

Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust

1999

This Form is Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Note: The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 1999 calendar year, OR tax year period beginning 1999, and ending 1999

B Check if:

<input type="checkbox"/> Change of address	Change of address	Employer identification number
<input type="checkbox"/> Initial return	Initial return	Telephone number
<input type="checkbox"/> Final return	Final return	
<input type="checkbox"/> Amended return (required also for state reporting)	Amended return	Check <input type="checkbox"/> if exemption application is pending

D Employer identification number: 37-1179056
E Telephone number: 618-627-4651

G Type of organization — Exempt under section 501(c) (3) (insert number) OR section 4947(a)(1) nonexempt charitable trust
Note: Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).

H(a) Is this a group return filed for affiliates? Yes No

I If either box in H is checked "Yes," enter four-digit group exemption number (GEN): _____

(b) If "Yes," enter the number of affiliates for which this return is filed: _____

J Accounting method: Cash Accrual

(c) Is this a separate return filed by an organization covered by a group ruling? Yes No

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if it received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

Note: Form 990-EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 15.)

Revenue					
1	Contributions, gifts, grants, and similar amounts received:				
a	Direct public support	1a	9,999,808		
b	Indirect public support	1b			
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (attach schedule of contributors) (cash \$ _____ noncash \$ _____)	1d	9,999,808.00		
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	610,846.00		
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4	59,911		
5	Dividends and interest from securities	5			
6a	Gross rents	6a	17,831		
b	Less: rental expenses	6b	6,955		
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	10,876.00		
7	Other investment income (describe _____)	7			
8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
b	Less: cost or other basis and sales expenses	8a	83,722		
c	Gain or (loss) (attach schedule)	8b	83,722		
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	0.00		
8d		8d	0.00		
9	Special events and activities (attach schedule)				
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a			
b	Less: direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
10a	Gross sales of inventory, less returns and allowances	10a	3,895,025		
b	Less: cost of goods sold	10b	2,908,224		
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	986,801.00		
11	Other revenue (from Part VII, line 103)	11	149,689.00		
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	11,817,931.00		
Expenses					
13	Program services (from line 44, column (B))	13	5,855,854.00		
14	Management and general (from line 44, column (C))	14	2,964,104.00		
15	Fundraising (from line 44, column (D))	15			
16	Payments to affiliates (attach schedule)	16			
17	Total expenses (add lines 16 and 44; column (A))	17	8,819,958.00		
Net Assets					
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	2,997,973.00		
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	9,561,198.00		
20	Other changes in net assets or fund balances (attach explanation)	20	(46,158)		
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	12,513,013.00		

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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 19.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25	136,369	136,369	
26	Other salaries and wages	26	1,204,527	1,204,527	
27	Pension plan contributions Contract Labor	27	18,534	18,534	
28	Other employee benefits Advertising	28	78,541	78,541	
29	Payroll taxes	29	102,858	102,858	
30	Professional fundraising fees Insurance	30	333,687	333,687	
31	Accounting fees	31	43,836	43,836	
32	Legal fees	32	39,990	39,990	
33	Supplies	33	377,638	205,814	171,824
34	Telephone	34	109,317	109,317	
35	Postage and shipping	35	325,230	325,230	
36	Occupancy	36	90,322	78,361	11,961
37	Equipment rental and maintenance	37	2,663,002	2,590,360	72,642
38	Printing and publications	38	352,288	156,362	195,926
39	Travel dues & Registration	39	213,793		213,793
40	Conferences, conventions, and meetings	40	15,251	15,251	
41	Interest	41	14,779		14,779
42	Depreciation, depletion, etc. (attach schedule)	42	1,169,537	1,169,537	
43	Other expenses (itemize): a DOWNLINK	43a	876,045	876,045	
	b SPECIAL PROJECTS	43b	458,077	458,077	
	c REPAIR & MAINT. BUILDINGS	43c	47,633		47,633
	d BROADCASTING	43d	94,586	94,586	
	e MISCELLANEOUS	43e	54,118	23,603	30,515
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B) - (D), carry these totals to lines 13-15	44	8,819,958.00	5,855,854.00	2,964,104.00

Reporting of Joint Costs. — Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 22.)

What is the organization's primary exempt purpose? SATELLITE TELEVISION MINISTRY
 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
 (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a	PRODUCTION AND DISTRIBUTION OF 24 HOUR PER DAY RELIGIOUS PROGRAMMING FOR ELECTRONIC TRANSMISSION THROUGHOUT THE WORLD.	(Grants and allocations \$ 0)	5,855,854
b		(Grants and allocations \$)	
c		(Grants and allocations \$)	
d		(Grants and allocations \$)	
e	Other program services (attach schedule)	(Grants and allocations \$)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)		5,855,854.00

Part IV Balance Sheets (See Specific Instructions on page 22.)

		Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.		(A) Beginning of year		(B) End of year	
Assets	45	Cash — non-interest-bearing		28,761	45	177,465	
	46	Savings and temporary cash investments		1,235,055	46	4,376,937	
	47a	Accounts receivable	47a				
		b Less: allowance for doubtful accounts	47b		142,096	47c	187,042
	48a	Pledges receivable	48a				
		b Less: allowance for doubtful accounts	48b			48c	
	49	Grants receivable				49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
	51a	Other notes and loans receivable (attach schedule)	51a				
		b Less: allowance for doubtful accounts	51b			51c	
	52	Inventories for sale or use			31,953	52	53,907
	53	Prepaid expenses and deferred charges			408,515	53	191,966
	54	Investments — securities (attach schedule)				54	
	55a	Investments — land, buildings, and equipment: basis	55a				
		b Less: accumulated depreciation (attach schedule)	55b			55c	
56	Investments — other (attach schedule)				56		
57a	Land, buildings, and equipment: basis	57a	14,961,861				
	b Less: accumulated depreciation (attach schedule)	57b	5,339,768	8,081,990	57c	9,622,093	
58	Other assets (describe ► SCHEDULE ATTACHED)			12,064,174	58	16,788,366	
59	Total assets (add lines 45 through 58) (must equal line 74)			21,992,544.00	59	31,397,776.00	
Liabilities	60	Accounts payable and accrued expenses		270,799	60	944,988	
	61	Grants payable			61		
	62	Deferred revenue				62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a	Tax-exempt bond liabilities (attach schedule)				64a	
		b Mortgages and other notes payable (attach schedule)			166,265	64b	159,993
	65	Other liabilities (describe ► SCHEDULE ATTACHED)			11,994,282	65	17,779,782
66	Total liabilities (add lines 60 through 65)			12,431,346.00	66	18,884,763.00	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.						
	67	Unrestricted		8,453,596	67	10,114,168	
	68	Temporarily restricted		1,107,602	68	2,398,845	
	69	Permanently restricted				69	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 70 through 74.						
	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds ..				72	
73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)			9,561,198.00	73	12,513,013.00	
74	Total liabilities and net assets / fund balances (add lines 66 and 73)			21,992,544.00	74	31,397,776.00	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information (See Specific Instructions on page 25.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization ► _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81 81a 0		
b	Did the organization file Form 1120-POL for this year?	81b	X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions for reporting in Part III.) 82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	
c	Dues, assessments, and similar amounts from members 85c		
d	Section 162(e) lobbying and political expenditures 85d		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f		
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a		
b	Gross receipts, included on line 12, for public use of club facilities 86b		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ► 0 ; section 4912 ► 0 ; section 4955 ► 0		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► 0		
d	Enter: Amount of tax in 89c, above, reimbursed by the organization ► 0		
90a	List the states with which a copy of this return is filed ► ILLINOIS, OREGON		
b	Number of employees employed in the pay period that includes March 12, 1999 (See inst.) 90b 54		
91	The books are in care of ► PETER J. CROTSEY Telephone no. ► 618-627-4651 Located at ► 3391 CHARLEY GOOD RD, WEST FRANKFORT IL ZIP + 4 ► 62896-0220		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ► 92		

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 29.)

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a PRODUCTION AND DISTRIBUTION					
b OF RELIGIOUS PROGRAMMING,					
c AND ELECTRONIC TRANSMISSION					610,846
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					59,911
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					10,876
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					986,801
103 Other revenue: a VIDEO SALES					133,830
b OTHER MISC.					15,859
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))					1,818,123.00
105 Total (add line 104, columns (B), (D), and (E))					1,818,123.00

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 30.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93	PAYMENT FOR AIRTIME & PRODUCTION OF CERTAIN RELIGIOUS PROGRAMMING FOR ELECTRONIC TRANSMISSION.
95	
97	
102	SALE OF SATELLITE DISHES TO ENABLE VIEWERS TO RECEIVE PROGRAMMING BROADCASTS.
103	SALE OF RELIGIOUS PROGRAMMING.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 30.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Please Sign Here

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. (Important: See General Instruction J, on page 14.)

Signature of officer: Danny Shelton Date: 8-14-00 Type or print name and title: Danny Shelton

Paid Preparer's Use Only

Preparer's signature: Alan Lovejoy Date: 8/14/00 Check if self-employed: Preparer's SSN or PTIN: [REDACTED]

Firm's name (or yours if self-employed) and address: GRAY HUNTER STEIN LLP EIN: 36-3077757
MARION IL ZIP + 4: 62959

**SCHEDULE A
(Form 990)**

Organization Exempt Under Section 501(c)(3)

OMB No. 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n); or Section 4947(a)(1) Nonexempt Charitable Trust

1999

Department of the Treasury
Internal Revenue Service

Supplementary Information — (See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.**

Name of the organization

Employer identification number

THREE ANGELS BROADCASTING NETWORK INC.

37-1179056

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
MOSES A PRIMO	ENGINEER 40 HRS	58,931.00		
Total number of other employees paid over \$50,000				

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 1 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		

Part III **Statements About Activities**

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <i>See Part V of 990</i>	X	
e Transfer of any part of its income or assets? If the answer to any question is "Yes," attach a detailed statement explaining the transactions.		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.?		X
4a Do you have a section 403(b) annuity plan for your employees?		X
b Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See page 2 of the Instructions.)		

Part IV **Reason for Non-Private Foundation Status** (See pages 2 through 4 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 4.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 12 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 charitable, etc., 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). (Also complete the Support Schedule in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 4 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 4 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 1998	(b) 1997	(c) 1996	(d) 1995	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	7,557,624	6,834,614	5,701,976	5,389,656	25,483,870.00
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose	1,488,651	134,290	153,230	103,549	1,879,720.00
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	65,770	13,920	18,164	12,779	110,633.00
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	9,112,045.00	6,982,824.00	5,873,370.00	5,505,984.00	27,474,223.00
24 Line 23 minus line 17	7,623,394.00	6,848,534.00	5,720,140.00	5,402,435.00	25,594,503.00
25 Enter 1% of line 23	91,120.45	69,828.24	58,733.70	55,059.84	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	▶ 26a				
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1995 through 1998 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts	▶ 26b				
c Total support for section 509(a)(1) test: Enter line 24, column (e)	▶ 26c				
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____	▶ 26d				
e Public support (line 26c minus line 26d total)	▶ 26e				
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	▶ 26f %				
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year: (1998) <u>534,598</u> (1997) <u>NONE</u> (1996) <u>NONE</u> (1995) <u>NONE</u>					
b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (1998) <u>43,279</u> (1997) <u>112,400</u> (1996) <u>96,000</u> (1995) <u>102,050</u>					
c Add: Amounts from column (e) for lines: 15 <u>25,483,870.00</u> 16 _____ 17 <u>1,879,720.00</u> 20 _____ 21 _____	▶ 27c <u>27,363,590.00</u>				
d Add: Line 27a total <u>534,598.00</u> and line 27b total <u>353,729.00</u>	▶ 27d <u>888,327.00</u>				
e Public support (line 27c total minus line 27d total)	▶ 27e <u>26,475,263.00</u>				
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)	▶ 27f <u>27,474,223</u>				
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	▶ 27g <u>96.36 %</u>				
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	▶ 27h <u>0.40 %</u>				
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1995 through 1998, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See page 4 of the instructions.)					

Part V

**Private School Questionnaire (See page 4 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
<hr/>			
<hr/>			
<hr/>			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
<hr/>			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
<hr/>			
<hr/>			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
<hr/>			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 6 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check here a if the organization belongs to an affiliated group.
 Check here b if you checked "a" above and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table —		
	If the amount on line 40 is — The lobbying nontaxable amount is —		
	Not over \$500,000	20% of the amount on line 40	} 41
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000	\$1,000,000	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50 on page 7 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See page 8 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

THREE ANGELS BROADCASTING NETWORK, INC.

FORM 990, PAGE 4, PART V

FOR YEAR ENDED DECEMBER 31, 1999

37-1179056

(A)	(B)	(C)	(D)	(E)
Dr. Walter Thompson; Chairman 174 Fox Borough Burr Ridge, IL 60521 (630)887-1735	Director	- 0 -	- 0 -	- 0 -
J. Wayne Coulter 619 Plainfield Rd., 3 rd Floor Willowbrook, IL 60521 (630)734-0920	Director	- 0 -	- 0 -	- 0 -
May E. Chung 155 Manchester Lane San Bernardino, CA 92408 (909)824-3112	Director	- 0 -	- 0 -	- 0 -
Dr. Robert Ford 2517 NE Kresky Chehalis, WA 98532-2409 (360)748-8632	Director	- 0 -	- 0 -	- 0 -
Bill Hulsey Box 596 Collegedale, TN 37315 (423)396-3903	Director	- 0 -	- 0 -	- 0 -
Ellsworth McKee P. O. Box 750 Collegedale, TN 37315 (423)238-5487	Director	- 0 -	- 0 -	- 0 -
Danny Shelton P. O. Box 220 West Frankfort, IL 62896 (618)627-4651	President 40 hours	53,126.13	- 0 -	- 0 -
Linda Shelton P. O. Box 220 West Frankfort, IL 62896 (618)627-4651	Vice-President 40 hours	47,216.23	- 0 -	- 0 -
Stan Smith O. J. Jacobson Foundation Box 100 Lillooet, BC VOK 1V0 Canada (250)256-7535	Director	- 0 -	- 0 -	- 0 -
G. Ralph Thompson 12501 Old Columbia Pike Silver Spring, MD 20904-6600 (301)680-6000	Director	- 0 -	- 0 -	- 0 -
Owen Troy 1906 Dana Dr. Adelphi, MD 20783-2119 (301)431-0930	Director	- 0 -	- 0 -	- 0 -
Larry Welch 715 S. Mulkey Christopher, IL 62822 (618)724-9488	Director/Employee 40 hours	36,026.48	- 0 -	- 0 -

THREE ANGELS BROADCASTING NETWORK, INC.
FORM 990
FOR THE YEAR ENDED DECEMBER 31, 1999

37-1179056

PAGE 1, PART 1, LINE 8C GAIN OR (LOSS)

<u>ITEM</u>	<u>BOOK VALUE</u>	<u>GROSS SALE</u>	<u>GAIN (LOSS)</u>
DOWNLINK EQUIPMENT	7,722.00	7,722.00	0.00
TRUCK	6,000.00	6,000.00	0.00
LAND	<u>70,000.00</u>	<u>70,000.00</u>	<u>0.00</u>
TOTAL	<u>83,722.00</u>	<u>83,722.00</u>	<u>0.00</u>

PAGE 1, PART 1, LINE 10c
PAGE 1, PART 1, LINE 20
PAGE 2, PART II, LINE 42

SALES OF SATELLITE DISHES AND RELATED EQUIPMENT.
UNREALIZED LOSS ON INVESTMENTS
DEPRECIATION

PAGE 3, PART IV LINE 57b

ACCUMULATED DEPRECIATION

	<u>DECEMBER 31, 1998</u>		<u>DECEMBER 31, 1999</u>	
	<u>COST</u>	<u>ACC DEPR</u>	<u>COST</u>	<u>ACC DEPR</u>
LAND	291,296.00		474,467.00	
BUILDINGS	1,566,389.00	204,034.00	2,739,454.00	254,609.00
HOUSES	18,850.00	9,504.00	18,850.00	10,446.00
DOWNLINK EQUIPMENT	4,837,965.00	1,079,621.00	5,485,507.00	1,475,121.00
EQUIPMENT	4,414,352.00	2,732,025.00	4,976,339.00	3,290,283.00
VEHICLES	1,047,370.00	145,048.00	1,189,762.00	309,309.00
MISC ASSETS	76,000.00		77,482.00	
TOTAL	<u>12,252,222.00</u>	<u>4,170,232.00</u>	<u>14,961,861.00</u>	<u>5,339,768.00</u>

PAGE 3, PART IV, LINE 58

TRUSTS
ANNUITIES
EMPLOYEE ADVANCES

	<u>DECEMBER 31, 1998</u>	<u>DECEMBER 31, 1999</u>
TRUSTS	11,464,107.00	12,898,557.00
ANNUITIES	600,067.00	3,875,309.00
EMPLOYEE ADVANCES		14,500.00
TOTAL	<u>12,064,174.00</u>	<u>16,788,366.00</u>

PAGE 3, PART IV, LINE 65

TRUSTS
ANNUITIES
LIABILITY UNDER UNITRITRUST
AGREEMENTS

TOTAL

	<u>DECEMBER 31, 1998</u>	<u>DECEMBER 31, 1999</u>
TRUSTS	11,394,215.00	12,898,557.00
ANNUITIES	600,067.00	3,875,309.00
LIABILITY UNDER UNITRITRUST AGREEMENTS		1,005,916.00
TOTAL	<u>11,994,282.00</u>	<u>17,779,782.00</u>

THREE ANGELS BROADCASTING NETWORK, INC.
FORM 990
FOR THE YEAR ENDED DECEMBER 31, 1999

37-11790 SL

PAGE 3, PART IV, LINE 64b
NOTES PAYABLE

	<u>DECEMBER 31, 1998</u>	<u>DECEMBER 31, 1999</u>
MAPLES	30,000.00	25,000.00
SCHULER	34,983.00	34,983.00
BOATMAN'S	1,282.00	
MITCHELL	100,000.00	100,000.00
COMM BANK		10.00
TOTAL	<u>166,265.00</u>	<u>159,993.00</u>

Application for Extension of Time To File Certain Excise, Income, Information, and Other Returns

► **File a separate application for each return.**

Please type or print. File the original and one copy by the due date for filing your return. See instructions.

Name THREE ANGELS BROADCASTING INC	Employer identification number 37-1179056
Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address) P.O. BOX 220	
City, town or post office, state, and ZIP code. For a foreign address, see instructions. WEST FRANKFORT, IL 62896-0220	

Note: Corporate income tax return filers must use **Form 7004** to request an extension of time to file. Partnerships, REMICs, and trusts must use **Form 8736** to request an extension of time to file **Form 1065, 1066, or 1041.**

- 1 I request an extension of time until AUGUST 15, 2000, to file (check only one):
- | | | | |
|--|---|---|------------------------------------|
| <input type="checkbox"/> Form 706-GS(D) | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 1120-ND (sec. 4951 taxes) | <input type="checkbox"/> Form 8612 |
| <input type="checkbox"/> Form 706-GS(T) | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 3520-A | <input type="checkbox"/> Form 8613 |
| <input checked="" type="checkbox"/> Form 990 or 990-EZ | <input type="checkbox"/> Form 1041 (estate) (see instructions) | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8725 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 8804 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 6069 | <input type="checkbox"/> Form 8831 |

If the organization does not have an office or place of business in the United States, check this box

- 2a For calendar year 1999, or other tax year beginning _____ and ending _____
- b If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 3 Has an extension of time to file been previously granted for this tax year? Yes No
- 4 State in detail why you need the extension WE ARE AWAITING THE FINAL AUDITED FINANCIAL STATEMENTS TO PREPARE THE FORM 990.

- 5a If this form is for Form 706-GS(D), 706-GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, 8804, or 8831, enter the tentative tax, less any nonrefundable credits. See instructions. \$ _____
- b If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____
- c **Balance due.** Subtract line 5b from line 5a. Include your payment with this form, or deposit with FTD coupon if required. See instructions \$ _____

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form.

Signature ► Alan Lovin Title ► CPA Date ► 5/8/00

FILE ORIGINAL AND ONE COPY. The IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant — To Be Completed by the IRS

- We **HAVE** approved your application. Please attach this form to your return.
- We **HAVE NOT** approved your application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of your return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to your return.
- We **HAVE NOT** approved your application. After considering the reasons stated in item 4, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.
- We cannot consider your application because it was filed after the due date of the return for which an extension was requested.
- Other: _____

By: _____ Date: _____
Director

EXTENSION APPROVED

If you want a copy of this form to be returned to an address other than that shown above, please enter the address to which the copy should be sent.

Please Type or Print	Name GRAY HUNTER STENN LLP	MAY 30 2000
	Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address) P.O. BOX 1728	Internal Revenue Service Richard Creamer, Director Return Submission Processing
	City, town, or post office, state, and ZIP code. For a foreign address, see instructions. MARION, IL 62959	