Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Openito Public Inspection

Α	For th	e 2018 calendar year, or tax year beginning	and	l ending		
В	Check if	C Name of organization			D Employer identif	fication number
	Addre					1206110
Ļ	chan	90 Doing business as				1326440
Ļ	retur	Number and street (of PU box it mail is not de	elivered to street address)	Room/su		
L	Final returi termi	√ F O BOX 17020		<u> </u>	(813	
	ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross receipts \$	601,050,686.
Ļ	Amer	CDEARWAIER, FL 33/02			H(a) Is this a group	
L	Appli tion pend	F Name and address of principal officer Same	E AS C ABOVE		for subordinate	_ = =
	pend	<u> </u>			H(b) Are all subordinates	ıncluded? Yes No
1	Tax-ex	cempt status X 501(c)(3) 501(c) ((insert no) 4947(a)(1)	or ()5	If "No," attach	a list (see instructions)
J	Webs	ite: N/A		<u></u>	H(c) Group exempti	
			ssociation Other >	L Ye	ear of formation: 2006	M State of legal domicile, \mathbf{FL}
ĮP.	art][<u> </u>		
	. 1	Briefly describe the organization's mission or most			TEE MAKES GRA	
Governance	2	CHARITABLE PURPOSES TO NAT	<u> TIONAL CHRISTIAN</u>	I CHA	RITABLE FOUNI	DATION,
Š	2	Check this box If the organization disco	ntinued its operations or dispo	sed of mo	ore than 25% of its net as	ssets
۶	3	Number of voting members of the governing body	(Part VI, line 1a)		3	11
		Number of independent voting members of the go	verning body (Part VI, line 1b)		4	0
Activities &	5 5	Total number of individuals employed in calendar y	- ·		5	0
	6	Total number of volunteers (estimate if necessary)	,		6	0
ŧ	7 a	Total unrelated business revenue from Part VIII, co	lumn (C), line 12	111/	110 78	75,723,714.
Š	(b	Net unrelated business taxable income from Form	` ''	1114	76	0.0.0.0.4.5.4
	 				Prior Year	Current Year
	. 8	Contributions and grants (Part VIII, line 1h)	RECEIVED) [353,841,808.	273,405,356.
Bovenie	9	Program service revenue (Part VIII, line 2g)		0.	0.	
ğ	10	Investment income (Part VIII, column (A), lines 3, 4.	76 NOV 25 2019	280-81	73,202,274.	
ď				ᆲ	66,080,616.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c		၂립 ㅏ	493,124,698.	
_	12	Total revenue - add lines 8 through 11 (must equal			214,937,578.	295,778,622.
	13	Grants and similar amounts paid (Part IX, column (∤	0.	0.
	14	Benefits paid to or for members (Part IX, column (A	•	-	0.	0.
ď	15	Salaries, other compensation, employee benefits (I		}-		
Fynoneoe	16a	Professional fundraising fees (Part IX, column (A), I		<u> </u>	0.	0.
Ş	i b	Total fundraising expenses (Part IX, column (D), line	· · · · · · · · · · · · · · · · · · ·	<u>0.</u>	14 004 770	11 566 310
ш	''	Other expenses (Part IX, column (A), lines 11a-11d	·	-	14,004,779.	11,566,310.
	18	Total expenses Add lines 13-17 (must equal.Part I	X, column (A), line 25)	-	228,942,357.	
	19	Revenue less expenses Subtract line 18 from line	12		<u>264,182,341.</u>	130,537,577.
5	S			<u> </u>	Beginning of Current Year	End of Year
Assets	၌ 20	Total assets (Part X, line 16)			830,427,156.	
t As	ਸੂ 21	Total liabilities (Part X, line 26)		ļ_	<u>11,896,305.</u>	•
Net Net		Net assets or fund balances Subtract line 21 from	line 20		818,530,851.	827,245,608.
		Signature Block				
	•	alties of perjury, I declare that I have examined this return,				y knowledge and belief, it is
tru	e, corre	ct, and complete Declaration of preparer (other than office	er) is based on all information of w	hich prepa	rer has any knowledge	
		Z Brokke			u/u	12019
Sig	a n	Signature of officer	-		Date	·
He		BRADLEY ORR, PRESIDENT	, NCF CORP			
		TType or print name and title				
		Print/Type preparer's name	Preparer's signature		Date Check	PTIN
Pai	d	10	"		ıt self-emplo	oyed
	parer	Firm's name			Firm's EIN	
	Only	Firm's address				
,,,,	,	2			Phone no	
Ma	v the !	RS discuss this return with the preparer shown abo	ve? (see instructions)		11 110110 110	Yes No
						Form 990 (2018)
632	001 12-3	31-18 LHA For Paperwork Reduction Act Notice	e, see the separate instruction	אוזע.		Form 330 (2018)

Forn	n 990 (2018) NCF CHARITABLE TRUST	20-4326440	Page 2
	rt III) Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
_			
1	Briefly describe the organization's mission	ONINE CHIRTCHE	2 27
	THE TRUSTEE MAKES GRANTS FOR CHARITABLE PURPOSES TO NATI		
	CHARITABLE FOUNDATION, INC. AND OTHER CHARITABLE ORGANIZ	ATIONS IN TH	<u>E</u>
	SAME CLASS.		
			
	Del Alexander de la companya de la c		
2	Did the organization undertake any significant program services during the year which were not listed on the		ree .
	prior Form 990 or 990-EZ?	L Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
-	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		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	rs, the total expenses, ar	nd
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 295,778,622. including grants of \$ 295,778,622.) (Rever	nue \$)
	SUPPORTED THE MISSION AND PERFORMED FUNCTIONS OF THE NAT		TAN
	CHARITABLE FOUNDATION, INC. BY MAKING GRANTS TO IT AND C		
			<u> </u>
	IN THE SAME CLASS OF TAX-EXEMPT CHARITABLE ORGANIZATIONS	•	
		<u> </u>	
			
		<u> </u>	
4b	(Code) (Expenses \$) (Rever	nue \$)
		·	
4c	(Code) (Expenses \$	nue \$)
			
			
	· 		
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶ 295,778,622.		
		Form 9	90 (2018)
		101111	- 1-01

NCF CHARITABLE TRUST 20-4326440 Form 990 (2018)

<u>Pa</u>	TIVI Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	└
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	}	1	1
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		ł	Ì
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	_5	ļ	X
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>	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	ĺ	ĺ	l
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			١
	Schedule D, Part III	8	ļ	X
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?	l .		٠,,
	If "Yes," complete Schedule D, Part IV	9_	-	X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			34344
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a	Х	}
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	I Id	41	
Ü	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
_	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total	11.0		
Ū	assets reported in Part X, line 169 If "Yes," complete Schedule D, Part VIII	11c		х
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	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
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	_X_	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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			7.7
_	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
!5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	45		х
	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15_		
16		16		х
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
'	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
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		х
9	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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 12 if "Yes " complete Schedule I. Parts I and II	21	х	

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Pai	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			Ħ
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
		23		х
04-	Schedule J	20		
24 a	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	040		x
	Schedule K If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		\vdash
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		ľ	1
	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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			1
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"		'	
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1		ĺ
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Х	<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			i
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
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	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	[
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			ᆜ
	1 1 .		Yes	No
1a	Zitter tile itemiter i operiter it dette zitter e it tile opprise i	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
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Form	990 (2018) NCF CHARITABLE TRUST 20-4326	440	Р	age 5
Par				
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_	X	
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	ĺ		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
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)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a_		Х
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		Х
С	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		1	
	any contributions that were not tax deductible as charitable contributions?	6a	ļ	Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
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 and services provided to the payor?	7a		Х
	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	ļ	X
	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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<u>7h</u>		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		l
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>	├──	
a	Did the sponsoring organization make any taxable distributions under section 4966?	<u>9a</u> 9b		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	90		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12		ĺ	
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1	1	
11	Section 501(c)(12) organizations. Enter			
'' a	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	<u> </u>		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15	L	X
	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	L	X
	If "Yes," complete Form 4720, Schedule O	L	255	
		Form	990	(2018)

Form 990 (2018)

NCF CHARITABLE TRUST

Pai	T VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a '	'No" re	espons	ie
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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 1a 1	į		1
	If there are material differences in voting rights among members of the governing body, or if the governing		1	1
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2_		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
_	of officers, directors, or trustees, or key employees to a management company or other person?	3		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
ь	the first the first threat to appropriate American and place on			
D	persons other than the governing body?	7b		х
٥	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
8	The governing body?	8a	X	一
a	Each committee with authority to act on behalf of the governing body?	8b	X	
ь	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			$\overline{}$
9	·	9		x
Sec	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	tion 21.1 oncoo (This Section & requests information about policies not regulied by the internal nevertice code.)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
b	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		1
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		х
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
С		12c	X	
40	In Schedule O how this was done Did the organization have a written whistleblower policy?	13	X	
13		14	X	$\overline{}$
14	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	'-		
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	process, and process of the control	15a		<u> </u>
	The organization's CEO, Executive Director, or top management official			X
b	Other officers or key employees of the organization	15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	160		X
_	taxable entity during the year?	16a		
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	,		1
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	16b		
500	exempt status with respect to such arrangements?	100		
	tion C. Disclosure			—
17	List the states with which a copy of this Form 990 is required to be filed FL, CA	only)		
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s	Jilly) i	.vanal	,,,,
	for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. X Upon request. Other (explain in Schedule O)			
4.0		finana	ادا	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	manc	iai	
00	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records NCF CORPORATION - (813) 567-1499			
	P O BOX 17820, CLEARWATER, FL 33762			
832006	3 12-31-18	Form	990	(2018)

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

X Check this box if neither the organization is	or any related	orga	nıza	tion	cor	nper	sate	ed any current officer, d	rector, or trustee	
(A)	(B)			- (0	C)			(D)	(E)	(F)
Name and Title	Average	(do	not o	Pos	sitior more	than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	s boti	n an	compensation	compensation	amount of
	week		cer ar	nd a d	irecto	ar/trus T	166)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	ğ	۵.			ied G		organization	(W·2/1099-MISC)	from the
	related	stee	ruste		۱	Bens		(W-2/1099-MISC)		organization
	organizations	a tr	onal t		l go	E 8				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Ē			organizations
(1) NCF CORPORATION, TTEE	20.00	=	트	0	×	主章	<u> </u>			
TRUSTEE		1	x					0.	0.	0.
		_				┡	<u> </u>			
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Rar	(A) Name and title	(B) Average			(o Pos	C) ition			(D) Reportable	es (continued) (E) Reportable		(F) Estimated	_
		hours per week (list any hours for related organizations below line)	tee or director	, unle	ss pe	rson (irecto	Highest compensated approach	tee)	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	l s	amount of other compensation from the organization and related organizations	
			i										
													_
		-				-							_
													_
													_
	Sub-total					<u> </u>	I	>	0.		0.	0.	
	Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A						>	0.		0.	0.	
2	Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable		(_)
												Yes No	_
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	uch individual									J	3 X	
4	For any individual listed on line 1a, is the su and related organizations greater than \$150									he organization		4 X	
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	•				-		elate	ed organization or individ	dual for services]	5 X	
	tion B. Independent Contractors												_
1	Complete this table for your five highest co the organization Report compensation for	•	•								ensati	on from	
	(A) Name and business	address	NO	ONE	3				(B) Description of s	ervices	Co	(C) ompensation	
												-	_
													_
											-		_
2	Total number of independent contractors (i	_	ot lin	nited	l to			ted	above) who received mo	ore than			Ī
	\$100,000 of compensation from the organi	zation >					,					Form 990 (2018	.)

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Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under (B) (C) Unrelated Total revenue Related or exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues 1c c Fundraising events 1d 9,340,266. d Related organizations e Government grants (contributions) All other contributions, gifts, grants, and 264,065,090 similar amounts not included above 263,498,507. g Noncash contributions included in lines 1a-1f \$ 273,405,356. h Total. Add lines 1a-1f Business Code Program Service 900003 f All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 5,090,465. 5,090,465. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 2,791. 6 a Gross rents 34,031. **b** Less rental expenses <31,240.> c Rental income or (loss) <31,240.> <31,240.> d Net rental income or (loss) (II) Other 7 a Gross amount from sales of (i) Securities 240,319,224. 69,385,236. assets other than inventory **b** Less cost or other basis 123,085,386. 40,048,760. and sales expenses 29,336,476, 117,233,838. c Gain or (loss) 63,512,463. 83,057,851. 146,570,314, d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 12,211,251. 12,211,251. UBTI PASSTHROUGH INCOME 900003 11 a 900099 636,363. 636,363. OTHER INCOME d All other revenue 12,847,614. Total. Add lines 11a-11d 83,026,611. 437,882,509. 5,726,828. 75,723,714. Total revenue See instructions Form 990 (2018)

Part IX Statement of Functional Expenses

Sect	tion 501(c)(3) and 501(c)(4) organizations must com			mplete column (A)	
	Check if Schedule O contains a respon	nse or note to any line in (A)	this Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		005 550 600]	
	and domestic governments See Part IV, line 21	295,778,622.	295,778,622.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
_	individuals See Part IV, lines 15 and 16	<u> </u>			· · · · · · · · · · · · · · · · · · ·
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)			<u> </u>	
7 8	Other salaries and wages Pension plan accruals and contributions (include		. 	 	<u> </u>
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management		İ		
b	·	89,956.		89,956.	
С					
d	· · · ·				
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 Sch O)	273,032.		273,032.	
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel			ļ. -	
18	Payments of travel or entertainment expenses			1	
	for any federal, state, or local public officials	<u> </u>		 	
19	Conferences, conventions, and meetings	10 670		10,670.	
20	Interest	10,670.	-	10,670.	
21	Payments to affiliates				
22 23	Depreciation, depletion, and amortization Insurance				
23 24	Other expenses Itemize expenses not covered				-
24	above. (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O`)´	44 472 222		11 170 000	
а	TAXES	11,179,220.		11,179,220.	
b	MISCELLANEOUS EXPENSES	8,470.	<u> </u>	8,470.	
C	LICENSES & FEES	4,962.		4,962.	
d	All all a	<u> </u>		 	
e	All other expenses	307 344 932	295,778,622.	11,566,310.	0.
<u>25</u> 26	Total functional expenses Add lines 1 through 24e Joint costs Complete this line only if the organization	001,044,704.	233,110,022.	11,300,310.	
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here if following SOP 98-2 (ASC 958-720)				
			<u> </u>		

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	13,310,325.	1	7,762,543
2	Savings and temporary cash investments	18,585,923.	2	30,442,797
3	Pledges and grants receivable, net		3	· · · · · · ·
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,		<u> </u>	
"	trustees, key employees, and highest compensated employees Complete		1	
ľ	Part II of Schedule L	· 	5	
6	Loans and other receivables from other disqualified persons (as defined under			
"	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		ŀ	
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	Notes and loans receivable, net	29,053,277.	7	39,192,680
8 Ass	Inventories for sale or use	2370337277	8	33/132/000
_ I _		29,435.	9	27,886
9	Prepaid expenses and deferred charges Land, buildings, and equipment cost or other	25, 433.	-	27,000
108	015 500			
Ι.			10c	217,500
	100	320,3001	11	217,300
11	Investments - publicly traded securities	744,004,838.	12	737,612,715
12	Investments - other securities See Part IV, line 11	744,004,030.	13	737,012,713
13	Investments - program-related See Part IV, line 11			
14	Intangible assets	24,916,858.	14 15	19,787,241
15	Other assets See Part IV, line 11	830,427,156.	16	835,043,362
16	Total assets. Add lines 1 through 15 (must equal line 34)	4,539,268.	17	2,973,374
17	Accounts payable and accrued expenses	4,333,2001	18	2,513,514
18	Grants payable	463,340.	19	461,791
19	Deferred revenue	103,3101	20	401,751
20	Tax-exempt bond liabilities		21	
21	Escrow or custodial account liability Complete Part IV of Schedule D			
န္ 22	Loans and other payables to current and former officers, directors, trustees,			
불	key employees, highest compensated employees, and disqualified persons			
Liabilities	Complete Part II of Schedule L	2,815,629.	22	0
23	Secured mortgages and notes payable to unrelated third parties	2,013,023.	23 24	
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	4,078,068.	25	4,362,589
	Schedule D	11,896,305.		7,797,754
26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	11,090,303.	26	1,131,134
- 1	, , , , , , , , , , , , , , , , , , , ,	}		
S S	complete lines 27 through 29, and lines 33 and 34.	818,530,851.	27	827,245,608
E 27	Unrestricted net assets	010,550,051.		021,245,000
28 10 28	Temporarily restricted net assets		28	
문 29	Permanently restricted net assets		29	
₫	Organizations that do not follow SFAS 117 (ASC 958), check here			
ō	and complete lines 30 through 34.			<u> </u>
30	Capital stock or trust principal, or current funds	-	30_	
ğ 31	Paid in or capital surplus, or land, building, or equipment fund		31	·
Net Assets or Fund Balances 22 28 29 30 31 32 32 32 33 33 34 35 35 35 35 35 35 35 35 35 35 35 35 35	Retained earnings, endowment, accumulated income, or other funds	010 520 051	32	027 245 600
33	Total net assets or fund balances	818,530,851.	33	827,245,608
34	Total liabilities and net assets/fund balances	830,427,156.	34	835,043,362

Form **990** (2018)

20-4326440 Page 12 NCF CHARITABLE TRUST Form 990 (2018) Part XI Reconciliation of Net Assets X Check if Schedule O contains a response or note to any line in this Part XI 437,882,509. Total revenue (must equal Part VIII, column (A), line 12) 307,344,932. 2 Total expenses (must equal Part IX, column (A), line 25) 130,537,577. 3 Revenue less expenses Subtract line 2 from line 1 818,530,851. 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) <20,093,658.> 5 Net unrealized gains (losses) on investments 5 6 Donated services and use of facilities 6 7 Investment expenses 8 Prior period adjustments <101,729,162.> Other changes in net assets or fund balances (explain in Schedule O) 9 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, 827,245,608. 10 column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes No Accounting method used to prepare the Form 990 Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Х 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Consolidated basis Both consolidated and separate basis Separate basis X 2b b 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 on a separate basis, consolidated basis, or both Both consolidated and separate basis X Consolidated basis Separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, X review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Х За Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits Form 990 (2018)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization **Employer identification number** NCF CHARITABLE TRUST 20-4326440 Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(IV). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g a X Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed (i) Name of supported (ii) EIN (III) Type of organization (v) Amount of monetary (vi) Amount of other your governing document (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions)) NATIONAL CHRISTIAN CHARITABLE FOUNDATI 58-1493949 X 226,519,001.

226.519.001.

0.

Sch P	art II Support Schedule for	Organizations	Described in	Sections 170	b)(1)(A)(iv) and	170(b)(1)(A)(v	i) Page/2
<u></u>	(Complete only if you checke	_					• /
	fails to qualify under the tests				,		
Se	ction A. Public Support			· · · · · · · · · · · · · · · · · · ·			
_	indar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and	(a) 2014	(b) 2013	(6) 2010	(0) 2017	(6) 2010	(i) Total
•	membership fees received (Do not					/	1
	include any "unusual grants ")					/	
^				-	 	 	
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to	\					
_	or expended on its behalf					 	
3	The value of services or facilities						
	furnished by a governmental unit to					1	
	the organization without charge				/	<u> </u>	
4	Total. Add lines 1 through 3	<u> </u>					
5	The portion of total contributions	/					
	by each person (other than a			1			
	governmental unit or publicly)	N				
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,			/	1		
	column (f)				<u> </u>	ļ	
_6	Public support. Subtract line 5 from line 4						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4		·	\ /			
8	Gross income from interest,			X			
	dividends, payments received on			/ \			}
	securities loans, rents, royalties,			\			
	and income from similar sources			\			
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
. •	or loss from the sale of capital			,	1		:
	assets (Explain in Part VI)	l ,	7	1	\		
11	Total support. Add lines 7 through 10			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
	Gross receipts from related activities,	etc (see instruction	ns)		<u></u>	12	·
	First five years. If the Form 990 is for			d fourth or fifth ta	ıx vear as a sectio		
	organization, check this box and stop	- /	7 mot, 5000ma, am	a, 10a1.11, 01 111.11	,00		ightharpoonup
Sec	ction C. Computation of Publi	c Support Per	centage		\		
	Public support percentage for 2018 (I			olumn (fl)	$\overline{}$	14	%
	Public support percentage from 2017			0.0 (1)/	Ì	15	%
	33 1/3% support test - 2018. If the	/		n line 13, and line 1	14 is 33 1/3% or m		
. 00	stop here. The organization qualifies				14 10 00 17 07 01 11	1910, 0110011 11110 20	▶ □
h	33 1/3% support test - 2017. If the o				line 15 is 33 1/3%	or more check th	is hox
	and stop here. The organization qual	•			1110 10 13 00 17070	YOU MOTO, GRICOK III	.5 DOX
170	10% -facts-and-circumstances test		•		13 16a or 16b	and line 1/1/ is 1/1%	or more
ı, a	and if the organization meets the "fac	-				1	
	· /		•	•	•	It vi now the organ	IIZation
_	meets the "facts-and-circumstances"	•	•		-	17a and line 15 is	100/ 0"
D	10% -facts-and-circumstances test	-					
	more, and if the organization meets the					1	,
4-	organization meets the "facts-and-circ		•	•		"	
<u> 18</u>	Private foundation. If the organization	n did not check a l	box on line 13, 16	a, 16b, 17a, or 17b			
	/				Scho	edule A (Form 990	or 990-EZ) 2018
	/						\
	/						\
	/						\
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			1 /1				`

Part IV Supporting Organizations

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

section A. An oupperting organization.	Section	A. All	Supporting	g Organization:
--	---------	--------	------------	-----------------

- 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
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 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 detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes	No
	[]
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ļ	X
	
<u> </u>	Х
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	}
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	X
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	$\overline{\mathbf{x}}$
	X
	X
	X
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	X
	X
	X
	X

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Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 NCF CHARITABLE TRUST 20-4326440 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2018 from Section C, line 6 Line 8 amount divided by line 9 amount 10 (i) (ii) (iii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2018 Amount for 2018 1 Distributable amount for 2018 from Section C, line 6 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI) See instructions 3 Excess distributions carryover, if any, to 2018 a From 2013 **b** From 2014 c From 2015 d From 2016 e From 2017 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2018 distributable amount i Carryover from 2013 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2018 from Section D. a Applied to underdistributions of prior years **b** Applied to 2018 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2018, 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 2018 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2019. Add lines 3j and 4c 8 Breakdown of line 7 a Excess from 2014 b Excess from 2015

Schedule A (Form 990 or 990-EZ) 2018

c Excess from 2016d Excess from 2017e Excess from 2018

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

►Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization Employer identification number NCF CHARITABLE TRUST 20-4326440 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the |Partil organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year SEE SCHEDULE O 1 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? No Yes [Part] II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a b Total acreage restricted by conservation easements 2h c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ▶ \$ 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)? No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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Schedule D (Form 990) 2018

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Sche		RITABLE TRU							26440	
Par	tillij Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	asures, or Oth	er Sir	nilar A	ssets	(continue	e <i>d</i>)
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the f	following that are a	signific	ant use	of its co	ollection ite	ems
	(check all that apply)									
а	Public exhibition	d	• <u> </u>	Loan or exc	hange programs					
b	Scholarly research	е	, 🔲	Other						
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how th	ey further th	ie organization's ex	empt p	urpose i	in Part)	XIII	
5	During the year, did the organization solicit of	r receive donations of	of art, his	storical treas	sures, or other simil	ar asse	ets		_	
	to be sold to raise funds rather than to be ma	aintained as part of the	he organ	ization's co	llection?				Yes	No_
Par	TIVI Escrow and Custodial Arran	gements. Comple	ete ıf the	organizatio	n answered "Yes" o	on Forn	n 990, P	art IV, I	ne 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for c	contributions	s or other assets no	t inclu	ded	_	-	
	on Form 990, Part X?								Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing to	able		_				
						L			Amount	
С	Beginning balance					L	1c			
d	Additions during the year					L	1d			
е	Distributions during the year					L	1e			
f	Ending balance					L	1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for e	scrow or cu	istodial account lial	oility?			Yes	No No
ь	If "Yes," explain the arrangement in Part XIII	Check here if the ex	planatio	n has been	provided on Part XI	11				
(Par	Endowment Funds. Complete	f the organization an	swered	"Yes" on Fo	rm 990, Part IV, line	e 10				
		(a) Current year	(b) P	rior year	(c) Two years back	(d) T	hree year	s back	(e) Four ye	ears back
1a	Beginning of year balance									
ь	Contributions									
С	Net investment earnings, gains, and losses					ļ				
d	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 curr	ent year end balance	e (line 1g	, column (a)) held as					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organiza	ation that	t are held ar	nd administered for	the org	ganizatio	n		
	by								Υ.	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(11)	
b	If "Yes" on line 3a(ii), are the related organiza	itions listed as requir	ed on So	chedule R?					3b	
4	Describe in Part XIII the intended uses of the	organization's endo	wment fi	unds						
	t _t VI∎ Land, Buildings, and Equipm	ent.								
	Complete if the organization answere	d "Yes" on Form 990), Part IV	, line 11a S	ee Form 990, Part	X, line '	10			
	Description of property	(a) Cost or o					nulated		(d) Book v	/alue
		basis (investr	nent)	basis	(other)	depreci	ation			
1a	Land									
	Buildings	217,	500.						217	,500.
	Leasehold improvements	·								
	Equipment									
	Other			-				\top		
	. Add lines 1a through 1e (Column (d) must e	gual Form 990 Part	X colum	n (B) line 1	Oc.)			▶	217	,500.

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 NCF CHARITA	BLE TRUST		20	-4326440	Page
PartiVII Investments - Other Securities.				-,	
Complete if the organization answered "Yes"	on Form 990, Part IV, III	ne 11b See Form 990, F	Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	luation Cost or en	d-of-year market v	alue
(1) Financial derivatives					
(2) Closely-held equity interests	332,601,246	COST			
(3) Other					
(A) LLCS AND PARTNERSHIPS	404,852,413	. COST		_	
(B) ALTERNATIVE					
(C) INVESTMENTS/HEDGE FUNDS	159,056	COST			
(D)					-
(E)					
(F)					
(G)					
(H)					
Total (Col. (b) must equal Form 990, Part X, col (B) line 12)	737,612,715				
Part VIII Investments - Program Related.		<u> </u>			
Complete if the organization answered "Yes"	on Form 990. Part IV. lir	ne 11c See Form 990. P	art X. line 13		
(a) Description of investment	(b) Book value		luation Cost or en	d-of-year market v	alue
(1)					-
(2)					
(3)					
(4)		<u>† </u>			
(5)					
(6)					
(7)		 			
(8)		<u> </u>			
(9)	-		·-		
Total (Col (b) must equal Form 990, Part X, col (B) line 13)	-				
[PartilX] Other Assets.	<u> </u>				
Complete if the organization answered "Yes"	on Form 990 Part IV Jir	e 11d. See Form 990. P	art X line 15		
	Description	10 10 000 10111 000,1	<u> </u>	(b) Book va	lue
(1)				(0)	
	<u> </u>				
(2)					
(3)		— <u>—</u> ··· — —			
(4)					
(5)					
(6)					
(7)	_ 				
(8)				-	
(9)					
Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.	2 15.)			l	
Complete if the organization answered "Yes"	on Form 990, Part IV, Iir		990, Part X, line 25		
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2) CHARITABLE GIFT ANNUITY PA	AYABLE	4,362,589.			
(3)					
(4)]			
(5)					

(6) (7) 4,362,589. ▶ Total. (Column (b) must equal Form 990. Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the 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.

Schedule D (Form 990) 2018

20-4326440 Page 4 NCF CHARITABLE TRUST Schedule D (Form 990) 2018 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 1 Total revenue, gains, and other support per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part VIII, line 12 2 a Net unrealized gains (losses) on investments 2a 2b Donated services and use of facilities 2c c Recoveries of prior year grants 2d d Other (Describe in Part XIII) 2e Add lines 2a through 2d 3 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) 4c c Add lines 4a and 4b Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12. Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25 2 2a a Donated services and use of facilities 2b **b** Prior year adjustments 2c Other losses 2d d Other (Describe in Part XIII) 2e e Add lines 2a through 2d 3 Subtract line 2e from line 1 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 b Other (Describe in Part XIII) 4c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information PART X, LINE 2: THE FOLLOWING FOOTNOTE APPLIES TO THE CONSOLIDATED FINANCIAL STATEMENTS OF THE NATIONAL CHRISTIAN CHARITABLE FOUNDATION, INC., AND SUPPORTING ORGANIZATIONS: INCOME TAX EXPENSE IS RECORDED FOR ACTIVITIES THAT GENERATE UNRELATED BUSINESS INCOME. THE FOUNDATION GENERATES TAXABLE INCOME THROUGH INVESTMENT TRANSACTIONS. THE FOUNDATION ACCEPTS DONATIONS OF S-CORPORATION STOCK. DURING ITS HOLDING PERIOD, THE FOUNDATION RECEIVES TAXABLE DISTRIBUTIONS. FURTHER, A TAXABLE CAPITAL GAIN MAY BE GENERATED UPON THE SALE OF THE STOCK. SIMILARLY, THE FOUNDATION RECEIVES INTEREST IN LLCS THAT GENERATE TAXABLE INCOME. FOR THE YEARS ENDED DECEMBER 31, 2018 AND Schedule D (Form 990) 2018 832054 10-29-18

Schedule D (Form 990) 2018

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Employer identification number 20-4326440

NCF CHARITABLE	TABLE TRUST	ST					20-4326440
Part General Information on Grants and Assistance	nd Assistance	ļ					
1 Does the organization maintain records to substantiate the amount	to substantiate the		or assistance, the g	grantees' eligibility	for the grants or assis	of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for monit	oring the use of grant i	unds in the United	States			
[Pārt III] Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Domestic Organiz	ations and Domestic	Governments. C	omplete if the orga	anization answered "Y	'es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	\$5,000 Part II can	be duplicated if addition	onal space is neede	þ		-	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
NATIONAL CHRISTIAN CHARITABLE FDN,							
INC 11625 RAINWATER DRIVE; STE 500 - ALPHARETTA, GA 30009	58-1493949	501(C)(3)	226519001	0.	CASH		SUPPORT OF GRANT-MAKING
NATIONAL CHRISTIAN FOUNDATION REAL							
PROPERTY, INC 11625 RAINWATER							
DRIVE; STE 500 - ALPHARETTA, GA 30009	58-2655939	501(C)(3)	228 000	0.	CASH		GRANT TO SUPPORT THE MISSION
NCF CORPORATION P O BOX 17820							THE PROGETTS OF THE
CLEARWATER, FL 33762	20-4281656	501(C)(3)	25,000.	0.	саѕн		
FAMILY GENERATIONS FOUNDATION							
11625 RAINWATER DRIVE, SUITE 500	0 0 0		7	ć			GRANT TO SUPPORT THE
ALFHAKETTA, GA 30009	4/-32/3330	2)100	1,367,000.	0	CASH		NOTASTE
GLOBAL GENEROSITY, INC.							
11625 RAINWATER DRIVE, SUITE 500							GRANT TO SUPPORT THE
ALPHARETTA, GA 30009	47-5209151	501(C)(3)	100,000.	.0	САЅН		MISSION
LEO AND ANGIE WELLS FOUNDATION,							
INC 5445 TRIANGLE PARKWAY -							GRANT TO SUPPORT THE
PEACHTREE CORNERS, GA 30092	46-3902337	501(C)(3)	3,319,016.	.0	САЅН		MISSION
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government or	ganizations listed in the	e line 1 table				▶ 12.
3 Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table			i		A
LHA For Paperwork Reduction Act Notice, see the Instructions for	, see the Instructi	ons for Form 990.					Schedule I (Form 990) (2018)

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States	Assistance to Govern	vernments and Organ	izations in the Un		(Schedule I (Form 990), Part II)		20-4320440 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOZO SUPPORTING ORGANIZATION FUND 11625 RAINWATER DRIVE, SUITE 500 ALPHARETTA, GA 30009	46-3233560	501(C)(3)	12,029.	0,	саѕн		GRANT TO SUPPORT THE MISSION
THE BELIEVERS SUPPORTING FOUNDATION - PO BOX 524 - ALPHARETTA, GA 30009	83-3353978	501(C)(3)	5,415,782.	0.	саѕн		GRANT TO SUPPORT THE MISSION
THE SIGNATRY 7171 W 95TH ST, SUITE 501 OVERLAND PARK, KS 66212	43-1890105 501(C)(3)	501(C)(3)	14,586,969.	0,	саѕн		GRANT TO SUPPORT THE MISSION
TMG FOUNDATION P.O. BOX 40 GRIDLEY, IL 61744	01-0750822 501(C)(3)	501(C)(3)	123,499.	0.	САЅН		GRANT TO SUPPORT THE MISSION
TRUSTBRIDGE GLOBAL FOUNDATION 111 2ND AVENUE NE, SUITE 360 ST. PETERSBURG, FL 33701	59-3498416	501(C)(3)	43,300,000.	.0	CASH		GRANT TO SUPPORT THE MISSION
WESTBROOK LEGACY SUPPORTING ORGANIZATION, INC 1411 S ORANGE BLOSSOM TRAIL - ORLANDO, FL 32805	46-4367032 501(C)(3)	501(C)(3)	780,113.	.0	CASH		GRANT TO SUPPORT THE MISSION
							Schedule I (Form 990)

04-01-18

Part III

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance PART I, LINE Part IV

THE ORGANIZATION DOES NOT MONITOR THE USE OF FUNDS GRANTED TO ORGANIZATIONS

IN THE UNITED STATES SINCE IT GRANTS FUNDS TO ORGANIZATIONS HERE ONLY IF

THOSE ORGANIZATIONS QUALIFY AS EXEMPT FROM FEDERAL INCOME TAX UNDER CODE

FOR ARE BOUND TO USE SUCH FUNDS ONLY SECTION 501(C)(3)AND THEREFORE, CHARITABLE, EDCATIONAL OR OTHER PURPOSES DESCRIBED IN THAT CODE RELIGIOUS,

SECTION

SCHEDULE M (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Inspection

Employer identification number

	NCF CHARITAB	LE TRU	ST		20-	<u>4326</u>	440	}
Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of c noncash contrib	determir	-	ts
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods					_		
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							_
10	Securities - Closely held stock	Х	79		APPRAISED I	FMV		
11	Securities · Partnership, LLC, or							
	trust interests	X	67		APPRAISED I	FMV_		
12	Securities · Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures			·—				
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial	X	1		APPRAISED I	FMV_		
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (OTHER ASSETS)	X	1		APPRAISED I	<u>FMV</u>		
26	Other							
27	Other ()							
28	Other (l			
29	Number of Forms 8283 received by the organiz	_	•					
	for which the organization completed Form 828	33, Part IV, D	Donee Acknowledg	ement 29				
_							Yes	No
30a	During the year, did the organization receive by		,, , , ,	,	•	1		
	must hold for at least three years from the date		l contribution, and	which isn't required to be us	ed for			
	exempt purposes for the entire holding period?	•				30a		X
	If "Yes," describe the arrangement in Part II				_	 —		
31	Does the organization have a gift acceptance p	=			ions?	31	X	
32a	Does the organization hire or use third parties of	or related org	ganizations to solic	cit, process, or sell noncash			إيا]
	contributions?					32a	X	
	If "Yes," describe in Part II							
33	If the organization didn't report an amount in co	olumn (c) for	a type of property	for which column (a) is chec	ked,			
	describe in Part II					_ll		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2018

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Schedule M (Form 990) 2018

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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. ► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

NCF CHARITABLE TRUST	20-4326440
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISS	ION:
INC. AND OTHER CHARITABLE ORGANIZATIONS IN THE SAME CLASS.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
SUPPORTED THE MISSION AND PERFORMED FUNCTIONS OF THE NATIO	NAL CHRISTIAN
CHARITABLE FOUNDATION, INC. BY MAKING GRANTS TO IT AND OTH	ER CHARITIES
IN THE SAME CLASS OF TAX-EXEMPT CHARITABLE ORGANIZATIONS.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE DRAFT FORM 990 IS PREPARED AND COMPARED WITH THE AUDIT	ED FINANCIALS.
THE DRAFT IS PROVIDED TO NCF'S CHIEF FINANCIAL OFFICER AND	GENERAL COUNSEL,
WHO PROVIDE FEEDBACK TO THE PREPARER. A FINAL FORM 990 IS	PROVIDED TO THE
BOARD OF DIRECTORS. FINALLY, THE FORM IS FILED WITH THE IN	TERNAL REVENUE
SERVICE.	
FORM 990, PART VI, SECTION B, LINE 12C:	
GENERAL COUNSEL FOR THE SUPPORTED ORGANIZATION MONITORS TR	ANSACTIONS FOR
THIS ORGANIZATION TO ASSURE THAT NO DIRECTOR, OFFICER, OR	KEY EMPLOYEE HAS
ANY INTEREST IN SUCH TRANSACTIONS.	
FORM 990, PART VI, SECTION C, LINE 19:	
NCF CHARITABLE TRUST'S (NCT'S) AUDITED FINANCIAL STATEMENT	S ARE AVAILABLE
ON NCF'S WEBSITE AND UPON REQUEST. NCT'S ARTICLES OF INCOR	PORATION ARE
AVAILABLE FROM THE SECRETARY OF STATE. NCT'S BYLAWS AND O	THER SIGNIFICANT
OPERATIONAL POLICIES ARE NOT AVAILABLE TO THE PUBLIC.	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization NCF CHARITABLE TRUST	Employer identification number 20-4326440
FORM 990, PART VI, LINE 15B	
THE ORGANIZATION DOES NOT ENGAGE IN A PROCESS FOR DETERMIN	ING
COMPENSATION FOR THE LISTED PERSONS BECAUSE IT PAYS NO COM	PENSATION TO
THEM.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
SHAREHOLDER DISTRIBUTIONS	43,176,926.
CHANGE IN VALUE OF ANNUITIES	-299,320.
BOOK TO TAX DIFF DUE TO UBIT-GAINS	-6,650,870.
BOOK TO TAX DIFF DUE TO UBIT-PASSTHRU	-75,725,715.
GAIN/LOSS RECONCILIATION	-63,228,753.
PRIOR YEAR AUDIT ADJUSTMENT	998,570.
ADJUSTMENT TO BALANCE	
TOTAL TO FORM 990, PART XI, LINE 9	-101,729,162.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2018

OMB No 1545-0047

Open to Public Inspection

Employer identification number $20-4326440\,$

Identification of Disregarded Entitles. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Parti

NCF CHARITABLE TRUST

Name of the organization

Department of the Treasury Internal Revenue Service

(a)	(q)	(0)	(p)	(e)	(1)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
K CHARITABLE FUND, LLC					
13560 MORRIS RD STE 1140					
ALPHARETTA, GA 30004	HOLDS INVESTMENTS	GEORGIA			NCF CHARITABLE TRUST
NCT-110, LLC					
PO BOX 85073					
RICHMOND, VA 23285	HOLDS A BUSINESS INTEREST	FLORIDA			NCF CHARITABLE TRUST
NCT-122, LLC					
4303 INNOVATION LOOP	HOLDS ROYALTIES FROM				
MARBLE FALLS, TX 78654	INTELLECTUAL PROP	FLORIDA			NCF CHARITABLE TRUST
PENALUNA FAMILY 4 SISTERS FOUNDATION, LLC					
1309 TECHNOLOGY PARKWAY					
CEDAR FALLS, IA 50613	HOLDS A BUSINESS INTEREST	IOWA			NCF CHARITABLE TRUST

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year Part II

(a)	(q)	(0)	(P)	(e)	(t)	(6)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)	12(b)(13) illed
of related organization		foreign country)	section	status (if section	entity	entity?	3,2
				501(c)(3))		Yes	N _o
NATIONAL CHRISTIAN CHARITABLE FDN, INC							
58-1493949, 11625 RAINWATER DRIVE; STE 500,							
ALPHARETTA, GA 30009-8678	GRANT MAKING	GEORGIA	501(C)(3)	7	N/A	•	×
NCCF SUPPORT, INC 58-2268010					NTL CHRISTIAN		
11625 RAINWATER DRIVE; STE 500					CHARITABLE FDN,		
ALPHARETTA, GA 30009-8678	GRANT MAKING	GEORGIA	501(C)(3)	11 I	INC.	×	
NATL CHRISTIAN FON REAL PROPERTY, INC	_				NTL CHRISTIAN		
58-2655939, 11625 RAINWATER DRIVE; STE 500,					CHARITABLE FDN,		
ALPHARETTA, GA 30009-8678	GRANT MAKING	GEORGIA	501(C)(3)	11 I	INC.	×	
NCF CORPORATION - 20-4281656					NTL CHRISTIAN		
P.O. BOX 172211					CHARITABLE FDN,		
TAMPA, FL 33672	CHARITABLE TRUSTEESHIP	FLORIDA	501(C)(3)	11 I	INC.	×	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	s for Form 990.				Schedule R (Form 990) 2018	Form 99(0) 2018

Part I Continuation of Identification of Disregarded Entities

(a)	(a)	(2)	(p)	(e)	(1)
Name, address, and EIN	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)		,	entity
BECKEL CHARITABLE ENTREP, LLC					
19730 GULF BLVD, #400					
INDIAN SHORES, FL 33785	HOLDS A BUSINESS INTEREST	FLORIDA		2	NCF CHARITABLE TRUST
SDL, LLC				!	
P.O.BOX 97365					
RALEIGH, NC 27624	HOLDS REAL ESTATE	NORTH CAROLINA		_~	NCF CHARITABLE TRUST
NCT-151, LLC					
2000 OAK INDUSTRIAL DRIVE NE					
GRAND RAPIDS, MI 49505	HOLDS A BUSINESS INTEREST	MICHIGAN			NCF CHARITABLE TRUST
NCT-136, LLC					
707 N. FRANKLIN ST. STE 800					
TAMPA, FL 33602	HOLDS A BUSINESS INTEREST	FLORIDA			NCF CHARITABLE TRUST
NCT-107, LLC					
18191 VON KARMAN AVE STE 300					
IRVINE, CA 92612	HOLDS A BUSINESS INTEREST	FLORIDA			NCF CHARITABLE TRUST
NCT-134, LLC					
5120 NORTH SHORE DR					
NORTH LITTLE ROCK, AR 72118	HOLDS A PROMISSORY NOTE	FLORIDA			NCF CHARITABLE TRUST
NCT-144, LLC					
6200 THE CORNERS PARKWAY					
NORCROSS, GA 30092	HOLDS A BUSINESS INTEREST	GEORGIA			NCF CHARITABLE TRUST
FF AGRICO, LLC					
531 COUNTY LINE ROAD					
LUTZ, FL 33549	HOLDS REAL ESTATE	FLORIDA			NCF CHARITABLE TRUST
NCT-142, LLC					
1112 CULBREATH ISLES DRIVE					
TAMPA, FL 33629	HOLDS A BUSINESS INTEREST	FLORIDA			NCF CHARITABLE TRUST
NCT-137, LLC					
227 SOUTH ROSE STREET STE 3300					
KALAMAZOO, MI 49007	HOLDS A BUSINESS INTEREST	GEORGIA			NCF CHARITABLE TRUST
				i	

NCF CHARITABLE TRUST

Schedule R (Form 990)

Part 1 Continuation of Identification of Disregarded Entities

(a)	(q)	(၁)	(p)	(e)	(1)
Name, address, and EIN	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
NCT-135, LLC					
205 NORWOOD AVENUE	7				
HOLLAND, MI 49424	HOLDS A BUSINESS INTEREST	MICHIGAN		X	NCF CHARITABLE TRUST
NCT-146, LLC					
1837 S. NEVADA AVE #219					
COLORADO SPRINGS, CO 80905	HOLDS A BUSINESS INTEREST	COLORADO			NCF CHARITABLE TRUST
NCT-149, LLC					
5254 PAOLI WAY					
LONG BEACH, CA 90803	HOLDS A BUSINESS INTEREST	CALIFORNIA			NCF CHARITABLE TRUST
NCT-148, LLC					
1425 DUPONT COMMONS CIRCLE NW					
ATLANTA, GA 30318	HOLDS A BUSINESS INTEREST	GEORGIA			NCF CHARITABLE TRUST
NCT-152, LLC					
27 NORTH WOODS RD					
DUNBARTON, NH 03046	HOLDS A BUSINESS INTEREST	NEW HAMPSHIRE			NCF CHARITABLE TRUST
ILLUMINE, LLC					
1956 SOUTH OCEAN LANE #12					
FT. LAUDERDALE, FL 33316	HOLDS A BUSINESS INTEREST	FLORIDA			NCF CHARITABLE TRUST
NCT-156, LLC					
2924 CHECY CHASE DR.					
HOUSTON, TX 77019	HOLDS A BUSINESS INTEREST	TEXAS			NCF CHARITABLE TRUST
NCT-153, LLC					
3912 BERESFORD RD					
CHARLOTTE, NC 28211	HOLDS A BUSINESS INTEREST	NORTH CAROLINA			NCF CHARITABLE TRUST
NCT-154, LLC					
2221 HEALTH DRIVE SW STE 2200					
WYOMING, MI 49519	HOLDS A BUSINESS INTEREST	MICHIGAN			NCF CHARITABLE TRUST
NCT-159, LLC			•		
2947 HOLIDAY COURT					
MORGAN HILL, CA 95037	HOLDS A BUSINESS INTEREST	TENNESSEE			NCF CHARITABLE TRUST

NCF CHARITABLE TRUST

Schedule R (Form 990)

Part I Continuation of Identification of Disregarded Entitles

			;		!
(a)	(g)	(0)	9	(e)	€
Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
NCT-158, LLC 3686 WILLOW SPRINGS COURT, NE GRAND RAPIDS, MI 49525	HOLDS A BUSINESS INTEREST	MICHIGAN			NCF CHARITABLE TRUST
TIVE DR, STE 230 609	HOLDS A BUSINESS INTEREST	FLORIDA			NCF CHARITABLE TRUST

NCF CHARITABLE TRUST

Schedule R (Form 990)

Part II Continuation of Identification of Related Tax-Exempt Organizations

							ı
(a)	(q)	(2)	(P)	(e)		(6)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	olling	controlled	
of related organization		foreign country)	section	status (if section	entity	organization?	1
				501(c)(3))		Yes No	- 1
NATIONAL CHRISTIAN FOUNDATION, INC		_			NTL CHRISTIAN		
30-0209280, 11625 RAINWATER DRIVE; STE 500,					CHARITABLE FDN,	=	
678	GRANT MAKING	GEORGIA	501(C)(3)	11 I	INC.	×	1
NCCF TRUST - 58-6370659					NTL CHRISTIAN		l
952 ECHO LANE; STE. 190					CHARITABLE FDN,		
	GRANT MAKING	TEXAS	501(C)(3)	11 I	INC.	X	ļ
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NCF CHARITABLE TRUST Schedule R (Form 990) 2018

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year Part III

Seneral or Percentage 90.06 63,53% 53,40% 99.00% managing ownership 3 Yes No × 8 Code V.UBI amount in box 20 of Schedule K·1 (Form 1065) N/AN/A N/A N/A Disproportionate Yes No allocations? × Ξ 10,012,455. 587,371. 7,102,948. 29,400,000. Share of end-of-year assets 923. 1,362, 685,240. 1,684,152, Share of total income 19, (related, unrelated, excluded from tax under sections 512-514) Predominant income (e) UNRELATED UNRELATED 512 512 (d)
(Direct controlling entity LLMAN REGENT HILLTOP ROAD CAPITAL, LLC DISTRIB, LP MBASSADOR 3IBRALTAR MATERIAL II, LLC (c)
Legal
domicile
(state or
foreign Z ΤX GA M Primary activity DISTRIBUTION INVESTMENTS INVESTMENTS 9 COMM R/E 38-3564602, 2221 HEALTH DRIVE 26-3945032, 2845 EAST DUPONT ROAD, FORT WAYNE, IN 46825 GIBRALTAR MATERIAL DISTRIB 26-0757326, 3340 PEACHTREE ROAD NE, STE 1400, ATLANTA Name, address, and EIN of related organization AMBASSADOR CAPITAL LLC INNOVATION LOOP, MARBLE ALLMAN REGENT II, LLC -SW, WYOMING, MI 49519 - 20-5261729, 4303 HILLTOP ROAD, LLC FALLS, TX 78654 30326 Ğ

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year Part IV

Organizations freated as a corporation of trust during the tax year	ırılığ üle tax year							
(a)	(q)	(c)	(p)	(e)	(J)	(6)	(h)	(i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	Type of entity (C corp, S corp,	Share of total income	Share of end-of-year	Percentage ownership	512(b)(13) controlled entity?
		country)	-	or trust)	•	assets		Yes No
BARNHART CRANE & RIGGING CO 62-1269879								_
2163 AIRWAYS BOULEVARD								
MEMPHIS, TN 38114	CRANE MFG & SOLUTIONS	ΝŢ	BARNHART CRANE	S CORP	<7,958,806.>	68,000,000.	100%	×
ARLINGTON RESEARCH CTR, INC 26-1347074								
2501 ROYAL GLEN COURT			ARLINGTON		•			
ARLINGTON, TX 76012	MEDICAL RESEARCH	ΤX	RESEARCH	S CORP	979,554.	2,611,400.	800.66	×
BOYD RETAIL CORPORATION - 59-3343233								
7586 WEST SAND LAKE RD			BOYD RETAIL					
ORLANDO, FL 82819	RETAIL CORP	FL	CORP.	S CORP	439,976.	505,890.	800.66	×
HARRIS COVENANT, INC 45-4104749								
8024 CALVIN HALL RD	HOLDS BUSINESS		HARRIS					
INDIAN LAND, SC 29707	INTEREST	SC	COVENANT	S CORP	<7,190,710.>	57,977,429.	71.54%	×
MAJESTIC ADVISORS, INC 38-3636590						-		
21 KERCHEVAL, STE 265			MAJESTIC					<u>. </u>
GROSSE POINTE FARMS, MI 48236	INV CONSULTING FIRM	MI	ADVISORS	S CORP	<32,093.>	278,000.	\$00.66	×

Schedule R (Form 990) 2018

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

General or Percentage managing ownership	\$00°66	91,86%	*00.66	100\$	58,83%	58,00%	800.66	75.00%	99.00\$
	N ×	×	×	×	×	×	×	×	×
Code V.UBI amount in box 20 of Schedule		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
h) portion- cations?	S ×	×	×	×	×	×	×	×	×
(g) Share of end-of-year assets	641 579	.0	0	827,475.	10,276.	1,144,340.	1,277,625.	.068,890	1,500,430.
(f) Share of total income		0	<19,933.>	<50,572.>	0.	0.	<138,848.>	0.	1,425,911.
(e) Predominant income (related, unrelated, excluded from tax under	UNRELATED	512	UNRELATED	UNRELATED	UNRELATED	512	UNRELATED	UNRELATED	UNRELATED
(d) Direct controlling entity	HIGDON INV,	TRICE FAMILY, LLC	SUNDI GIVING	SDL, LLC	ELK MEADOWS PARK CITY, LLC	FRANKLIN DEDICATION	FAITH GIVING, LLC	BOYD KUPP PARTNERS LAKESIDE VILLAGE I, LLC	KARIS MANAGEMENT GROUP, LLC
Legat domicile (state or foreign	SC	OK	CA	NC	CA	C.A.	NC	FL	NC
(b) Primary activity	INVESTMENTS	COMM R/E	INVESTMENTS	COMM R/E	INVESTMENTS	INVESTMENTS	INVESTMENTS	COMM R/E	INVESTMENTS
(a) Name, address, and EIN of related organization	HIGDON INVESTMENTS, LLC - 27-3191817, 133 RICHARD ROAD, CENTRAL, SC 29630	STEPHEN C. TRICE FAMILY, LLC - 73-1584658, 10 E. MEMORIAL ROAD, BUILDING B, OKLAHOMA CITY, OK 73114	SUNDT GIVING, LLC - 27-4384973, 9090 LA JOLLA SHORES LANE, LA JOLLA, CA 92037	SDL, LLC - 27-4168925 P.O. BOX 97365 RALEIGH, NC 27624	ELK MEADOWS PARK CITY, LLC - 45-2101622, 14 CORPORATE PLAZA, STE 200, NEWPORT BEACH, CA 92660	FRANKLIN DEDICATION FUND - 46-0873908, 31 WATERCRESS, IRVINE, CA 92603	FAITH GIVING, LLC - 45-3626992, PO BOX 1031, KERNERSVILLE, NC 27285	BOYD KUPP PARTNERS LAKESIDE VILLAGE I, LLC - 27-3425465, 14422 SHORESIDE WAY, STE 130, WINTER GARDEN, FL 34787	KARIS MANAGEMENT GROUP, LLC - 46-2517209, 1301 BRIAR CREEK RD, CHARLOTTE, NC 28205

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

13	General or Percentage managing ownership pariner?	\$00.66	<u> </u>	99.00\$	\$00.99	100\$	68,88	75.00\$	93,75%	800,06
5	General or managing partner?	×	×	×	×	×	×	×	<u>×</u>	<u> </u>
3	Code V-UBI camount in box 20 of Schedule - K-1 (Form 1065)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
(4)	Disproportion- ate allocations?		×	×	×	×	×	X	×	×
[5]	of /ear	12,477,000.	547,500.	368,194.	1,567,598.	99,888,110.	7.	1.	.0	11 538 225
9	Share of total income	.0	242,716.	158,360.	51,430.		<9,230.>	0.	0.	< 156 919 >
10)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	UNRELATED	UNRELATED	UNRELATED	UNRELATED	512	512	UNRELATED	UNRELATED	ONRELATED
5	trolling /	VANMAN FAMILY PARTNERSHIP, LTD.	ACD COSMETICS MANAGEMENT, LLC	ACD PATHOLOGY, INC.	LIBERTY DEBT FUND 1, LLC	THE SUMMIT FOUNDATION	PTZ LLC	PIKES PEAK MANAGER LCP, LLC	DCIIP, LLC	GIBRALTAR CABLE BARRIER SYSTEMS LP
3	Legal domicile (state or foreign	TX	TX	TX	FL	MI	IL	8	TN	Χī
3	Primary activity	IN-POLICE CAR VIDEOS AND CAMERAS	MANAGEMENT	MANAGEMENT	INVESTMENTS	COMM R/E	INVESTMENTS	INVESTMENTS	INVESTMENTS	MANUFACTURING
(e)	Name, address, and EIN of related organization	VANMAN FAMILY PARTNERSHIP, LTD 47-2492205, 1844 SAN JACINTO DR, ALLEN, TX 75013	ACD COSMETICS MANAGEMENT, LLC - 47-2611729, 711 E. LAMAR BLVD., STE 200, ARLINGTON, TX 76011	ACD PATHOLOGY MANAGEMENT, ILC - 47-2622679, 2501 ROYAL GLEN COURT, ARLINGTON, TX 76012	LIBERTY DEBT FUND I, LLC - 81-4935540, 834 HIGHLAND AVE, ORLANDO, FL 32801	EIGHTEEN NINETY SEVEN, LP - 27-1725628, P.O. BOX 276, EMPIRE, MI 49630-0276	PTZ LLC - 27-1560084 500 W. MADISON STREET SUITE 45 CHICAGO, IL 60661-4545	PIKES PEAK MANAGER LCP, LLC - 82-2330428, 2420 17TH STREET, DENVER, CO 80202	DCIIP, LLC - 81-4814582 2163 AIRWAYS BLVD, STE 300 MEMPHIS, TN 38114	GIBRALTAR CABLE BARRIER SYSTEMS, LP - 20-4261529, 4303 INNOVATION LOOP, MARBLE FALLS, TX 78654

NCF CHARITABLE TRUST

Schedule R (Form 990)

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN	(b) Primary activity	(c) Legal	(d) Direct controlling	(e) Predominant income	(f) Share of total	(g) Share of	(h) Disproportion-	(ı) Code V-UBI	(j) General or	(k) Percentage
of related organization		(state or foreign country)	entity	(related, unrelated, excluded from tax under sections 512-514)	Income	end-of-year assets	ate allocations?	amount in box 20 of Schedule K·1 (Form 1065)	managing partner?	managing ownership partner?
~ I										
69048, 1903 ASCENSION			-							
BLVD, ARLINGTON, TX 76006	COMM R/E	ΤX	PLACE, LLC	UNRELATED		2,500,000.	×	N/A	×	94.00%
011 TITO 00 CT TITOTHE										
3044							_			
YSHORE BLVD., STE 850										
TAMPA, FL 33606	INVESTMENTS	${f FL}$	DHGPII, LLC	UNRELATED	11,132.	1,077,500.	×	N/A	×	\$00.66
WORTHINGTON MANAGEMENT										
COMPANY, LLC - 80-0192481,			WORTHINGTON							
1200 CORPORATE DRIVE STE 225,		_	MANAGEMENT				-		_	
	INBESTMENTS	AL	COMPANY, LLC	UNRELATED	1,465,813.	12,900,186.	_×	N/A	×	1008
JEKGP II, LLC - 82-5472545										
601 BAYSHORE BLVD., STE 850										
	INVESTMENTS	FL	JFKGP II, LLC	UNRELATED	8,154,	967,500	×	N/A	×	100%
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NCF CHARITABLE TRUST

Schedule R (Form 990)

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a·r)	(c) Amount involved	(d) Method of determining amount involved
(7) HARRIS COVENANT	ß	1,357,815.	CASH
(8) ALLMAN REGENT III, LLC	S	1,216,808.	CASH
(9) HILLTOP ROAD, LLC	S	43,254.	CASH
(10) AMBASSADOR CAPITAL, LLC	ß	1,127,299.CASH	CASH
(11) HIGDON INVESTMENTS, LLC	ຮ	50,000.	CASH
(12) SDL, LLC	ß	37,458.	CASH
(13) FRANKLIN DEDICATION FUND	ß	17,400.	CASH
(14) FAITH GIVING, LLC	ß	17,000.CASH	CASH
(15) KARIS MANAGEMENT GROUP, LLC	ຜ	547,347.	CASH
(16) VANMAN FAMILY PARTNERSHIP	ß	1,614,165.CASH	CASH
(17) ACD COSMETICS, INC.	ß	247,500.	CASH
(18) ACD PATHOLOGY, INC.	ຜ	158,194.	CASH
(19) EIGHTEEN NINETY SEVEN, LP	ຜ	7,800,000.	CASH
(20) PTZ, LLC	ഗ	1,848,808.	CASH
(21) PIKES PEAK MANAGER LCP, LLC	Ø	91,577.	CASH
(22) DCIIP, LLC	Ø	1,864,952.	CASH
(23) DHGPII, LLC	S	308,750.	CASH
(24) JFKGP II, LLC	S	1,080,625.CASH	CASH

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Page 3

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36 PartV

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

- During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
- a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
 - **b** Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s) Exchange of assets with related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)

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- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- p Reimbursement paid to related organization(s) for expenses
- q Reimbursement paid by related organization(s) for expenses
- Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)

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(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NATIONAL CHRISTIAN CHARITABLE FDN, INC.	Д	226,519,001.CASH	CASH
(2) NATIONAL CHRISTIAN CHARITABLE FDN, INC.	ບ	9,340,266.CASH	CASH
NATIONAL CHRISTIAN FOUNDATION REAL (3) PROPERTY, INC.	В	228,000.CASH	CASH
(4) NCF CORPORATION	Д	25,000.CASH	CASH
(5) ARLINGTON RESEARCH, INC.	တ	1,593,900.CASH	CASH
(6) KINETIC CONTOURS	v	124,950.CASH	CASH
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Part VI] Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue)

S, and EN Primary activity (state of riborage) (1954) (state of riborage) (147	1-3	17	13	1	1	5	5	1.0
Primary activity (state or foreign equipment income pressure or foreign equipment income assets) (state or fore	(a)	(a)		(b)	¥e 9 ∀e 9	(6)	Ē	S	3	(K)
Country) Sections 51/2-514 Area in moome assets were in the country of the countr	Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated,	partners sec 501(c)(3)	Share of	tionate	Code V-UBI amount in box 20	General or managing	Percentage
			country)	excluded from tax under sections 512-514)	Yes No	assets	Yes No	of Schedule K-1 (Form 1065)	Yes No	
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Part VII Supplemental Information.	
Provide additional information for responses to questions on Schedule R. See instructions	
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PART III, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS	PARTNERSHIP:
NAME OF RELATED ORGANIZATION:	
DOVD WIDD DARMING LAVEGINE WILLAGE I ILG	
BOYD KUPP PARTNERS LAKESIDE VILLAGE I, LLC	
DIRECT CONTROLLING ENTITY: BOYD KUPP PARTNERS LAKESIDE VILLA	GE I, LLC
EODM 000 CCUEDIUE D. DADM II	
FORM 990, SCHEDULE R, PART II	
FOR ADDITIONAL RELATED ORGANIZATIONS, SEE THE 2016 FORM 990	FOR
NATIONAL CHRISTIAN CHARITABLE FOUNDATION, INC. 58-1493949.	
	
	
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