SONG	0										
2660 W WOODLAND DR. #105, ANAHEIM, CA		✓							0		0
(4) SEOUNG HEE KO	0						ļ				
1717 OTTERBEIN AVE, ROWLAND HEIGHT, CA		✓					<u> </u>		0		0
(5) C.I. KIM	0										
4395 DEOPAR DR. YORBA LINDA, CA		✓							0		0
(6) PAUL JUN	0										
9836 GARDEN GROVE, GARDEN GROVE, CA		✓_							0		0
(7)											
											
(8)											
(9)											
											_
(10)											
(44)	 		_								
(11)	 										
(12)			_								_
\\ <u></u>	 										
(13)			\vdash			_	-			-	
3 <i>1.</i>	 										
(14)	 		-			ļ	- -				_
N.:./	4						1	I			

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) Name and title		(B) Average hours per	(C) Position (do not check more than o box, unless person is both officer and a director/trust					an	(D) Reportable compensation	(E) Reportable compensation from				
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-M		composition from organi and	ther ensation the nization related ization	n d
(15)														
(16)						-						 -		
(17)											-			
(18)								-						
(19)				-						<u> </u>				
(20)					_						_			
(21)											+		-	
(22)										<u> </u>				
(23)														
(24)			ļ			-								
(25)					-	-		-		j				
1b c	Sub-total	VII, Sectio	n A					>	96,920					
<u>d</u> 2	Total (add lines 1b and 1c)	t not limited						e) w	96,920 no received m		00,000	of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc						emp	ployee, or high	est compe	nsated	3	Yes	No V
4	For any individual listed on line 1a, is the organization and related organizations individual											4		1
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or inc		5		
Section	on B. Independent Contractors				_			_	<u> </u>				L	 _
1	Complete this table for your five highest compensation from the organization. Repyear.													lax
	(A) Name and business add	iress							(B) Description of s	ervices	C	(C) Compens	ation	
					_									
2	Total number of independent contractor received more than \$100,000 of compens							tr	nose listed ab	ove) who				

	990 (2016	<u></u>		 		Page 9
Par	t _. VIII	Statement of Revenue	- Constants	D1 \/01		
		Check if Schedule O contains a response or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
srants ounts	1a b	Federated campaigns 1a Membership dues 1b		revenue		512-514
ifts, C r Am	c d	Fundraising events 1c Related organizations 1d				
ıs, Gi imila	e	Government grants (contributions) 1e				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above 1f 1,744,816				
Sont and C	9 h	Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f	1 744 016			
9	 "-	Business Code	1,744,816			
Program Service Revenue	2a					
ež eš	b					
Servi	q					
E S	e					
Prog	f g	All other program service revenue . Total. Add lines 2a-2f	1,744,816			<u> </u>
	3	Investment income (including dividends, interest,	1,744,810			'
	1	and other similar amounts)	100	100		
	5	Income from investment of tax-exempt bond proceeds ▶ Royalties				
	"	(i) Real (ii) Personal				
	6a	Gross rents		,		
	b	Less' rental expenses Rental income or (loss)				
	d	Net rental income or (loss)				
	7a	Gross amount from sales of (i) Securities (ii) Other				
	ь	assets other than inventory Less: cost or other basis				
		and sales expenses .				
	С	Gain or (loss)			~ 	
	d	Net gain or (loss)				
Other Revenue	8a	Gross income from fundraising events (not including \$				
ner Re		of contributions reported on line 1c). See Part IV, line 18 a				
ਠੋ	1	Less: direct expenses b Net income or (loss) from fundraising events . ▶				^j
		Gross income from gaming activities. See Part IV, line 19			<u> </u>	
	b	Less: direct expenses b Net income or (loss) from gaming activities b				
	1 -	Gross sales of inventory, less returns and allowances a				
	i	Less: cost of goods sold b Net income or (loss) from sales of inventory			-	
	- c	Miscellaneous Revenue Business Code				
	11a	Rebate	397	397	 	
	b					
	d	All other revenue	397	397		
	e	Total. Add lines 11a-11d	397			
	12	Total revenue. See instructions ▶	1.745.313	497		

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con			s must complete colu	
	Check if Schedule O contains a respon			_ <u></u>	🗹
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				. = = =
	and domestic governments. See Part IV, line 21	187,739	187,739		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	72,929	72,929		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	1	Ì	1	
	ındıviduals. See Part IV, lines 15 and 16	468,420	468,420		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1	}	1	
	trustees, and key employees	96,920	65,421	19,384	12,115
6	Compensation not included above, to disqualified	1		ĺ	
	persons (as defined under section 4958(f)(1)) and	}	}		
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	569,620	379,319	43,202	147,099
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1	1		
9	Other employee benefits	070			270
9 10	Payroll taxes	378	31 600	6 254	378
11	Fees for services (non-employees):	51,243	31,690	6,254	13,299
ı,	Management		ļ		
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	5,346	3,069	1,420	857
12	Advertising and promotion	1,720	1,204	172	344
13	Office expenses	5,972	4,181	597	1,194
14	Information technology	22,020	13,766	3,026	5,228
15	Royalties				
16	Occupancy	28,988	20,584	2,801	5,603
17 18	Travel	46,083	43,779	1,383	921
10	for any federal, state, or local public officials	1	1		
19	Conferences, conventions, and meetings .	4,827	2,310	866	1,651
20	Interest	4,027	2,310	800	1,031
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	17,235	12,065	1,723	3,447
23	Insurance	157	48	93	16
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If	1	1	}	
	line 24e amount exceeds 10% of line 25, column	1	}	}	•
	(A) amount, list line 24e expenses on Schedule O.)				
a	Statement 1	94,850	62,865	12,221	19,764
b					
C					
d e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,674,447	1,369,389	93,142	211,916
26	Joint costs. Complete this line only if the	1,074,447	1,303,303	33,142	711,310
	organization reported in column (B) joint costs	1	}	}	
	from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	{	}	[
	following SOP 98-2 (ASC 958-720)				

P	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Pa	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	413,119	1	324,262
	2	Savings and temporary cash investments	604,303	2	494,606
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,000	4	2,874
	5	Loans and other receivables from current and former officers, directors,	{	1	
		trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
s	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		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 308,265			
	b	Less: accumulated depreciation 10b 153.378	150,340	10c	154,887
	11	Investments—publicly traded securities	100/040	11	
	12	Investments—other securities. See Part IV, line 11	 	12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,168,762	16	976,629
	17	Accounts payable and accrued expenses	260,000	17	0
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
es	22	Loans and other payables to current and former officers, directors,			
Ħ		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L		22	
=	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X		_	
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	260,000	26	0
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
a	27	Unrestricted net assets	908,762	27	979,629
Ba	28	Temporarily restricted net assets		28	·
r Fund Balances	29	Permanently restricted net assets		29	
Š	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund	· · · · · · · · · · · · · · · · · · ·	31	
AS	32	Retained earnings, endowment, accumulated income, or other funds.		32	
Net Assets or	33	Total net assets or fund balances	908,762		979,629
~	34	Total liabilities and net assets/fund balances	1,168,762		979,629
					Form 990 (2016)

Page	1	2
	•	_

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>		<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,74	5,313
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,67	4,447
3	Revenue less expenses. Subtract line 2 from line 1	3		7	0,866
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		90	8,763
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		97	9,629
Part	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				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	piain in			
_	Schedule O.				
2a	· · · · · · · · · · · · · · · · · · ·		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both:	olled of			
	·				
L	Separate basis Consolidated basis Both consolidated and separate basis		2b		✓
D	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited.	· · ·	2D		
	separate basis, consolidated basis, or both:	o on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	ersiaht	-		
•	of the audit, review, or compilation of its financial statements and selection of an independent account		2c		
	If the organization changed either its oversight process or selection process during the tax year, ex		1		
	Schedule O.	F	}		}
За	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		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo the	1		
~	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			For	n 990	(2016)
					•

SCHEDULE A , (Form 990 or 990-EZ)

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.

► 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.

2016
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number

vame	of the organization				ľ	Employer Identification	i number	
COR	ORNERSTONE MINISTREIS INTERNATIONAL 91-1550156							
Par	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.							
The c	he organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)							
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2	A school described in section	170(b)(1)(A)(ii). (Attach Schedule E (Fo	orm 990 (or 990-E2	Z).)	\mathcal{O} .	
3 4								
5	An organization operated for t section 170(b)(1)(A)(iv). (Comp	he benefit of a	college or university	owned o	r operate	d by a government	al unit described in	
6 7	☐ A federal, state, or local govern ☐ An organization that normally described in section 170(b)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)	nment or governr receives a subst	tantial part of its supp				n the general public	
8	☐ A community trust described in		•	Part II.)				
9	An agricultural research organic or university or a non-land-granuniversity:	zation described nt college of agri	in section 170(b)(1)(culture (see instruction	A)(ix) opens). Ente	r the nam	ne, city, and state of	the college or	
10	An organization that normally r receipts from activities related support from gross investment acquired by the organization at	to its exempt fur income and unr fter June 30, 197	nctions—subject to ce related business taxal 75. See section 509(a	ertain exc ble incom)(2). (Con	eptions, e (less se nplete Pa	and (2) no more that ection 511 tax) from irt III.)	n 33¹/₃% of its	
11	_	•	•	-				
12	An organization organized and of one or more publicly suppo	rted organization	ns described in secti	on 509(a)(1) or se	ection 509(a)(2). Se	e section 509(a)(3).	
	Check the box in lines 12a thro	ugh 12d that des	scribes the type of sup	porting o	rganizatio	on and complete line	s 12e, 12f, and 12g.	
а	Type I. A supporting organ the supported organization supporting organization. Ye	(s) the power to	regularly appoint or e	lect a ma	jority of t			
b	Type II. A supporting organ control or management of the organization(s). You must be	the supporting o	rganization vested in	the same				
С	Type III functionally integrits supported organization(ally integrated with,	
d	Type III non-functionally i that is not functionally integ requirement (see instruction	grated. The orgai	nization generally mus	st satisfy	a distribu	ition requirement an		
e	Check this box if the organ functionally integrated, or T						e II, Type III	
f	Enter the number of supported of						[
g			orted organization(s).				• • • • • • • • • • • • • • • • • • • •	
<u>_</u>	(i) Name of supported organization	(n) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
				Yes	No			
(A)								
(B)				ļ				
(C)			<u></u>	<u> </u>			<u></u>	
(D)								
			<u> </u>					
(E)		1]		}		

Total

Part							
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	quality unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support	(1)0010	#1.0040	(-) 0044	1-D 0045	(-) 0046	10/T-1-1
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
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				β	KE	
3	The value of services or facilities furnished by a governmental unit to the organization without charge			a^1	PLICAR		
4	Total. Add lines 1 through 3			-	/		
5	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)		4	01			
6	Public support. Subtract line 5 from line 4						
Secti	on B. Total Support			1			
Calen	dar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4		/		 		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				.A	BLE -	
9	Net income from unrelated business activities, whether or not the business is regularly carried on			1 A	PPLICA		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	j	,				
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.				,	12	
13	First five years. If the Form 990 is for the						on 501(c)(3)
Cardi	organization, check this box and stop he		· · · · ·	· · · · · ·			
	on C. Computation of Public Support Public support percentage for 2016 (line)			11 column (ft)		14	%
14 15	Public support percentage for 2016 (line of Public support percentage from 2015 Sci		-			15	
16a	331/3% support test—2016. If the organ	ization did not	check the bo	x on line 13, a	nd line 14 is 3:		
	box and stop here. The organization qua						▶ 🖪
b	331/3% support test—2015. If the organithis box and stop here. The organization					is 33 ¹ / ₃ % or m	nore, check
17a							
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization resupported organization	ation meets th	ne "facts-and- ts-and-circum	circumstances stances" test.	" test, check	this box and	stop here.
10	supported organization	d not shook a				k this boy and	
18	instructions					K this dox and	

Schedule A (Form 990 or 990-EZ) 2016

	(Complete only if you checked the lf the organization fails to qualify						nder Part II.
	on A. Public Support		<u> </u>		1	1 1 2 2 2 2 2	
Calen 1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
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				/ ,	w'	
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .				P		
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				gv'		
8 8	Add lines 7a and 7b			λ_{j}			-
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	/(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6			1			
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.		/_0				
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b 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.)	/ /		<u>"</u>			
14	First five years. If the Form 990 is for the organization, check this box and stop he						
Secti	on C. Computation of Public Suppor	t Percentag	e				
15	Public support percentage for 2016 (line						%
16	Public support percentage from 2015 Sch			<u></u>	<u> </u>	16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2016 (1		•			<u>%</u>
18 19a	Investment income percentage from 201; 331/2% support tests—2016. If the organ 17 is not more than 331/2%, check this box	ization did not and stop here	check the box. The organizati	c on line 14, a on qualifies as	and line 15 is n a publicly supp	nore than 331/2 ported organiza	ition . ► 🗀
b	331/3% support tests—2015. If the organize line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	d not check a	hox on line 14	19a or 19h	check this box	and see instr	uctions 🕨 🗀

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

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.)

Secti	on A. All Supporting Organizations			
			Yes	No
1	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.	1		
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.	2 3a		
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.	3b		
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.	3c		
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.	4a		
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.	4b		
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.	4c		
5a	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 organizations during (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).	5a		
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 occument?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	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 .	6		
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).	7		
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).	8		
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 .	9a		
b	Did one or prore 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 .	9b		
С	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.	9c		
	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.	10a		
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.)	10b		

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		L
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		L
Section	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	1 1		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			!
	controlled the organization's activities. If the organization had more than one supported organization,	[
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	[]		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax/year.			ļi
^	Did the association associated for the bounds of any associated associated associated	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	}		
	VI how providing such benefit carned out the purposes of the supported organization(s) that operated,	}		
	supervised, or controlled the supporting organization.	2		 -
Section	on C. Type II Supporting Organizations	_ <u>-</u>		
JJJ 111	on on type is supporting or gained notice		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
-	or trustees of each of the organization's supported organization(s)? If "No,"/describe in Part VI how control	}		
	or management of the supporting organization was vested in the same persons that controlled or managed]		
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
	~ (V		Yes	No
1	Did the organization provide to each of its supported organization by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			1 1
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	 		
	organization's governing documents in effect on the date of botification, to the extent not previously provided?	1		 ,
2	Were any of the organization's officers, directors, or this ees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			<u> </u>
3	•	2		 -
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's	į :		1
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			1 1
	supported organizations played in this regard.	3		├ ⁻
Secti	on E. Type III Functionally Integrated Supporting Organizations			<u> </u>
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	netri	ction	
		i i S (i U	CHOIL	> /-
a b	☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization is the parent of each of its supported organizations. Complete mile 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (saa in	etnict	ionel
•		III		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	{		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1		
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	-		نـ ـ ـ
8	<i>'</i>	2a		
D	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in 2 if "Vos." explain in Part VII the			1
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these	}		1
	activities but for the organization's involvement.	2h		
3	Parent of Supported Organizations. Answer (a) and (b) below.	2b	 	
ა a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			1
a	trustees of each of the supported organizations? Provide details in Part VI .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V. Type III Non-Functionally integrated 509(a)(3) Supporting Org			
1 Check here if the organization satisfied the Integral Part Test as a qualifying			
instructions. All other Type III non-functionally integrated supporting organ Section A - Adjusted Net Income	nzat	(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		T
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)
1 Aggregate fair market value of all non-exempt-use assets (see 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		<u> </u>
c Fair market value of other non-exempt-use assets	10	 	<u> </u>
d Total (add lines 1a, 1b, and 1c)	1d		<u> </u>
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt dise assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 7-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add, line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
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		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			1
emergency temporary reduction (see instructions).	6	<u></u>	<u> </u>
7 Check here if the current year is the organization's first as a non-functional instructions).	ly in	tegrated Type III supporting	ng organization (see

Part		s) Supporting Organi	zations (continuea)	
Secti	on D - Distributions	<u></u>		Current Year
1_	Amounts paid to supported organizations to accomplish	·		
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nızatıons	
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.		 	/
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	h the organization is res	sponsive	
	(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		(Gi)	
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6		/	
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.	14		
3	Excess distributions carryover, if any, to 2016:	\ \b\v		
а		\X\'		
b		C/4		
С	From 2013	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \		
d	From 2014	0V		
е	From 2015	Υ		
f	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2016 distributable amount			
- ! -	Carryover from 2011 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7:			
<u>a</u>	Applied to underdistributions of prioryears			
<u>b</u>	Applied to 2016 distributable amount			
<u>c</u>	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Ordan Orlino 7.			
<u>u</u>	Excess from 2013		* ****	
C	Excess from 2014			
ď	Excess from 2015			
е	Excess from 2016			

SCHEDULE D (Form 990)

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

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Name o	the organization		Employer identification number
CORNE	RSTONE MINISTRIES INTERNATIONAL		91-1550156
Par		vised Funds or Other Similar Fun	ds or Accounts.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		,
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets h	eld in donor advised
•	funds are the organization's property, subject to the	-	
6	Did the organization inform all grantees, donors, a only for charitable purposes and not for the bene	and donor advisors in writing that gran	nt funds can be used
	conferring impermissible private benefit?		
Part		(5/ 1) F 000 D-10/ Pa-7	
	Complete if the organization answered		
1	Purpose(s) of conservation easements held by the		<i></i>
	Preservation of land for public use (e.g., recrea		
	Protection of natural habitat	☐ Preservation of	f a certified historic structure
	☐ Preservation of open space	,	
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution	
	easement on the last day of the tax year.	1 /	Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easement		2b
C	Number of conservation easements on a certified I		
d	Number of conservation easements included in	(c) acquired after 8/17/06, and not	on a
	historic structure listed in the National Register .	· · · · · · · · · · · · · · · · · · ·	· · 2d
3	Number of conservation easements modified, tran	sferred, released, extinguished, or terr	minated by the organization during the
	tax year ►	ΔΥ	
4	Number of states where property subject to conse	ervation casement is located >	
5	Does the organization have a written policy re violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspec	eting, handling of violations, and enforcing	· · · · · · · · · · · · · · · · · · ·
7	Amount of expenses incurred in monitoring, inspectir	ng handling of violations, and enforcing	conservation easements during the year
•	►\$ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ng, nanamig or violations, and officering	ociosi vallon datomonio dalling tilo you.
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
•	and section 170(h)(4)(B)(ii)?	2 (a) above salloy in requirements of	· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization reports	concentation essements in its revenue	
9	balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easeme		anola statemente triat deserribes tric
Part			Other Similar Assets
, air	Complete if the organization answered		
12	If the organization elegated, as permitted under SF		
	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the		
h	If the organization elected, as permitted under S		
Ü	works of art, historical treasures, or other similar public service, provide the following amounts relati	r assets held for public exhibition, ed	
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art	. historical treasures or other similar	r assets for financial gain, provide the
_	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1	· -	
	Assets included in Form 990. Part X		▶ \$

Part	<u> </u>					
3	Using the organization's acquisition, acce collection items (check all that apply):	ssion, and other i	record	s, check any of th	e following that are a	significant use of its
а	☐ Public exhibition		d 🗀	Loan or exchang	je programs	
b	☐ Scholarly research		е 🗆	Other		
С	☐ Preservation for future generations					
4	Provide a description of the organization's XIII.	s collections and	explain	how they further	the organization's exe	Inpt purpose in Part
5	During the year, did the organization solo	cit or receive dona	ations	of art, historical tr	easures, or other sim	ilar
	assets to be sold to raise funds rather than	n to be maintained	l as pa	rt of the organizati	on's collection? .	· □ Yes □ No
Part	IV Escrow and Custodial Arrange	ements.				
	Complete if the organization ans	wered "Yes" on	Form	990, Part IV, line	e 9, or re ported an a	mount on Form
	990, Part X, line 21.					
1a	Is the organization an agent, trustee, cus					not
	included on Form 990, Part X?				/	· 🔲 Yes 🗌 No
b	If "Yes," explain the arrangement in Part X	III and complete the	he follo	owing table:		
				. 💔		Amount
C	Beginning balance			1/2	1c	
d	Beginning balance			٠ (۷)	1d	
е	Distributions during the year			<i>α</i> . ⟨γ'	1e	
f				1/	1f	
2a	Did the organization include an amount on					
	If "Yes," explain the arrangement in Part X	III. Check here if	he exp	lanation has been	provided on Part XIII	
Par		1 X				
	Complete if the organization ans					
	<u> </u>	Current year ((b) Pnor	year (c) Two year	rs back (d) Three years ba	ck (e) Four years back
1a	Beginning of year balance					
b	Contributions	<i></i>				
С	Net investment earnings, gains, and	^1				
	losses					
	Grants or scholarships					
е	Other expenditures for facilities and programs					
f	Administrative expenses . /					
g	End of year balance					
2	Provide the estimated percentage of the c	urrent year end ba	alance	(line 1g, column (a)) held as:	
а	Board designated or quasi-endowment ▶	%				
þ	Permanent endowment ▶%					
C	Temporarily restricted endowment ▶	%				
	The percentages on lines 2a, 2b, and 2c si					
3a	Are there endowment funds not in the po-	ssession of the or	ganiza	tion that are held	and administered for	the
	organization by:					Yes No
	(i) unrelated organizations					. 3a(i)
	(ii) related organizations					. 3a(ii)
5/	If "Yes" on line 3a(ii), are the related organ					. 3b
4_	Describe in Part XIII the intended uses of t		endow	ment funds.		
Part						
	Complete if the organization ans	swered "Yes" on			e 11a. See Form 990), Part X, line 10.
	Description of property	(a) Cost or other be (investment)	asıs (I	(other)	(c) Accumulated depreciation	(d) Book value
1a	Land			129,691		129,691
b	Buildings					
C	Leasehold improvements	L		16,563	10,903	5,660
đ	Equipment			162,011	142,475	19,536
e	Other	<u></u>				
Total.	Add lines 1a through 1e. (Column (d) must	equal Form 990, F	Part X,	column (B), line 10)c.) ▶	154,888

Part VII	Investments—Other Securities				
	Complete if the organization answ	wered "Yes" on For	rm 990, Part IV, lin	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)	,	(b) Book value		hod of valuation -of-year market value
(1) Financial	derivatives				
(2) Closely-h	neld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G) (H)					
	a) must agust Earra 000 Part V and (R) line 12)				
Part VIII	b) must equal Form 990, Part X, col. (B) line 12.) ► Investments—Program Related		ļ	<u> </u>	
PartVIII	Complete if the organization answers		rm 000 Part IV lin	e 11c See Form	000 Part V line 13
	(a) Description of investment	wered tes office	(b) Book value		thod of valuation
	(a) Description of investment		(b) Book value		of-year market value
(1) I AND E	OR TRAINING CENTER		129,691	COST	
(2)	OR TRAINING CENTER		129,051	0031	
(3)				-	
(4)		·	·		_
(5)		.,			
(6)					
(7)					
(8)					
(9)					
	b) must equal Form 990, Part X, col. (B) line 13.)		<u> </u>	<u> </u>	
Part IX	Other Assets.				
	Complete if the organization answ		rm 990, Part IV, lin	e 11d. See Form	
	(a) Description			(b) Book value
(1)					
(2)		<u> </u>			
(3)					
(4)					
(5)					
<u>(6)</u> <u>(7)</u>					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, co	ol. (B) line 15.)			
Part X	Other Liabilities.				
	Complete if the organization answ	wered "Yes" on Fo	rm 990, Part IV, lin	e 11e or 11f. Se	e Form 990, Part X,
	line 25.				
1.	(a) Description of liability	(b) Book value			·
(1) Federal in	come taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
	b) must equal Form 990, Part X, col. (B) line 25.)				
	r uncertain tax positions. In Part XIII, provi	de the text of the foots	note to the organization	n's financial stateme	ents that reports the
	provi		io vigainzano		

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part		•	Return.
	Complete if the organization answered "Yes" on Form 99 Total revenue, gains, and other support per audited financial statement		T. I
1	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	nts	1
2 a	Net unrealized gains (losses) on investments	. 2a	
b	Donated services and use of facilities		-
C	Recoveries of prior year grants		1
d	Other (Describe in Part XIII.)		-
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b .	. 4a	
b	Other (Describe in Part XIII.)		1
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I,	line 12.)	5
Part	XII Reconciliation of Expenses per Audited Financial Sta		er Return.
	Complete if the organization answered "Yes" on Form 99	90, Part IV, line 12a.	
1	·		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
а	Donated services and use of facilities		
b	Prior year adjustments		-
C	Other losses		-
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d		2e 3
3 4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		-
a	Investment expenses not included on Form 990, Part VIII, line 7b.	44	
b	Other (Describe in Part XIII.)		-
C	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I		5
Part	XIII Supplemental Information.		······································
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a		
2; Parl	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this p	part to provide any additional i	nformation.
THE M	INISTRY ACQUIRED A LOT OF LAND ON OCTOBER 30, 2015 FOR THE FU	TURE MISSIONARY TRAINING O	ENTER.
		••••••••••••••••••••••••••••••	
		·	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2016

Open to Public

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

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

Inspection Employer identification number

Name	of the organization					Employer ide	entification i	number
	IERSTONE MINISTRIES INTERN	ATIONAL	· · · · · · · · · · · · · · · · · · ·				-1550156	
Par	General Information Form 990, Part IV, line		ies Outside	the United States. Comp	olete if the organ	izatıon ansv	vered "Ye	s" on
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?	gibility for th					√Yes	□No
2	For grantmakers. Describe assistance outside the Unite	ed States.					s and oth	ner
3	Activities per Region. (The fo		I, line 3 table of	, 				
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity lists a program se describe specifi service(s) in the	ervice, ic type of	(f) To expenditu and invest in the re	res for tments
(1)	EAST ASIA	2	2	PROGRAM SERVICES	BIBLE DELIVER	Y		81,500
(2)					LEADERSHIP TR	RAINING		71,500
(3)					MISSIONARY TR	AINING		102,420
(4)		ļ 			CHURCH PLANT	ING		100,000
(5)					HUMANITARIAN	ASSIST		46,000
(6)	SOUTH ASIA		22		BIBLE DELIVER	<u>v</u>		40,000
<u>(7)</u>					LEADERSHIP TE	RAINING		7,000
(8)	NORTH AMERICA		1	 	LEADERSHIP TE	RAINING		20,000
(9)								
(10)			<u> </u>					
(11)								
(12)								
(13)		\ \					· · · · · · ·	
(14)		 				<u>}</u>		
(15)			ļ					
(16)								
(17)	Cub Addal				mark markets and			
3a b	Sub-total							468,420
С					A CAMPAGE AND A	TARREST BA		0 468,420

Page 2

Schedule F (Form 990) 2016

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

1 (a) Name of organization	ne of (b) IRS code ation section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		EAST ASIA	PROGRAM	343,000 WIRE	WIRE			
(3)		SOUTH ASIA	PROGRAM	47,000 WIRE	WIRE			
(6)		NORTH AMERICA	PROGRAM	20,000	20,000 CHECK			
(4)								
(2)								
(9)								
6								,
(8)								
(6)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(46)								

0 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recogr by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities

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Schedule F (Form 990) 2016

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Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2016

Part III Grants ar

(h) Method of valuation (book, FMV, appraisal, other)																		Schedule F (Form 990) 2016
(g) Description of noncash assistance																		Sched
(f) Amount of noncash assistance												-						
(e) Manner of cash disbursement	WIRE																	
(d) Amount of cash grant	58,420 WIRE																	
(c) Number of recipients	4																	
of grant or assistance (b) Region (c) Number of recipients	EAST ASIA																	
(a) Type of grant or assistance	(1) SUPPORT	(6)	(4)	(2)	(9)	6	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	

Page	4

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)		☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	1	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)		☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621 Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)		☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)		☑ No

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P	ar	†	V	T

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method;
amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and
Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional
information. See instructions.

WE HAVE DISPATCHED MISSIONARIES AFTER THE INTERNAL TRAINING AND EACH MISSIONARY IS REQUIRED TO REPORT THE
EXPENSE ON MONTHLY BASIS. THE MISSIONARY COORDINATOR MAKES ANNUAL VISITATION TI INSURE THE ACCURACY AND
RELIABILITY OF THE RECORD KEEPING. ALSO WE REVIEW THE PROJECT FOR THE REASONABLENESS AND FOR THE ITS
DOCUMENTATION. ALL FOREIGN OPERATIONS REQUIRE TO HAVE AN ACCOUNTANT AND CASHIER SEPARATELY AND IT INSURES
THE MIS-HANDLING OF THE FUNDS AS WELL AS THE REPORTING THE FINANCIAL ACTIVITIES.
·····

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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.

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

20 16	Open to Public
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Inspection

Employer Identification number

%□ SUPPORTING MINISTRY LEADERSHIP DEVELOP LEADERSHIP DEVELOP Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form (h) Purpose of grant or assistance RADIO AIR TIME 91-1550156 ✓ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash 58,560 20,960.00 55,500 30,198 grant Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? General Information on Grants and Assistance For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) 54-1852027 (p) EIN CORNERSTONE MINISTRIES INTERNATIONAL (1) CHINA HARVEST, PO BOX 1224 1 (a) Name and address of organization (3) MAI, 15215 DIAMONDHEAD CT (2) I-MEDIA, 9812 FALLS ROAD COLORADO SPRINGS, CO 80921 3114-116, POTOMAC, MD 20854 (4) KRIN, PO BOX 142 WITCHITA, KS 67277 PEYTON, CO 80831 Partl Part II <u>o</u> N 9 E **⊚** 9 5 (12) Ξ

Schedule I (Form 990) (2016)

Cat. No. 50055P

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)

Part III Grants an

Part III can be duplicated it additional space is needed.	i space is needer	֓ ֖֖֖֖֖֖֖֖֖֖֖֓֞			
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 MISSIONARY SUPPORT	2	18,928.76	0		
2 BIBLE TRANSLATION	-	54,000.00	0		
8					
4					
ı,					
9					
L					
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	the information r	equired in Part I, lin	e 2; Part III, columr	(b); and any other additi	onal information.
WE RECEIVE THE REPORTS FROM MISSION ORGANIZATIONS PERIODICALLY AND RECEIVE RECEIPTS FOR THE FUND TRANSMIT FOR RADIO PROJECT.	TIONS PERIODICAL	LLY AND RECEIVE REC	EIPTS FOR THE FUND	TRANSMIT FOR RADIO PRO	JECT.
OUR FIELD WORKERS MONITOR RADIO OUTPUT.					
	1		/		
	1				
					Schedule I (Form 990) (2016)

SCHEDULE 0 (Form 990 or 990-EZ)

Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047 2016 Open to Public Inspection

Employer identification number

CORNERSTONE MINISTRIES INTERNATIONAL	91-1550156	
LINE 4d, Part III, Other Program Services, Form 990		
(Code 4) (Total Expenses: 149,225) (Grants and Allocations: 112,5	00)	
WE HAVE NETWORKED WITH THE EXISTING LOCAL LEADERS AND PASTORS OF THE PERSECUTE	D CHURCH IN NORTH KOREA AND	
TO ASSIST THEM FURTHERING IN CHURCH PLANTING AND PASTORING CHURCHES IN THEIR COU	MMUNITIES. WE FACILITATED AND	
ASSISTED THOSE PASTORS WHO ARE WILLING TO PLANT A CHURCH IN THEIR NEIGHBORHOOD.	GOD HAS ALLOWED TO TRAIN 114	
UNDERGROUND CHURCH LEADERS FROM NORTH KOREA IN 11 DIFFERENT LOCATIONS. WE HAVE SUPPORTED 60 PASTORS		
IN 28 REGIONS. KRIN HAS FORMED TO FACILITATE CHURCHES AROUND THE WORLD TO PREPARI	FOR THE OPENING OF NORTH	
KOREA AND MEETING OF GLOBAL NETWORK WAS HELD TO LEARN HOW TO PLANT THE CHURCH	IN NORTH KOREA.	
Line 4d, Part III, Other Program Services, Form 990		
(Code 5) (Total Expenses: 120,927) (Grants and Allocations: 46,000)		
PROVIDING HUMANITARIAN ASSISTANCE TO NEEDY PEOPLE IN NORTH KOREA, REFUGEES OF NO	ORTH KOREA IN CHINA ALONG	
THE BORDER, DEFECTORS OF NORTH KOREA IN SOUTH KOREA, NORTH KOREAN ORPHANS AND	WIDOW IN CHINA, AND OTHER	
NATIONS THROUGH HUMANITARIAN ASSISTANCE WE SHARE THE LOVE OF JESUS CHRIST AND TO	MEET THEIR IMMEDIATE SURVIVAL	
NEEDS. WE ASSIST THE NEEDY PEOPLE IN THE GOSPEL RESTRICTED NATIONS WITH FOODS, CL	OTHERS, MEDICINES, NECESSITY ITEM	
WE ALSO PARTNERING WITH OTHER MINISTRIES, NGO, MISSIONARIES, AND ORGANIZATION. WE F	PROVIDED OVER 40 TONS OF	
RICE TO ORPHANS AND SENT 200 HANDCRAFTED WOVEN SHAWL. 400 CHILDREN RECEIVED CHRI	STMAS GIFT AND MANY	
CHILDREN WERE FED EVERY MONTHS. WE PROVIDED OVER 50 TONS OF COAL TO THE ORPHANA	GE IN CHINA.	
<u></u>		
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