

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
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 06-01-2019, and ending 05-31-2020

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: DAVID C COOK
 Doing business as:
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 4050 LEE VANCE DRIVE
 City or town, state or province, country, and ZIP or foreign postal code: COLORADO SPRINGS, CO 80918

D Employer identification number: 36-6008100
E Telephone number: (719) 536-0100
G Gross receipts \$ 58,668,162

F Name and address of principal officer: SCOTT E MILLER, 4050 LEE VANCE DRIVE, COLORADO SPRINGS, CO 80918

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.DAVIDCCOOK.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1944 **M** State of legal domicile: IL

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
 STATUS RECLASSIFIED TO PUBLIC CHARITY 509(A)(1) AND 170(B)(1)(A)(I). THE IRS HAS DETERMINED THAT THE ORGANIZATION IS NO LONGER REQUIRED TO FILE A FORM 990, BUT IT HAS VOLUNTARILY FILED FOR THE CURRENT YEAR TO EQUIP THE CHURCH WITH CHRIST-CENTERED RESOURCES FOR MAKING AND TEACHING DISCIPLES WHO OBEDIENTLY TRANSFORM TODAY'S GENERATIONS. BIBLICAL STATEMENT OF PURPOSE: THEREFORE GO AND MAKE DISCIPLES OF ALL NATIONS, BAPTIZING THEM IN THE NAME OF THE FATHER AND OF THE SON AND OF THE HOLY SPIRIT, AND TEACHING THEM TO OBEY EVERYTHING I HAVE COMMANDED YOU. MT 28:19 & 20 NIV. CORE VALUES: 1) TRUST - EPHESIANS 4:152) LOVE - JOHN 13:353) INTEGRITY - II CORINTHIANS 8:214) COOPERATION - PROVERBS 15:225) ACCOUNTABILITY - HEBREWS 4:136) EXCELLANCE - COLOSSIANS 3:237) INNOVATION - TITUS 2:10B

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) **3** 11

4 Number of independent voting members of the governing body (Part VI, line 1b) **4** 11

5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) **5** 264

6 Total number of volunteers (estimate if necessary) **6** 0

7a Total unrelated business revenue from Part VIII, column (C), line 12 **7a** 0

b Net unrelated business taxable income from Form 990-T, line 39 **7b** 0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	666,120	1,295,192
9 Program service revenue (Part VIII, line 2g)	0	0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	80,538	409,878
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	28,307,405	28,272,724
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	29,054,063	29,977,794
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	77,500	62,308
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	15,023,034	15,844,381
16a Professional fundraising fees (Part IX, column (A), line 11e)	211,047	245,151
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 701,253		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	19,833,664	18,389,830
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	35,145,245	34,541,670
19 Revenue less expenses. Subtract line 18 from line 12	-6,091,182	-4,563,876

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	90,173,090	95,337,616
21 Total liabilities (Part X, line 26)	25,814,880	35,350,740
22 Net assets or fund balances. Subtract line 21 from line 20	64,358,210	59,986,876

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer: SCOTT E MILLER COO
 Date: 2021-04-05

Paid Preparer Use Only

Print/Type preparer's name: BAKER TILLY US LLP
 Preparer's signature: [Signature]
 Date: 2021-04-05
 Check if self-employed
 PTIN: P00187863
 Firm's EIN: 39-0859910
 Firm's address: 777 E WISCONSIN AVENUE 32ND FLOOR, MILWAUKEE, WI 53202
 Phone no.: (414) 777-5500

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

TO EQUIP THE CHURCH WITH CHRIST-CENTERED RESOURCES FOR MAKING AND TEACHING DISCIPLES WHO OBEDIENTLY TRANSFORM TODAY'S GENERATIONS. BIBLICAL STATEMENT OF PURPOSE: THEREFORE GO AND MAKE DISCIPLES OF ALL NATIONS, BAPTIZING THEM IN THE NAME OF THE FATHER AND OF THE SON AND OF THE HOLY SPIRIT, AND TEACHING THEM TO OBEY EVERYTHING I HAVE COMMANDED YOU. MT 28:19 & 20 NIV. CORE VALUES: 1) TRUST - EPHESIANS 4:152) LOVE - JOHN 13:353) INTEGRITY - II CORINTHIANS 8:214) COOPERATION - PROVERBS 15:225) ACCOUNTABILITY - HEBREWS 4:136) EXCELLANCE - COLOSSIANS 3:237) INNOVATION - TITUS 2:10B

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes 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 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 measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 27,376,940 including grants of \$ 26,008) (Revenue \$ 19,582,353)
See Additional Data

4b (Code:) (Expenses \$ 2,281,532 including grants of \$ 36,300) (Revenue \$)
See Additional Data

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 29,658,472

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Answer (Yes/No). Rows include questions 1 through 21, with sub-questions a-f for items 11 and 14. Each row has a corresponding 'Yes' or 'No' box.

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V [checked]

Table with 3 main columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

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	<table border="1"> <tr> <td style="width: 10%;">2a</td> <td style="width: 70%;"></td> <td style="width: 20%; text-align: right;">264</td> </tr> </table>	2a		264			
2a		264					
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		No		
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>			3b				
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . .			4a	Yes			
b If "Yes," enter the name of the foreign country: ▶ UK, HK, IN, CH 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		No		
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No		
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c				
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No		
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).							
a 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		No		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b				
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No		
d If "Yes," indicate the number of Forms 8282 filed during the year	<table border="1"> <tr> <td style="width: 10%;">7d</td> <td style="width: 70%;"></td> </tr> </table>	7d					
7d							
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .			7f		No		
g 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?			7h				
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		No		
9 Sponsoring organizations maintaining donor advised funds.							
a Did the sponsoring organization make any taxable distributions under section 4966?			9a		No		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		No		
10 Section 501(c)(7) organizations. Enter:							
a Initiation fees and capital contributions included on Part VIII, line 12	<table border="1"> <tr> <td style="width: 10%;">10a</td> <td style="width: 70%;"></td> </tr> </table>	10a					
10a							
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<table border="1"> <tr> <td style="width: 10%;">10b</td> <td style="width: 70%;"></td> </tr> </table>	10b					
10b							
11 Section 501(c)(12) organizations. Enter:							
a Gross income from members or shareholders	<table border="1"> <tr> <td style="width: 10%;">11a</td> <td style="width: 70%;"></td> </tr> </table>	11a					
11a							
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<table border="1"> <tr> <td style="width: 10%;">11b</td> <td style="width: 70%;"></td> </tr> </table>	11b					
11b							
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?							
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<table border="1"> <tr> <td style="width: 10%;">12b</td> <td style="width: 70%;"></td> </tr> </table>	12b		12a			
12b							
13 Section 501(c)(29) qualified nonprofit health insurance issuers.							
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.			13a				
b 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	<table border="1"> <tr> <td style="width: 10%;">13b</td> <td style="width: 70%;"></td> </tr> </table>	13b					
13b							
c Enter the amount of reserves on hand	<table border="1"> <tr> <td style="width: 10%;">13c</td> <td style="width: 70%;"></td> </tr> </table>	13c					
13c							
14a Did the organization receive any payments for indoor tanning services during the tax year?			14a		No		
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i> . . .			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? Note. See instructions and file Form 4720, Schedule N.			15		No		
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . Note. See instructions and file Form 4720, Schedule O.			16		No		

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



Section A. Governing Body and Management

Table with 5 columns: Question, 1a, 1b, Yes, No. Rows include questions about voting members, family relationships, management delegation, and governance decisions.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 5 columns: Question, Yes, No. Rows include questions about local chapters, conflict of interest policies, whistleblower policies, and compensation processes.

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include questions about states where Form 990 is required, public inspection of Form 1023, and disclosure of governing documents.

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, or 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.
- See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MR CRIS DOORNBOS CEO	40.00	X		X			503,366	0	17,205	
(2) MR SCOTT MILLER CHIEF OPERATING OFFICER	40.00			X			348,742	0	27,034	
(3) MR GARY HOPWOOD CHIEF GLOBAL OFFICER	40.00				X		269,601	0	17,315	
(4) MR JONATHAN BROWN PRESIDENT, INTEGRITY MUSIC	40.00				X		270,159	0	11,989	
(5) MS KAREN DAVIS GENERAL COUNSEL	40.00					X	245,420	0	12,816	
(6) MR GREG BAYS VP, COMMERCIAL PARTNERSHIPS & MARKETING	40.00					X	188,932	0	11,792	
(7) MR DAVID BERVIG VP, HUMAN RESOURCES	40.00					X	173,404	0	15,615	
(8) MR MIKE BYRON VP, FINANCE	40.00					X	168,387	0	13,676	
(9) MS WENDI LORD VP, PUBLISHING	40.00					X	173,549	0	84	
(10) MR CHADD MILLER EVP, LEARNING RESOURCES	40.00					X	157,645	0	8,092	
(11) MR PETE MARRA EVP, NEW BUSINESS AND INNOVATION	40.00					X	114,617	0	5,802	
(12) MR JOSEPH KOCH TREASURER	5.00	X		X			5,500	0	0	
(13) MS LORI BETHRAN TRUSTEE	5.00	X					5,000	0	0	
(14) MR RONALD N CERNY TRUSTEE	5.00	X					5,000	0	0	
(15) MS TIFFANY A DUNN TRUSTEE	5.00	X					5,000	0	0	
(16) MR ROBERT L HEAD TRUSTEE	5.00	X					5,000	0	0	
(17) MR DENNIS JOHNSON TRUSTEE	5.00	X					5,000	0	0	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
(18) MR R TODD RANKIN CHAIR	5.00	X		X				5,000	0	0	
(19) MR JOHN N RICHARDSON JR SECRETARY	5.00	X		X				5,000	0	0	
(20) MR GREG LUCID TRUSTEE (PARTIAL YEAR)	5.00	X						5,000	0	0	
(21) MR DAVID METCALF TRUSTEE (PARTIAL YEAR)	5.00	X						5,000	0	0	
(22) MS BETH GUCKENBERGER VICE CHAIR	5.00	X						3,024	0	0	
(23) MR JOHN ROTE TRUSTEE	5.00	X						2,500	0	0	
(24) MR DAVID ROGERS TRUSTEE	5.00	X						2,500	0	0	
1b Sub-Total											
1c Total from continuation sheets to Part VII, Section A											
1d Total (add lines 1b and 1c)								2,672,346	0	141,420	

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 23			
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	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
SAID AND DONE MUSIC LLC 15260 VENTURA BLVD SUITE 2100 SHERMAN OAKS, CA 914035360	MUSIC ROYALTIES	419,500
SANDBOX LTD 15 W 12TH STREET APT PHB NEW YORK, NY 100118554	MUSIC ROYALTIES	344,284
BAKER TILLY US LLP PO BOX 78975 MILWAUKEE, WI 532788975	AUDIT & CONSULTING	216,996
LINCOLN BREWSTER 1225 PLEASANT GROVE BLVD STE 100 ROSEVILLE, CA 956786985	MUSIC ROYALTIES	187,202
DELIVERY ROOM MUSIC LLC 5009 SAN MARINO CIRCLE LAKE MARY, FL 327462611	MUSIC ROYALTIES	180,000

2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 12	
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Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

Table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-1g for Federated campaigns, membership dues, fundraising events, related organizations, government grants, and other contributions.

Table for Program Service Revenue with 5 columns (A-D) and rows 2a-f for various program services and a total line 2g.

Main revenue table with 5 columns (A-D) and rows 3-12 for investment income, royalties, rental income, sales of assets, fundraising events, gaming activities, and sales of inventory.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	62,308	62,308		
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.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,837,536	900,561	936,975	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	10,261,169	8,541,490	1,434,667	285,012
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	671,747	601,616	62,192	7,939
9 Other employee benefits	2,183,889	1,695,677	451,009	37,203
10 Payroll taxes	890,040	720,488	156,732	12,820
11 Fees for services (non-employees):				
a Management				
b Legal	358,246	291,041	62,112	5,093
c Accounting	187,507		187,507	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	245,151			245,151
f Investment management fees	48,340		48,340	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,310,059	2,198,567	94,509	16,983
12 Advertising and promotion	1,428,972	1,423,154	100	5,718
13 Office expenses	1,649,959	1,530,047	104,560	15,352
14 Information technology	1,725,310	1,657,815	62,787	4,708
15 Royalties	8,124	8,124		
16 Occupancy	767,410	600,347	164,865	2,198
17 Travel	825,306	604,775	182,899	37,632
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	254,223	245,823	552	7,848
20 Interest	703,821	703,821		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,622,404	6,621,825	579	
23 Insurance	498,519	328,212	170,307	
24 Other expenses. Itemize expenses not covered 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.)				
a OTHER EXPENSES	604,121	538,760	52,298	13,063
b PROGRAM DEVELOPMENT & P	397,509	384,021	8,955	4,533
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	34,541,670	29,658,472	4,181,945	701,253
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,133,611	1	10,630,868
	2 Savings and temporary cash investments	61,392	2	10,074,047
	3 Pledges and grants receivable, net		3	220,336
	4 Accounts receivable, net	5,649,454	4	11,196,260
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	6,216,573	8	5,496,326
	9 Prepaid expenses and deferred charges	1,202,734	9	1,274,151
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 43,188,124		
	b Less: accumulated depreciation	10b 33,250,777	10,163,718	10c 9,937,347
	11 Investments—publicly traded securities	28,222,839	11	16,472,259
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11	19,253,133	13	16,834,755
	14 Intangible assets	13,150,381	14	8,597,169
	15 Other assets. See Part IV, line 11	4,119,255	15	4,604,098
16 Total assets. Add lines 1 through 15 (must equal line 34)	90,173,090	16	95,337,616	
Liabilities	17 Accounts payable and accrued expenses	9,880,787	17	14,039,902
	18 Grants payable		18	
	19 Deferred revenue	199,438	19	139,287
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	12,039,284	23	9,839,284
	24 Unsecured notes and loans payable to unrelated third parties		24	3,000,000
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	3,695,371	25	8,332,267
	26 Total liabilities. Add lines 17 through 25	25,814,880	26	35,350,740
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	60,398,934	27	55,763,925
	28 Net assets with donor restrictions	3,959,276	28	4,222,951
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	64,358,210	32	59,986,876	
33 Total liabilities and net assets/fund balances	90,173,090	33	95,337,616	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	29,977,794
2	Total expenses (must equal Part IX, column (A), line 25)	2	34,541,670
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,563,876
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	64,358,210
5	Net unrealized gains (losses) on investments	5	462,281
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-269,739
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	59,986,876

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 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 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.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 36-6008100

Name: DAVID C COOK

Form 990 (2019)

Form 990, Part III, Line 4a:

CHRISTIAN RESOURCES: DAVID C COOK IS A NONPROFIT PROVIDER OF GLOBAL CHRISTIAN RESOURCES, INCLUDING SUNDAY SCHOOL CURRICULUM, BOOKS, MUSIC, AND OTHER CHRISTIAN CONTENT. LEARNING RESOURCES: DAVID C COOK'S PRIMARY ROLE IS TO ASSIST THE LOCAL CHURCH TO SUCCEED IN LEADING AND DISCIPLING THOSE WHOM GOD HAS LED INTO ITS CARE. WE PROVIDE RESOURCES THAT MEET THE SPIRITUAL NEEDS OF THE BODY OF CHRIST AND ALONGSIDE OF PEOPLE AND ORGANIZATIONS AROUND THE GLOBE TOWARD ACCOMPLISHING THIS MISSION. DAVID C COOK IS A TRUSTED PROVIDER OF RESOURCES TO CHURCHES SEEKING TO TRANSFORM THE PEOPLE THEY SERVE. WE DO THIS THROUGH RELATIONSHIPS AND PUBLISHING THAT ENABLE US TO REINVEST IN EFFORTS THAT FACILITATE MINISTRY THAT SERVES THE LOCAL CHURCH ON A GLOBAL SCALE. IN COOPERATION WITH CHURCHES AND CHURCH LEADERS, WE CREATE RESOURCES TO AND FOR MINISTRY CENTER LEADERS AND THOSE THEY LEAD. DAVID C COOK RESOURCES ARE DESIGNED FOR LEADERS TO A) HELP THEM GROW IN THEIR SPIRITUAL JOURNEYS, B) USE IN THEIR MINISTRIES, AND C) RECOMMEND TO THOSE THEY LEAD TO HELP FOSTER A RICH SPIRITUAL LIFE. INTEGRITY MUSIC: THROUGH INTEGRITY MUSIC, OUR VISION IS TO SEE PEOPLE WORLDWIDE KNOW THE REVELATION AND PRESENCE OF GOD. MUSIC PRODUCES RESOURCES, WHICH INCLUDE EPS, LPS, & MUSIC VIDEOS FROM WORSHIP LEADERS WHO EXPLORE AND ARTICULATE FAITH IN JESUS AS WELL AS PUBLISHES SONGS THAT CONTAIN LYRICS THAT BUILD, INSPIRE, AND INSTRUCT DISCIPLES IN CHURCHES AROUND THE WORLD. OVERALL, INTEGRITY'S SONGWRITERS AND ARTISTS ARE FOUND IN MANY PARTS OF THE WORLD AND SHARE DAVID C COOK'S VIEW OF THE IMPORTANCE OF DISCIPLESHIP. WE UNDERSTAND THE CRITICAL ROLE THAT SONGS PLAY IN STRENGTHENING, INSPIRING, AND BUILDING THE CHURCH.

Form 990, Part III, Line 4b:

GLOBAL INITIATIVES: GLOBAL INITIATIVES IS THE INTERNATIONAL MINISTRY ARM OF DAVID C COOK THAT AIDS THE DISSEMINATION OF ITS RESOURCES INTERNATIONALLY. THERE ARE THREE MAIN AREAS OF FOCUS: EVANGELISM, BIBLE ENGAGEMENT, AND DISCIPLESHIP FOR CHILDREN. LIFE ON LIFE CURRICULUM. ONE OF THE MOST IMPORTANT RESPONSIBILITIES OF THE CHURCH TODAY IS TO CARE FOR VULNERABLE CHILDREN AROUND THE WORLD WHO ARE AT RISK DUE TO POVERTY, ABUSE, ABANDONMENT, OR CONFLICT IN THE HOME OR COMMUNITY. WHILE MANY GOOD PROGRAMS EXIST TO HELP THEM WITH PHYSICAL NEEDS LIKE FOOD, SHELTER AND EDUCATION, FAR TOO LITTLE IS DONE TO ADDRESS THEIR SIGNIFICANT EMOTIONAL, SOCIAL AND SPIRITUAL NEEDS. THROUGH GLOBAL INITIATIVES, WE PROVIDE A HOLISTIC CURRICULUM THAT FOSTERS INNER HEALING FOR CHILDREN WITH WOUNDED HEARTS. WE'VE CO-CREATED AND CONTEXTUALIZED THE CURRICULUM WITH CHURCH PARTNERS TO MEET THE UNIQUE NEEDS OF EACH REGION. CURRENTLY, ALMOST TWO MILLION CHILDREN ARE PARTICIPATING IN THIS DISCIPLESHIP PROGRAM, WHICH NURTURES LIFE TRANSFORMATION IN BOTH CHILDREN AND MINISTRY LEADERS. WE ALSO PROVIDE A SHORT CRISIS-RESPONSE CURRICULUM FOR ADULTS TO HELP CHILDREN COPE WITH TRAUMA THEY HAVE EXPERIENCED DUE TO EARTHQUAKES, OUTBREAKS OF ILLNESS LIKE EBOLA AND COVID, AND CRISES THAT HAVE FORCED THEM TO BECOME REFUGEES. EVANGELISM AND BIBLE ENGAGEMENT. THE ACTION BIBLE IS A GRAPHIC NOVEL-STYLE VERSION OF THE BIBLE THAT CONTAINS 215 STORIES BEAUTIFULLY DRAWN BY AN EXPERIENCED DC AND MARVEL COMIC ARTIST. IT HAS SPAWNED SEVERAL RELATED RESOURCES, INCLUDING THE STORY OF JESUS, A 16- OR 24-PAGE BOOKLET CONTAINING A CLEAR GOSPEL MESSAGE, AS WELL AS ACTION BIBLE VIDEOS. OVER 55 MILLION COPIES OF THE STORY OF JESUS HAVE BEEN DISTRIBUTED IN MANY COUNTRIES AND LANGUAGES AROUND THE WORLD. THE ACTION BIBLE NEW TESTAMENT IS NOW BEING USED AS THE RELIGIOUS INSTRUCTION MANUAL FOR PUBLIC SCHOOL CHILDREN IN GUATEMALA.

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization
DAVID C COOK

Employer identification number
36-6008100

Part I 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.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 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.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 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 **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.**
 - 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.**
 - 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.**
 - d **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.**
 - e 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 _____
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . .						
3	The value of services or facilities furnished by a governmental unit to the organization without charge..						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . .						
6	Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4. . .						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .						
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 assets (Explain in Part VI.). . .						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (see instructions)					12	
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2018 Schedule A, Part II, line 14	15	
16a	33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b	33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a	10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b	10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.**

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 36-6008100

Name: DAVID C COOK

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

Facts And Circumstances Test

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

Supplemental Financial Statements

OMB No. 1545-0047 2019 Open to Public Inspection

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: DAVID C COOK Employer identification number: 36-6008100

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 showing total number, aggregate value of contributions, grants, and end of year.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property... 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes...

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

2 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. Table with columns: Held at the End of the Year, 2a, 2b, 2c, 2d.

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. 4 Number of states where property subject to conservation easement is located. 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year. 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year. 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 1b 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. b Assets included in Form 990, Part X.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	26,479,736	27,514,871	26,064,150	29,208,218	31,147,697
b Contributions					
c Net investment earnings, gains, and losses	1,124,993	730,488	1,970,134	2,962,708	-363,783
d Grants or scholarships					
e Other expenditures for facilities and programs	2,872,888	1,734,640	496,569	6,093,049	1,565,495
f Administrative expenses	30,761	30,983	22,844	13,727	10,201
g End of year balance	24,701,080	26,479,736	27,514,871	26,064,150	29,208,218

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 83.700 %
 - b** Permanent endowment ▶ 11.700 %
 - c** Temporarily restricted endowment ▶ 4.600 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		377,703		377,703
b Buildings		19,009,993	11,796,263	7,213,730
c Leasehold improvements				
d Equipment		10,424,609	10,313,482	111,127
e Other		13,375,819	11,141,032	2,234,787
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				9,937,347

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) INVESTMENT IN SUBSIDIARIES	16,834,755	F
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)	16,834,755	

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED COMPENSATION	272,595
(3) ACCRUED RETIREE BENEFIT	27,042
(4) ANNUITY AND TRUST LIABILITY	1,664,693
(5) INTEREST SWAP LIABILITY	514,047
(6) LINE OF CREDIT	3,500,000
(7) DUE TO AFFILIATE	2,353,890
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	8,332,267

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

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	49,039,244
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	462,281	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	18,044,153	
e	Add lines 2a through 2d			2e 18,506,434
3	Subtract line 2e from line 1			3 30,532,810
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	-555,016	
c	Add lines 4a and 4b			4c -555,016
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			5 29,977,794

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.

1	Total expenses and losses per audited financial statements		1	53,321,259
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	18,779,589	
e	Add lines 2a through 2d			2e 18,779,589
3	Subtract line 2e from line 1			3 34,541,670
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b			4c 0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			5 34,541,670

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.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 36-6008100

Name: DAVID C COOK

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	THE ORGANIZATION'S ENDOWMENT FUNDS WERE ESTABLISHED TO SUPPORT AND ENSURE THE ONGOING FUND ING OF VARIOUS SHORT AND LONG TERM MINISTRY PROGRAMS WHICH CAN INCLUDE DEVELOPMENT AND WOR LDWIDE DISTRIBUTION OF CHRISTIAN LITERATURE AND LEADERSHIP TRAINING.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	THE ORGANIZATION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND A SIMILAR PROVISION OF STATE LAW. HOWEVER, DCC IS SUBJECT TO FEDERAL INCOME TAX ON UNRELATED BUSINESS TAXABLE INCOME. THERE WAS NO SIGNIFICANT UNRELATED BUSINESS INCOME DURING THE YEARS ENDED MAY 31, 2020 AND 2019. AT MAY 31, 2020 AND 2019, ONLY THE ORGANIZATION'S FOREIGN SUBSIDIARIES ARE SUBJECT TO INCOME TAXES, WHICH ARE CONSIDERED IMMATERIAL TO THE CONSOLIDATED FINANCIAL STATEMENTS. THE ORGANIZATION FILES TAX RETURNS IN THE U.S. FEDERAL JURISDICTION. WITH A FEW EXCEPTIONS, THE ORGANIZATION IS NO LONGER SUBJECT TO U.S. FEDERAL EXAMINATIONS BY TAX AUTHORITIES FOR FISCAL YEARS BEFORE 2015.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	COST OF GOODS SOLD 18,044,153.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	RENTAL EXPENSES -555,016.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	COST OF GOODS SOLD 18,044,153. FOREIGN CURRENCY EXCHANGE ADJUSTMENT 180,420. RENTAL EXPENSES 555,016.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DAVID C COOK

Employer identification number
36-6008100

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data					
3a Sub-total	3	37			8,685,556
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	3	37			8,685,556

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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

Part IV Foreign Forms

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

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART III ACCOUNTING METHOD:	

Additional Data

Software ID:

Software Version:

EIN: 36-6008100

Name: DAVID C COOK

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA/CARIBBEAN	0	0	PROGRAM SERVICES	PROVISION OF MATERIALS	123,167
EAST ASIA AND THE PACIFIC	1	11	PROGRAM SERVICES	PRINTING/PROVISION OF MATERIALS	110,789

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	PRINTING OF MATERIALS	7,515
SOUTH ASIA	1	5	PROGRAM SERVICES	PRINTING/PROVISION OF MATERIALS	162,986

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	3	PROGRAM SERVICES	PROVISION OF MATERIALS	137,167
SOUTH AMERICA	0	2	PROGRAM SERVICES	PROVISION OF MATERIALS	31,164

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE	1	16	INVESTMENTS		8,066,056
RUSSIA & NEWLY INDEPENDENT STATES	0	0	PROGRAM SERVICES	PROVISION OF MATERIALS	46,712

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization
DAVID C COOK

Employer identification number
36-6008100

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
EXCELLENCE IN GIVING 830 TENDERFOOT HILL ROAD SUITE 310 COLORADO SPRINGS, CO 80906	CONSULTING SERVICES		No	0	67,500	-67,500
TRAJECTORY SOLUTIONS INC 16182 TIMBER MEADOW DR COLORADO SPRINGS, CO 80908	CONSULTING SERVICES		No	0	28,000	-28,000
BRAND INNOVATION GROUP LLC 8902 AIRPORT DRIVE SUITE A FORT WAYNE, IN 46809	CONSULTING SERVICES		No	0	9,326	-9,326
DUNHAM & COMPANY 6111 W PLAN PKWY STE 2200 PLANO, TX 75093	CONSULTING SERVICES		No	0	125,575	-125,575
Total					230,401	-230,401

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AK, AL, AR, CA, CO, CT, FL, GA, HI, IL, KY, MD, MN, MS, NH, NJ, NY, NC, ND, PA, RI, SC, TN, UT, VA, WA, WV, WI

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

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

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization DAVID C COOK

Employer identification number

36-6008100

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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 recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

Table with 8 columns: (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 noncash assistance, (h) Purpose of grant or assistance. Includes rows for CAMPUS CRUSADE FOR CHRIST and REFUGE FOUNDATION.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2
3 Enter total number of other organizations listed in the line 1 table 0

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	FROM TIME TO TIME, DAVID C COOK MAY PROVIDE CONTRIBUTIONS TO OTHER NON-PROFIT ORGANIZATIONS IN THE COMMUNITY. PRIOR TO DISTRIBUTION OF FUNDS, IT IS VERIFIED THAT THE RECIPIENT IS A BONA FIDE SECTION 501(C)(3) ORGANIZATION. GRANT REQUESTS ARE REVIEWED AND APPROVED BY THE STAFF OF DAVID C COOK, BASED ON THE SPECIFIC PROGRAM EFFORTS OF THOSE NON-PROFIT ORGANIZATIONS.

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DAVID C COOK

Employer identification number
36-6008100

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input checked="" type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input checked="" type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2 Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a Yes	
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	No
b Any related organization?	5b	No
If "Yes," on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	No
b Any related organization?	6b	No
If "Yes," on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7 Yes	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	TRAVEL FOR COMPANIONS - PER THE ORGANIZATION'S WRITTEN POLICY, WHICH REQUIRES CEO APPROVAL, SPOUSAL TRAVEL IS REIMBURSED FOR OFFICERS AND KEY EMPLOYEES IF THE SPOUSE'S PRESENCE, ABILITIES AND ACTIVITIES WILL RESULT IN THE EFFECTIVE MINISTERING OF THE MISSION. THE MISSION PURPOSE IS INCLUDED ON ALL TRAVEL FORMS IN ORDER TO DOCUMENT THE BUSINESS PURPOSE FOR THE REIMBURSEMENT. FIRST-CLASS TRAVEL - PER THE ORGANIZATION'S APPROVED, WRITTEN POLICY, AIR TRAVEL IS MADE AT COACH CLASS UNLESS SPECIFICALLY APPROVED BY THE CEO OR COO, AND IS MAINLY FOR INTERNATIONAL FLIGHTS OF LONG DURATION. HEALTH OR SOCIAL CLUB DUES - SELECT EXECUTIVES RECEIVE A YEARLY MEMBERSHIP TO A HEALTH AND SOCIAL CLUB. AN AMOUNT IS ALSO TAXED ON EACH PAYCHECK FOR THE IMPACTED EMPLOYEES.
PART I, LINE 4A	WENDI LORD RECEIVED SEVERANCE DURING 2019 AND THE AMOUNT IS AVAILABLE UPON REQUEST.
PART I, LINE 7	THE OFFICERS, KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES LISTED ON THIS 990 ARE ELIGIBLE FOR INCENTIVE PAYMENTS UP TO A DEFINED % OF THEIR ANNUAL BASE PAY AS DESIGNATED IN THE ORGANIZATION'S COMPENSATION PHILOSOPHY. ONE CATEGORY OF THEIR INCENTIVE PAYMENT IS DEPENDENT ON THE ACHIEVEMENT OF THREE OR MORE SPECIFIC AND MEASURABLE TARGETS DIRECTLY TIED TO THEIR AREA OF RESPONSIBILITY WHICH MAY REQUIRE SUBJECTIVE DECISIONS TO DETERMINE IF GOAL WAS ACHIEVED.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

▶ **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 the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
DAVID C COOK

Employer identification number
36-6008100

Part 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	(d) Method of determining noncash contribution amounts
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	X	1	25,059	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
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 ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	Yes	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 32B:	STOCK CONTRIBUTIONS ARE RECEIVED, PROCESSED AND SOLD BY AN OUTSIDE INVESTMENT FIRM.

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019**Open to Public Inspection**

Department of the Treasury

Name of the organization

DAVID C COOK

Employer identification number

36-6008100

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE EXECUTIVE COMMITTEE CONSISTS OF FOUR OR MORE TRUSTEES, ONE OF WHOM IS THE CHAIRMAN OF THE BOARD. THE EXECUTIVE COMMITTEE IS ABLE TO EXERCISE A MAJORITY OF THE POWERS OF THE BOARD OF TRUSTEES DURING THE INTERVALS BETWEEN THE MEETINGS OF THE BOARD.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	DAVID C COOK (THE ORGANIZATION) RECEIVED A LETTER FROM THE IRS DATED DECEMBER 15, 2020 THAT CONFIRMED THE ORGANIZATION MEETS THE REQUIREMENTS FOR CLASSIFICATION AS A PUBLIC CHARITY DESCRIBED IN IRC SECTIONS 509(A)(1) AND 170(B)(1)(A)(I). THE IRS HAS REVISED THEIR FILES ACCORDINGLY AND HAS A COPY OF THE NEW DETERMINATION LETTER ON FILE. THE ORGANIZATION HAS REVISED ITS GOVERNING DOCUMENTS ACCORDINGLY.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS PREPARED BY A THIRD PARTY PREPARER. AN INTERNAL REVIEW OF THE 990 IS COMPLETED BY THE COO AND VP OF FINANCE. THE 990 IS THEN SENT TO THE FINANCE & AUDIT COMMITTEE FOR REVIEW WHICH ALSO INCLUDES A MEETING WITH THE AUDITING FIRM TO PRESENT THE 990 AND ADDRESS ANY QUESTIONS. UPON APPROVAL FROM THE FINANCE & AUDIT COMMITTEE AND BEFORE FILING WITH THE IRS, THE 990 AND ASSOCIATED SCHEDULES ARE PROVIDED TO THE FULL BOARD OF TRUSTEES ON AN INTRANET SITE WHICH NOTIFIES THEM VIA AN EMAIL THAT FORMS ARE AVAILABLE FOR THEIR REVIEW. REPLIES ARE REQUIRED FROM THE TRUSTEES BEFORE WE FILE THE 990.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EACH YEAR, THE ASSISTANT SECRETARY TO THE BOARD DISTRIBUTES CONFLICT OF INTEREST FORMS TO EACH BOARD MEMBER AND KEY EMPLOYEE. COMPLETED FORMS ARE THEN SUBMITTED TO THE ASSISTANT SECRETARY TO THE BOARD WHO MONITORS AND DISCLOSES TO THE BOARD IF ANY CHANGES OCCUR. BOARD MEMBERS ARE RESTRICTED FROM VOTING ON ISSUES WHERE CONFLICTS HAVE BEEN IDENTIFIED.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	PROCESS FOR DETERMINING EXECUTIVE, OFFICER, AND KEY EMPLOYEE COMPENSATION EVERY THREE YEARS, THE ORGANIZATION AND THE BOARD OF TRUSTEES RETAINS AN INDEPENDENT GLOBAL PROFESSIONAL FIRM TO REVIEW AND PROVIDE FEEDBACK ON COMPENSATION. THEIR REPORT INCLUDES COMPARABLE MARKET COMPENSATION DATA OF SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS. THE MOST RECENT REPORT WAS PRESENTED AND REVIEWED BY THE BOARD IN JUNE 2017. HUMAN RESOURCES KEEPS WRITTEN RECORDS OF ALL COMPENSATIONS ARRANGEMENTS AS WELL AS ALL DOCUMENTATION RELATED TO THE OUTSIDE COMPENSATION STUDIES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART X - SECURED MORTGAGES AND NOTES PAYABLE	<p>LENDER: BANK OF AMERICA ORIGINAL AMOUNT: \$17,539,284 INTEREST RATE: 4.320000 DATE OF NOTE: 06/29/17 MATURITY DATE: 08/01/24 REPAYMENT TERM: ANNUAL PRINCIPAL & MONTHLY INTEREST PAYMENTS SECURITY PROVIDED: ALL BUSINESS ASSETS PURPOSE OF LOAN: ACQUISITION OF INTEGRITY MUSIC, INC. AND ACQUISITION OF STANDARD PUBLISHING AND GOSPEL LIGHT ASSETS BEGINNING BALANCE DUE.....\$12,039,284 ENDING BALANCE DUE.....\$12,839,284 TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE \$12,039,284 TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE \$12,839,284 IN SEPTEMBER 2019, THE ORGANIZATION OBTAINED AN UNSECURED NOTE IN THE AMOUNT OF \$3,000,000 TO FUND CERTAIN CAPITAL IMPROVEMENTS WITH A MATURITY DATE OF OCTOBER 1, 2024. INTEREST IS DUE MONTHLY AT A FIXED RATE OF 3.21 PERCENT, WITH PRINCIPAL PAYMENTS OF \$600,000 MADE ANNUALLY IN OCTOBER. THE ENDING BALANCE OF \$12,839,284 IS COMPRISED OF TWO SEPARATE AMOUNTS. THE FIRST AMOUNT OF \$9,839,284 IS THE REMAINING DEBT ON THE ORIGINAL LOAN AMOUNT OF \$17,539,284 NOTED ABOVE. THE REMAINING \$3,000,000 IS NEW DEBT OBTAINED DURING THE 2019 TAX YEAR AS EXPLAINED ABOVE.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	FOREIGN CURRENCY EXCHANGE ADJUSTMENT -180,420. FOREIGN CURRENCY EXCHANGE TRANSLATION ADJUSTMENT TO EQUITY -89,319.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

Open to Public Inspection

▶ **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.**

Department of the Treasury
Internal Revenue Service

Name of the organization
DAVID C COOK

Employer identification number

36-6008100

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) DISCIPLR LLC 4050 LEE VANCE DRIVE COLORADO SPRINGS, CO 80918	DIGITAL CONTENT DISTRIBUTOR	CO	-576,041	0	DCC HOLDINGS LLC
(2) DCC HOLDINGS LLC 4050 LEE VANCE DRIVE COLORADO SPRINGS, CO 80918	HOLDING COMPANY	CO	-1,009,789	134,998	DAVID C COOK
(3) WEAREWORSHIPCOM LLC 4050 LEE VANCE DRIVE COLORADO SPRINGS, CO 80918	DIGITAL MUSIC	CO	-433,748	134,998	DCC HOLDINGS LLC
(4) DCC GLOBAL I LLC 4050 LEE VANCE DRIVE COLORADO SPRINGS, CO 80918	HOLDING COMPANY	CO	33,615	635,072	DAVID C COOK
(5) DCC GLOBAL II LLC 4050 LEE VANCE DRIVE COLORADO SPRINGS, CO 80918	HOLDING COMPANY	CO	9,823	11,821	DAVID C COOK

Part II 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) WORD AND WORSHIP TRUST 26-28 LOTTBRIDGE DRIVE EASTBOURNE, EAST SUSSEX BN23 6NT UK	ADVANCEMENT OF THE CHRISTIAN RELIGION	UK	FOREIGN CHARITY		INTEGRITY MUSIC LTD	Yes	

Part III 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) INTEGRITY MUSIC LTD BOSTEL HOUSE 37 WEST STREET BN12RE BRIGHTON UK	WHLSLE CHRSTN LIT	UK	DAVID C COOK AND SUBSIDIARIES	C	-202,890	9,570,284	100.000 %	Yes	
(2) MUSIC THREE LIMITED BOSTEL HOUSE 37 WEST STREET BN12RE BRIGHTON UK	PUB/DIST MUSIC	UK	INTEGRITY MUSIC LTD	C			100.000 %	Yes	
(3) COOK CONSULTING AND COMMUNICATION SERVICES (INDIA) PRIVATE LIMITED 319 A WING SAGAR TECH PLAZA KURLA MUMBAI IN	WHLSLE CHRSTN LIT	IN	DCC GLOBAL II LLC	C	9,823	11,821	100.000 %	Yes	
(4) THANKYOU MUSIC LIMITED BOSTEL HOUSE 37 WEST STREET BN12RE BRIGHTON UK	PUBLISHER/MUSIC	UK	DAVID C COOK AND SUBSIDIARIES	C	291,474	4,796,966	50.000 %		No
(5) EIGHT BLESSINGS LIMITED 25-35 SHANGHAI STREET KOWLOON HK	PUBLISHING SERVICES	HK	DCC GLOBAL I LLC	C	63,031	485,212	100.000 %	Yes	
(6) EIGHT BLESSINGS PARTNERS (BEIJING) CONSULTANT CO LTD NO 15 MAJIAPU WEST ROAD FENGTAI D BEIJING CH	PUBLISHING SERVICES	CH	EIGHT BLESSINGS LIMITED	C	-29,416	149,860	100.000 %	Yes	

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

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

		Yes	No
1 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	Yes	
b	Gift, grant, or capital contribution to related organization(s)		No
c	Gift, grant, or capital contribution from related organization(s)		No
d	Loans or loan guarantees to or for related organization(s)	Yes	
e	Loans or loan guarantees by related organization(s)		No
f	Dividends from related organization(s)	Yes	
g	Sale of assets to related organization(s)	Yes	
h	Purchase of assets from related organization(s)		No
i	Exchange of assets with related organization(s)		No
j	Lease of facilities, equipment, or other assets to related organization(s)		No
k	Lease of facilities, equipment, or other assets from related organization(s)		No
l	Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
m	Performance of services or membership or fundraising solicitations by related organization(s)	Yes	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o	Sharing of paid employees with related organization(s)		No
p	Reimbursement paid to related organization(s) for expenses	Yes	
q	Reimbursement paid by related organization(s) for expenses	Yes	
r	Other transfer of cash or property to related organization(s)	Yes	
s	Other transfer of cash or property from related organization(s)	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 36-6008100
Name: DAVID C COOK

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
EIGHT BLESSINGS LIMITED	M	46,992	AMOUNT PAID
COOK CONSULTING AND COMMUNICATION SERVICES (INDIA) PRIVATE LIMITED	R	487,021	AMOUNT PAID
INTEGRITY MUSIC LIMITED	A	807,085	VALUE OF SVCS
INTEGRITY MUSIC LIMITED	D	2,257,764	LOAN AMOUNT
INTEGRITY MUSIC LIMITED	F	3,164,750	AMOUNT PAID
INTEGRITY MUSIC LIMITED	G	538,189	SALES PRICE
INTEGRITY MUSIC LIMITED	L	512,003	VALUE OF SVCS
INTEGRITY MUSIC LIMITED	M	1,565,219	VALUE OF SVCS
INTEGRITY MUSIC LIMITED	P	178,800	AMOUNT PAID
INTEGRITY MUSIC LIMITED	Q	327,650	AMOUNT PAID
INTEGRITY MUSIC LIMITED	R	401,147	AMOUNT PAID
INTEGRITY MUSIC LIMITED	S	626,178	AMOUNT PAID