EXTENDED TO NOVEMBER 15, 2017

990

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

16 Open to Public Inspection

| АГ | OI LITE | e 20 to calendar year, or tax year beginning and can be and can be and can be and can be also be and can be an | enaing | | |
|----------------------------|---------------------------------------|---|---------------|------------------------------|-------------------------------|
| B c | heck if oplicable | C Name of organization | | D Employer identifi | cation number |
| | Addres | | | | |
| | Name change | • | | 74-1 | 168931 |
| | Initial return Final return/ | Number and street (or P.O. box if mail is not delivered to street address) 2229 FM 1340 | Room/suite | E Telephone numbe | r 238-4455 |
| | termin ated | City or town, state or province, country, and ZIP or foreign postal code | | G Gross receipts \$ | 6,579,608. |
| | Ameno | | | H(a) Is this a group re | eturn |
| | Applic | | JR. | for subordinates | |
| | pendir | SAME AS C ABOVE | | H(b) Are all subordinates in | |
| ΙT | ax-exe | empt status: X 501(c)(3) 501(c) () ((insert no.) 4947(a)(1) c | or 527 | 7 | list. (see instructions) |
| | | e: WWW.MORANCH.COM | | H(c) Group exemption | |
| | | organization: X Corporation Trust Association Other ▶ | L Year | | A State of legal domicile: TX |
| | rt I | Summary | | | <u> </u> |
| • | 1 | Briefly describe the organization's mission or most significant activities: ${	t TO}$ PI | ROVIDE | E LEADERSHIP | AND |
| Activities & Governance | | FACILITIES FOR CONFERENCES, LECTURES, BIR | BLE ST | UDIES, AND | RELIGIOUS |
| rna | | Check this box if the organization discontinued its operations or dispos | | | |
| эле | | | | | 24 |
| Ğ | | Number of independent voting members of the governing body (Part VI, line 1b) | | | 24 |
| s & | | Total number of individuals employed in calendar year 2016 (Part V, line 2a) | | | 162 |
| vitie | | Total number of volunteers (estimate if necessary) | | | 1100 |
| cti | 7 a | Total unrelated business revenue from Part VIII, column (C), line 12 | | | 698,027. |
| ٨ | | Net unrelated business taxable income from Form 990-T, line 34 | | | -253,615. |
| | | · | | Prior Year | Current Year |
| Revenue | 8 | Contributions and grants (Part VIII, line 1h) | | 1,436,088. | 869,413. |
| | | Program service revenue (Part VIII, line 2g) | | 2,751,027. | 3,419,091. |
| eve | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | 298,244. | 329,503. |
| æ | | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 927,226. | 1,243,878. |
| | | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) . | | 5,412,585. | 5,861,885. |
| | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | 0. | 0. |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | | 0. | 0. |
| es | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . | | 3,805,345. | 3,956,963. |
| Expenses | 16a | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). Professional fundraising fees (Part IX, column (A), line 11e) | <u></u> | 0. | 0. |
| xbe | b | Total fundraising expenses (Part IX, column (D), line 25) | 55. | | |
| ш | | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 2,492,624. | |
| | 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | | 6,297,969. | |
| - 10 | 19 | Revenue less expenses. Subtract line 18 from line 12 | | -885,384. | -565,758. |
| t Assets or nd Balances | | | Ве | eginning of Current Year | End of Year |
| sset 3alai | 20 | Total assets (Part X, line 16) | | 17,031,910. | 17,407,062. |
| | | Total liabilities (Part X, line 26) | | 883,144. | 1,541,287. |
| Ž2 | | Net assets or fund balances. Subtract line 21 from line 20 | | 16,148,766. | 15,865,775. |
| | rt II | Signature Block | | | |
| | | Ities of perjury, I declare that I have examined this return, including accompanying schedules | | | y knowledge and belief, it is |
| true, | correc | t, and complete. Declaration of preparer (other than officer) is based on all information of wh | iich preparei | r nas any knowledge. | |
| ٥. | | Signature of officer | | I Date | |
| Sigr | | RICHARD R. POWELL, JR., PRESIDENT | | Duto | |
| Her | е | Type or print name and title | | | |
| | | | | Date Check | TI PTIN |
| Paid | | Print/Type preparer's name CURTIS MAXFIELD Preparer's signature | | if | |
| | arer | Firm's name WHITLEY PENN LLP | | self-employ Firm's EIN ▶ | 75-2393478 |
| | Only | Firm's address 8343 DOUGLAS AVENUE, STE. 400 | | THITSLIN | |
| | | DALLAS, TX 75225 | | Phone no (2 | 14)393-9300 |
| May | the IF | RS discuss this return with the preparer shown above? (see instructions) | | 1 110110 110. (2 | X Yes No |
| y | | (continuous) | | | 10 |

| | Check if Schedule O contains a response or note to any line in this Part III | ٦ |
|----|---|-----|
| 1 | Briefly describe the organization's mission: TO PROVIDE LEADERSHIP AND FACILITIES FOR CONFERENCES, LECTURES, BIBLE | _ |
| | STUDIES, AND RELIGIOUS TRAINING. | _ |
| | | |
| | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | |
| | prior Form 990 or 990-EZ? | 2 |
| | If "Yes," describe these new services on Schedule O. | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O. |) |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as 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 \$ 5,519,372. including grants of \$) (Revenue \$ 3,964,942. THE ORGANIZATION PROVIDED LEADERSHIP FOR CONFERENCES, LECTURES, BIBLE STUDIES AND RELIGIOUS TRAINING. APPROXIMATELY 25,500 PEOPLE ATTENDED THESE ACTIVITIES IN 2016. | |
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| 4b | (Code:) (Expenses \$ | |
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| 4c | (Code:) (Expenses \$ | _) |
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| 4d | Other program services (Describe in Schedule O.) | _ |
| | (Expenses \$ including grants of \$) (Revenue \$) | |
| 4e | Total program service expenses ► 5,519,372. | |

Form 990 (2016) PRESBYTERIAN Part IV Checklist of Required Schedules

| | | | Yes | No |
|-----|---|------|-----|----------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | v | |
| _ | If "Yes," complete Schedule A | 1 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | x |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | - | | |
| 7 | during the tax year? If "Yes," complete Schedule C, Part II | 4 | | x |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | • | | |
| • | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | х |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | |
| | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | Х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | Х |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | | | |
| | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? | | | |
| | If "Yes," complete Schedule D, Part IV | 9 | | Х |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | | | |
| | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | Х | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X | | | |
| | as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | 37 | |
| | Part VI | 11a | X | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | 441. | | X |
| _ | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | |
| C | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | x |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | 110 | | |
| _ | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | х | |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Х | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Х | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI and XII | 12a | Х | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | , , , , , | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | | | |
| | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | | . v |
| 45 | or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | 45 | | х |
| 16 | foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | 15 | | |
| IU | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | Х |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | _ - |
| •• | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | х |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | х |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | |
| | complete Schedule G, Part III | 19 | | Х |

Form 990 (2016) PRESBYTERIAN MO-RA Part IV Checklist of Required Schedules (continued)

| Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J | 20a 20b 21 22 23 24a 24b | | X X X |
|---|--|---|------------------|
| Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | 21 22 23 24a 24b | | х |
| domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | 22 23 24a 24b | | х |
| Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | 22 23 24a 24b | | х |
| Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | 23 24a 24b | | х |
| Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | 23 24a 24b | | х |
| and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | 24a 24b | | |
| Orbital to I | 24a 24b | | |
| Schedule J | 24a 24b | | |
| | 24b | | х |
| 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | 24b | | х |
| last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | 24b | | _ <u> </u> |
| Schedule K. If "No", go to line 25a | | | • |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24c | | <u> </u> |
| c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | 24c | | |
| any tax-exempt bonds? | | | |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | | | v |
| transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | X |
| b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | | | x |
| Schedule L, Part I | 25b | | |
| Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or | | | |
| former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," | | | x |
| complete Schedule L, Part II | 26 | | |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | | | |
| contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member | 07 | | $ _{\mathbf{x}}$ |
| of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | |
| Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | | |
| instructions for applicable filing thresholds, conditions, and exceptions): | 28a | | x |
| a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | X |
| c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | 200 | | |
| | 28c | | x |
| director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | | | X |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | 25 | | |
| contributions? If "Yes," complete Schedule M | 30 | | x |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? | 00 | | |
| If "Yes," complete Schedule N, Part I | 31 | | х |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | J. | | |
| Schedule N, Part II | 32 | | х |
| 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | <u> </u> | | |
| sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | Х |
| 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | |
| Part V, line 1 | 34 | | х |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | | Х |
| b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | |
| If "Yes," complete Schedule R, Part V, line 2 | 36 | | Х |
| 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | Х |
| 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | | | |
| Note. All Form 990 filers are required to complete Schedule O | 38 | Х | |

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 | | | | | | | | |
|----|---|-----|-----|----|--|--|--|--|--|
| | | | Yes | No | | | | | |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 60 | | | | | | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b | | | | | | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | | | | | | |
| | (gambling) winnings to prize winners? | 1c | | | | | | | |
| 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 2a 162 | | | | | | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Х | | | | | | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | | | | | | |
| За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | За | Х | | | | | | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O | 3b | Х | | | | | | |
| 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)? | | | | | | | | |
| b | If "Yes," enter the name of the foreign country: | | | | | | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | | | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | X | | | | | |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | Х | | | | | |
| С | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5c | | | | | | | |
| | 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 | | Х | | | | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | | | | | | |
| | were not tax deductible? | 6b | | | | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | X | | | | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | | | | | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | | | | | | | | |
| | to file Form 8282? | 7с | | X | | | | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | | | | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | X | | | | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | X | | | | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 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 | | | | | | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | | | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | | | | | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | | | | | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | | | | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | | | | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | | | | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | | | | | | |
| | Gross income from members or shareholders | | | | | | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | | | | | | | | |
| | amounts due or received from them.) | | | | | | | | |
| | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | | | | | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | | | | | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | | | | | | | |
| 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 | | | | | | | | |
| | Enter the amount of reserves on hand | | | 77 | | | | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | X | | | | | |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | | | | | | | |

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

| | Check if Schedule O contains a response or note to any line in this Part VI | | | X |
|-----|--|---------|------|----|
| Sec | tion A. Governing Body and Management | | | |
| | <u> </u> | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | |
| | body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent 1b 24 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | | | |
| _ | officer, director, trustee, or key employee? | 2 | | Х |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | _ | | |
| Ū | of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | Х |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 | Did the organization have members or stockholders? | 6 | | X |
| | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or | | | |
| 74 | more members of the governing body? | 7a | | Х |
| h | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | 74 | | |
| | persons other than the governing body? | 7b | | Х |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | 75 | | |
| | The governing body? | 8a | Х | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | 05 | | |
| Ū | organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | Х |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | | |
| | and the second by requestor morniation about periods not required by the meaning records | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | X |
| | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | | | |
| - | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | | X |
| | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Х | |
| | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | X | |
| | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | | |
| | in Schedule O how this was done | 12c | Х | |
| 13 | Did the organization have a written whistleblower policy? | 13 | Х | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Х | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | Х | |
| | Other officers or key employees of the organization | 15b | Х | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | |
| | taxable entity during the year? | 16a | | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation | | | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's | | | |
| | exempt status with respect to such arrangements? | 16b | | |
| Sec | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ► NONE | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are | vailab | le | |
| | for public inspection. Indicate how you made these available. Check all that apply. | | | |
| | Own website Another's website X Upon request Other (explain in Schedule O) | | | |
| 19 | Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and | l finan | cial | |
| | statements available to the public during the tax year. | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records: | | | |
| | FRED GAMBLE - 830-238-4455 | | | |
| | 2229 FM 1340. HUNT. TX 78024 | | | |

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

| (A) Name and Title | (B) Average | | | (C Pos | C) ition | 1 | | (D) Reportable | (E) Reportable | (F) Estimated |
|---------------------------------|--|--------------------------------|-----------------------|-----------|--------------|------------------------------|--------|--|----------------------------------|--|
| Name and Title | hours per week | box | , unle | ss pe | rson i | than is bot or/trus | h an | compensation | compensation from related | amount of other |
| | (list any hours for related organizations below line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| (1) THE REVEREND BILL GALBRAITH | 1.00 | | | | | | | | • | • |
| CHAIRMAN OF THE BOARD | 1 00 | Х | | Х | | | | 0. | 0. | 0. |
| (2) JOAN HUDSON | 1.00 | ١ | | l | | | | | • | • |
| VICE CHAIR | 1 00 | Х | | Х | | | | 0. | 0. | 0. |
| (3) CHARLOTTE HARPER | 1.00 | ١ | | l | | | | | • | |
| SECRETARY | 1 0 50 | Х | | Х | | | | 0. | 0. | 0. |
| (4) BOB TURNER | 0.50 | ١ | | | | | | | • | • |
| FINANCE & OPERATIONS CHAIR | 1 05 | Х | | | | | | 0. | 0. | 0. |
| (5) THE REVEREND DAVID EVANS | 1.25 | | | | | | | | • | 0 |
| DEVELOPMENT CHAIR | 0.50 | Х | | | | | | 0. | 0. | 0. |
| (6) ELLEN BENSON | 0.50 | | | | | | | | • | 0 |
| PROGRAM CHAIR | 1 00 | Х | | | | | | 0. | 0. | 0. |
| (7) ALAN BYARS | 1.00 | | | | | | | | • | 0 |
| AUDIT & RISK MANAGEMENT CHAIR | 0.50 | Х | | | | | | 0. | 0. | 0. |
| (8) ROBERT LAIRD | 0.50 | ,, | | | | | | | 0 | 0 |
| STRATEGIC PLANING | 0.50 | Х | | | | | | 0. | 0. | 0. |
| (9) STAN BEYER | 0.50 | ,, | | | | | | | 0 | 0 |
| TRUSTEE | 0.50 | Х | | | | | | 0. | 0. | 0. |
| (10) MEG BIERWIRTH | 0.50 | | | | | | | | • | • |
| TRUSTEE | 0.50 | Х | | | | | | 0. | 0. | 0. |
| (11) JERRY CAMP | 0.50 | ,, | | | | | | | 0 | 0 |
| TRUSTEE | 0.50 | Х | | | | | | 0. | 0. | 0. |
| (12) SUSAN COX | 0.50 | ٠,, | | | | | | | 0 | 0 |
| TRUSTEE | 0 50 | Х | | | | | | 0. | 0. | 0. |
| (13) JOE DE LA FUENTE | 0.50 | Ψ. | | | | | | | 0 | 0 |
| TRUSTEE | 0.75 | Х | | | | | | 0. | 0. | 0. |
| (14) SARAH FRENCH | 0.75 | Ψ. | | | | | | | 0 | 0 |
| TRUSTEE | 0.75 | Х | | | | | | 0. | 0. | 0. |
| (15) JOHN GALBRAITH | 0.75 | X | | | | | | 0. | 0. | 0 |
| TRUSTEE | 0.50 | ^ | _ | \vdash | <u> </u> | \vdash | _ | 0. | 0. | 0. |
| (16) BUTCH GERFERS | 0.50 | X | | | | | | 0. | 0. | ^ |
| TRUSTEE | 0.50 | ^ | _ | \vdash | <u> </u> | \vdash | _ | 0. | 0. | 0. |
| (17) MALCOLM HALL TRUSTEE | 0.50 | X | | | | | | 0. | 0. | 0. |
| 632007 11-11-16 | | Λ | | | <u> </u> | | | 1 0. | 0. | Form 990 (2016) |

Form **990** (2016)

| Section A. Officers, Directors, Trus | · · · · · · · · · · · · · · · · · · · | ploy | ees | _ | | ighe | st (| | | | | (E) | |
|--|---------------------------------------|--------------------------------|-----------------------|------------|--------------|------------------------------|-----------|-------------------------|-------------------------|-------|----------|----------------|----------|
| (A) (B) | | | | (C Posi | - | า | | (D) | (E) | | | (F) | |
| Name and title | Average hours per | | not c | heck r | more | than | | Reportable compensation | Reportable compensation | | | | |
| | week | | | nd a di | | | | from | from related | | l | other | J |
| | (list any | ctor | | | | | | the | organization | | l | pensati | on |
| | hours for | r dire | | | | ted | | organization | (W-2/1099-MIS | SC) | fr | om the | |
| | related | stee o | rustee | | | seu sa | | (W-2/1099-MISC) | | ļ | ı ~ | anizatio | |
| | organizations below | al tru | onal t | | loyee | comb | | | | ļ | l | d relate | |
| | line) | individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | | orga | anizatio | ıs |
| (18) DENNIS JENKINS | 0.50 | = | = | 0 | <u>~</u> | 王亚 | Œ | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | | 0. | | | 0. |
| (19) BEN NICHOLS | 0.75 | | | | | | | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | | 0. | | | 0. |
| (20) THE REVEREND BILL POE | 0.50 | | | | | | | | | • | | | ^ |
| TRUSTEE | 0 50 | Х | | | | | | 0. | | 0. | <u> </u> | | 0. |
| (21) WALT RICHARDSON | 0.50 | X | | | | | | | | 0. | | | Λ |
| TRUSTEE (22) LES STAPLES | 0.50 | ┝ | | | | | | 0. | | 0. | | | 0. |
| TRUSTEE | 0.30 | X | | | | | | 0. | | 0. | | | 0. |
| (23) KEVIN STARNES | 0.50 | 123 | | | | | | - | | | | | <u> </u> |
| TRUSTEE | | X | | | | | | 0. | | 0. | | | 0. |
| (24) JANE WOLTER-WILLIAMSON | 0.75 | | | | | | | | | | | | |
| TRUSTEE | | Х | | | | | | 0. | | 0. | | | 0. |
| (25) RICHARD POWELL | 60.00 | | | | | | | 440 400 | | | | | |
| PRESIDENT | | 닏 | | Х | | | <u> </u> | 113,428. | | 0. | 2 | 2,25 | 3. |
| | | - | | | | | | | | ļ | | | |
| 4b Cub total | | Щ | | | | | | 113,428. | | 0. | 2 | 2,25 | 3 |
| 1b Sub-total c Total from continuation sheets to Part V | | | | | | | | 0. | | 0. | | 2,25 | 0. |
| d Total (add lines 1b and 1c) | | | | | | | | 113,428. | | 0. | 2 | 2,25 | |
| Total number of individuals (including but n | | | | | | | | · | 0.000 of reportab | le | <u> </u> | | _ |
| compensation from the organization | | | | | | , | | | | | | | 1 |
| | | | | | | | | | | | | Yes | No |
| 3 Did the organization list any former officer, | | | | • | • | • | | • | | | | | |
| line 1a? If "Yes," complete Schedule J for s | | | | | | | | | | | 3 | | X |
| 4 For any individual listed on line 1a, is the su | | | - | | | | | | the organization | ļ | - | | 37 |
| and related organizations greater than \$15 | | | • | | | | | | | | 4 | | X |
| 5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com | | | | | | | | | | ' | 5 | | Х |
| Section B. Independent Contractors | ipiete Scriedui | e | Or Si | исп р | pers | SOIT | | | | | 5 | | |
| Complete this table for your five highest co | mpensated in | dep: | ende | ent c | onti | racto | ors 1 | that received more than | \$100,000 of con | npens | ation | from | |
| the organization. Report compensation for | | | | | | | | | | | | | |
| (A) | | | | | | | | (B) | | | (0 | | |
| Name and business | address | N | INC | E | | | | Description of s | services | | ompe | nsation | |
| | | | | | | | | | | | | | |
| | | | | | | | \dashv | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | \exists | | | - | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| Total number of independent contractors (i \$100,000 of compensation from the organi | | iot lii | mite | d to | | se li: | stec | d above) who received n | nore than | | | | |
| Too, ood of compensation from the organi | 2411011 | | | | | _ | | | | | _ | 990 (2) | 24.0) |

Form 990 (2016) PRESBYTT

Part VIII Statement of Revenue

| | | Check if Schedule O conta | ains a response | or note to any lin | e in this Part VIII | | | |
|--|------------|---|-----------------|--------------------|----------------------|--|--------------------------------|---|
| | | | · | · | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | Revenue excluded from tax under sections 512 - 514 |
| ıts Its | 1 a | Federated campaigns | 1a | | | | | |
| ar our | | Membership dues | | | | | | |
| S, G | | Fundraising events | | | | | | |
| ar, | | Related organizations | | | | | | |
| imi | е | Government grants (contributi | ions) 1e | | | | | |
| rion S | | All other contributions, gifts, grant | | | | | | |
| ibul | | similar amounts not included above | /e 1f | 869,413. | | | | |
| 함 | g | Noncash contributions included in lines | 1a-1f: \$ | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | h | Total. Add lines 1a-1f | | > | 869,413. | | | |
| | | | | Business Code | | | | |
| e | 2 a | PROGRAM SERVICE FEES | | 900099 | 3,419,091. | 2,948,859. | 470,232. | |
| Program Service Revenue | b | | | | | | | |
| o Si | С | | | | | | | |
| ran ev | d | | | | | | | |
| og | е | | | | | | | |
| ۵ ا | f | All other program service reve | | | | | | |
| | g | Total. Add lines 2a-2f | | > | 3,419,091. | | | |
| | 3 | Investment income (including | • | | | | | |
| | | other similar amounts) | | | 325,628. | | | 325,628. |
| | 4 | Income from investment of tax | | - 1 | | | | |
| | 5 | Royalties | | | | | | |
| | | | (i) Real | (ii) Personal | | | | |
| | | Gross rents | | | | | | |
| | | Less: rental expenses | | | | | | |
| | | Rental income or (loss) | | | | | | |
| | | Net rental income or (loss) | | | | | | |
| | 7 a | Gross amount from sales of | (i) Securities | (ii) Other | | | | |
| | | assets other than inventory | 186,544. | | | | | |
| | b | Less: cost or other basis | 100.660 | | | | | |
| | | and sales expenses | 182,669. | | | | | |
| | | Gain or (loss) | | | 2 075 | | | 3,875. |
| | | Net gain or (loss) | | > | 3,875. | | | 3,873. |
| nue | в а | Gross income from fundraising including \$ | - | | | | | |
| Other Rever | | | of | | | | | |
| Re | | contributions reported on line Part IV, line 18 | | | | | | |
| he | h | Less: direct expenses | | | | | | |
| ō | | Net income or (loss) from fund | | > | | | | |
| | | Gross income from gaming ac | | | | | | |
| | o u | Part IV, line 19 | | | | | | |
| | b | Less: direct expenses | | | | | | |
| | | Net income or (loss) from gam | | | | | | |
| | | Gross sales of inventory, less | | | | | | |
| | | and allowances | | 1,656,312. | | | | |
| | b | Less: cost of goods sold | | 535,054. | | | | |
| | | Net income or (loss) from sales | | | 1,121,258. | 893,463. | 227,795. | |
| | | Miscellaneous Revenu | | Business Code | | | · | |
| İ | 11 a | OTHER REVENUE | | 900099 | 90,906. | 90,906. | | |
| | b | DAY USE INCOME | | 900099 | 31,714. | 31,714. | | |
| | С | | | | | | | |
| | d | All other revenue | | | | | | |
| | | Total. Add lines 11a-11d | | | 122,620. | | | |
| | 12 | Total revenue. See instructions. | | | 5,861,885. | 3,964,942. | 698,027. | 329,503. |

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 respon- | se or note to any line in | this Part IX | | |
|-----------------|---|---------------------------|------------------------------|-------------------------------------|---------------------------------------|
| | not include amounts reported on lines 6b, 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 | | | | |
| 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 | 135,680. | 113,390. | 11,368. | 10,922. |
| 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 | 2,515,088. | 2,101,880. | 210,740. | 202,468. |
| 8 | Pension plan accruals and contributions (include | | | - | <u> </u> |
| - | section 401(k) and 403(b) employer contributions) | 151,614. | 126,705. | 12,704. | 12,205. |
| 9 | Other employee benefits | 953,075. | 796,493. | 79,858. | 76,724. |
| 10 | Payroll taxes | 201,506. | 168,400. | 16,884. | 16,222. |
| 11 | Fees for services (non-employees): | , | ., | , | · , — · |
| | | | | | |
| b | Legal | 47,891. | 41,243. | 4,197. | 2,451. |
| c | Accounting | | | -, | |
| d | | | | | |
| e | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| a a | Other. (If line 11g amount exceeds 10% of line 25, | | | | |
| 9 | column (A) amount, list line 11g expenses on Sch 0.) | 158,686. | 136,660. | 13,906. | 8,120. |
| 12 | Advertising and promotion | 86,104. | 74,152. | 7,546. | 4,406. |
| 13 | Office expenses | 40,689. | 35,041. | 3,566. | 2,082. |
| 14 | Information technology | 19,598. | 16,878. | 1,717. | 1,003. |
| 15 | | 23,0300 | 20,0701 | | 2,000 |
| | Royalties | 254,241. | 223,877. | 25,763. | 4,601. |
| 16 | Occupancy | 115,726. | 99,663. | 10,141. | 5,922. |
| 17 | Travel | 113,720. | 33,003. | 10,1410 | 5,522. |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 40 | | | | | |
| 19 | Conferences, conventions, and meetings | 11,351. | 9,775. | 995. | 581. |
| 20 | Interest | 11,5510 | 5,1150 | 7,7,5, | 301. |
| 21 | Payments to affiliates | 587,266. | 587,266. | | |
| 22 | Depreciation, depletion, and amortization | 146,159. | 125,872. | 12,808. | 7,479. |
| 23 | Other expenses. Itemize expenses not covered | 140,137. | 123,072. | 12,000 | 1,213. |
| 24 | above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) | | | | |
| а | CLEANING AND MAINTENANC | 372,054. | 320,411. | 32,604. | 19,039. |
| a b | SCHOLARSHIP | 188,852. | 162,638. | 16,550. | 9,664. |
| C | BANK AND CREDIT CARD FE | 74,123. | 63,834. | 6,496. | 3,793. |
| d | EQUIPMENT EXPENSE | 43,717. | 37,649. | 3,831. | 2,237. |
| | All other expenses | 324,223. | 277,545. | 27,932. | 18,746. |
| e 25 | Total functional expenses. Add lines 1 through 24e | 6,427,643. | 5,519,372. | 499,606. | 408,665. |
| <u>25</u> 26 | Joint costs. Complete this line only if the organization | 0,121,013. | 3,313,3720 | 100,000 | 100,000. |
| 20 | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | | | | |
| | . 🗀 | | | | |
| | Check here if following SOP 98-2 (ASC 958-720) | | | | Form 990 (2016) |

Form 990 (2016)

Part X | Balance Sheet

| Pa | rt X | Balance Sheet | | | | | |
|---------------|----------|--|------------|-----------------------|--------------------------|-------------|---------------------------|
| | | Check if Schedule O contains a response or not | e to an | y line in this Part X | | | |
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | | | | 1 | |
| | 2 | Savings and temporary cash investments | | | 30,764. | 2 | 93,527. |
| | 3 | Pledges and grants receivable, net | | 179,202. | 3 | 131,797. | |
| | 4 | Accounts receivable, net | 12,966. | 4 | 133,915. | | |
| | 5 | Loans and other receivables from current and fo | | | | | |
| | | trustees, key employees, and highest compensa | | | | | |
| | | Part II of Schedule L | | - | | 5 | |
| | 6 | Loans and other receivables from other disquali | | | | | |
| | | section 4958(f)(1)), persons described in section | | | | | |
| | | employers and sponsoring organizations of sect | | | | | |
| ş | | employees' beneficiary organizations (see instr). | | | | 6 | |
| Assets | 7 | Notes and loans receivable, net | | | | 7 | |
| Ÿ | 8 | Inventories for sale or use | | | 53,591. | 8 | 67,395. |
| | 9 | | | | 57,466. | 9 | 67,395. 73,585. |
| | 10a | Land, buildings, and equipment: cost or other | | | | | |
| | | basis. Complete Part VI of Schedule D | 10a | 21,495,539. | | | |
| | b | Less: accumulated depreciation | 10b | 13,224,077. | 8,256,730. 4,976,348. | 10c | 8,271,462. |
| | 11 | Investments - publicly traded securities | 4,976,348. | 11 | 5,058,607. | | |
| | 12 | Investments - other securities. See Part IV, line 1 | | 12 | | | |
| | 13 | Investments - program-related. See Part IV, line | | 13 | | | |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | | 3,464,843. | 15 | 3,576,774. |
| | 16 | Total assets. Add lines 1 through 15 (must equa | | | 17,031,910. | 16 | 17,407,062. |
| | 17 | Accounts payable and accrued expenses | 225,397. | 17 | 441,593. | | |
| | 18 | Grants payable | | 18 | | | |
| | 19 | Deferred revenue | | 19 | | | |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability. Complete I | Part IV | of Schedule D | | 21 | |
| es | 22 | Loans and other payables to current and former | | | | | |
| ≣ | | key employees, highest compensated employee | | | | | |
| Liabilities | | Complete Part II of Schedule L | | | | 22 | |
| _ | 23 | Secured mortgages and notes payable to unrela | | | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated | | | | 24 | |
| | 25 | Other liabilities (including federal income tax, par | | | | | |
| | | parties, and other liabilities not included on lines | 17-24 |). Complete Part X of | 657,747. | | 1 000 604 |
| | | Schedule D | | | 883,144. | 25 | 1,099,694. 1,541,287. |
| | 26 | Total liabilities. Add lines 17 through 25 | | V | 003,144. | 26 | 1,341,207. |
| | | Organizations that follow SFAS 117 (ASC 958 | | ck nere 🕨 🔼 and | | | |
| ces | 07 | complete lines 27 through 29, and lines 33 an | | | 11,267,668. | 07 | 10,949,487. |
| lan | 27 | Unrestricted net assets | | | 1,506,647. | 27 | 1,436,069. |
| Ba | 28 | Temporarily restricted net assets | | | 3,374,451. | 28 29 | 3,480,219. |
| Fund Balances | 29 | Permanently restricted net assets Organizations that do not follow SFAS 117 (A | | R) shock hore | 3,3/4,431• | 29 | 3,400,219 |
| Ē | | | 3C 93 | b), check here | | | |
| ts o | 30 | and complete lines 30 through 34. | | | | 30 | |
| se | 30 | Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or eq | | | | 31 | |
| Net Assets or | 31 32 | Retained earnings, endowment, accumulated in | | | | 32 | |
| Ne. | 33 | Total net assets or fund balances | | - | 16,148,766. | 33 | 15,865,775. |
| | 34 | Total liabilities and net assets/fund balances | | | 17,031,910. | 34 | 17,407,062. |
| | U-T | Total habilities and het assets/fully balafices | | | | | |

| Pa | rt XI Reconciliation of Net Assets | | | | |
|----|---|------------|-------|-----|-----|
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | |
| | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 5,86 | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 6,42 | | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -56 | | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 16,14 | | |
| 5 | Net unrealized gains (losses) on investments | 5 | 28 | 2,7 | 67. |
| 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 | | | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | | | | |
| | column (B)) | 10 | 15,86 | 5,7 | 75. |
| Pa | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | X |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | Ο. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | d 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? | | 2b | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat | e basis, | | | |
| | consolidated basis, or both: | | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th | e audit, | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2c | X | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Sch | edule O. | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si | ngle Audit | | | |
| | Act and OMB Circular A-133? | | За | | Х |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | | | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3b | | |

Form **990** (2016)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

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

PRESBYTERIAN MO-RANCH ASSEMBLY

2016

Open to Public Inspection

Employer identification number

74-1168931

Name of the organization

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). 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 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. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization

| | mation about the suppor | | (iv) Is the orga | anization listed | (a) American of management | (vi) Amazumt of other |
|-----------------------|-------------------------|---|------------------|------------------|----------------------------|----------------------------|
| (i) Name of supported | (ii) EIN | (iii) Type of organization (described on lines 1-10 | in your govern | ing document? | (v) Amount of monetary | (vi) Amount of other |
| organization | | above (see instructions)) | Yes | No | support (see instructions) | support (see instructions) |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 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 fails to qualify under the tests listed below, please complete Part III.)

| Sec | tion A. Public Support | | | | | | |
|------|---|----------|-----------------|-------------|----------|----------|------------|
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | 2067565. | 1333510. | 1202537. | 1436088. | 869,413. | 6909113. |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 2067565. | 1333510. | 1202537. | 1436088. | 869,413. | 6909113. |
| 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) | | | | | | 498,181. |
| | Public support. Subtract line 5 from line 4. | | | | | | 6410932. |
| | tion B. Total Support | - | | | - | | |
| | ndar year (or fiscal year beginning in) 🕨 | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| | Amounts from line 4 | 2067565. | 1333510. | 1202537. | 1436088. | 869,413. | 6909113. |
| 8 | Gross income from interest, | | | | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | 160 500 | 200 410 | 205 220 | 200 244 | 205 620 | 1200142 |
| | and income from similar sources | 168,522. | 300,419. | 305,330. | 298,244. | 325,628. | 1398143. |
| 9 | Net income from unrelated business | | | | | | |
| | activities, whether or not the | | | 000 010 | 707 531 | 600 007 | 2206270 |
| | business is regularly carried on | | | 020,012. | 787,531. | 698,027. | 2306370. |
| 10 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.) | | | | | | 10613626. |
| | Total support. Add lines 7 through 10 | | , | | | | ,594,128. |
| | Gross receipts from related activities, | , | , | | | | ,334,140. |
| 13 | First five years. If the Form 990 is for | | | | - | | . □ |
| Sec | organization, check this box and stop etion C. Computation of Publ | | rcentage | | | | <u></u> |
| | Public support percentage for 2016 (I | | | volumn (fl) | | 14 | 60.40 % |
| | Public support percentage from 2015 | | | | | 15 | 66.61 % |
| | 33 1/3% support test - 2016. If the c | | | | | - | |
| 100 | stop here. The organization qualifies | - | | | | | |
| h | 33 1/3% support test - 2015. If the c | | | | | | |
| | and stop here. The organization qual | | | | | | |
| 17a | 10% -facts-and-circumstances tes | | | | | | |
| ı, a | and if the organization meets the "fac | | | | | | |
| | meets the "facts-and-circumstances" | | | | | | |
| h | 10% -facts-and-circumstances tes | | | | | | |
| J | more, and if the organization meets the | _ | | | | | |
| | organization meets the "facts-and-circ | | • | | | | . . |
| 18 | Private foundation. If the organization | | | | | | |

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.)

| Se | ction A. Public Support | , 1 | , | | | | |
|-----|--|--------------------|----------------------|------------------------|----------------------|---------------------|----------------|
| Cal | ndar year (or fiscal year beginning in) 🕨 | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, | | | | | | |
| | merchandise sold or services per- | | | | | | |
| | formed, 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 bus- | | | | | | |
| | iness under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | 1 | | | | | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| 7 | Amounts included on lines 1, 2, and | | | | | | |
| | 3 received from disqualified persons | | | | | | |
| ŀ | 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 | | | | | | |
| • | Add lines 7a and 7b | | | | | | |
| | Public support. (Subtract line 7c from line 6.) | | | | | | |
| Se | ction B. Total Support | | | | | | |
| | endar year (or fiscal year beginning in) | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (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 | | | | | | |
| ŀ | Unrelated business taxable income | | | | | | |
| | (less section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | |
| | Add lines 10a and 10b | | | | | | |
| 11 | | | | | | | |
| | 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.) | | | | | | |
| | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| 14 | First five years. If the Form 990 is for | the organization's | s first, second, thi | rd, fourth, or fifth t | ax year as a section | on 501(c)(3) organi | zation, |
| | | | | | | | > L |
| | ction C. Computation of Publ | | | | | 11 | |
| | Public support percentage for 2016 (I | | | | | 15 | % |
| | Public support percentage from 2015 | | | | | 16 | % |
| | ction D. Computation of Inves | | | | | 47 | |
| | Investment income percentage for 20 | | | | | 17 | % |
| | Investment income percentage from 2 | | | | | 18 | % 17 is not |
| 198 | a 33 1/3% support tests - 2016. If the | | | | | | |
| | more than 33 1/3%, check this box at | | | | | | |
| t | 33 1/3% support tests - 2015. If the | • | | | • | • | |
| | line 18 is not more than 33 1/3%, che | | | | | | ' \ |

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

| | Yes | No |
|-------------|-------|------|
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| n 990 or 99 | 90-EZ | 2016 |

| Par | t IV Supporting Organizations (continued) | | | <u> </u> |
|------------|--|------------|-----|----------|
| | iii 3 3 (continuca) | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) | | | |
| | below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described in (a) above? | 11b | | |
| | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. | 11c | | |
| | tion 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? 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. | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported | | | |
| | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in | | | |
| | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, | | | |
| | supervised, or controlled the supporting organization. | 2 | | |
| Sec | tion 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)? If "No," describe in Part VI how control | | | |
| | or management of the supporting organization was vested in the same persons that controlled or managed | | | |
| | the supported organization(s). | 1 | | |
| <u>Sec</u> | tion 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? | 1 | | |
| 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? If "No," explain in Part VI how | | | |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a | | | |
| | significant voice in the organization's investment policies and in directing the use of the organization's | | | |
| | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | | |
| | supported organizations played in this regard. | 3 | | |
| | tion 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 yea(see instructions). | | | |
| a | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b | The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i> | | | |
| C | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins | structions | | |
| 2 | Activities Test. Answer (a) and (b) below. | | Yes | No |
| а | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of | | | |
| | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | | | |
| | 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 | | | |
| | | 20 | | |
| h | that these activities constituted substantially all of its activities. Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more | 2a | | |
| b | of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the | | | |
| | reasons for the organization's position that its supported organization(s) would have engaged in these | | | |
| | activities but for the organization's involvement. | 2b | | |
| 3 | Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> | 20 | | |
| | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | | | |
| а | trustees of each of the supported organizations? <i>Provide details in Part VI.</i> | 3a | | |
| h | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | Ja | | |
| ~ | J | | | |

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

| Pa | [↑] Type III Non-Functionally Integrated 509(a)(3) Supportin | g Orgar | nizations | | |
|------|---|-------------|----------------------------|--------------------------------|--|
| 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 | | | | |
| | other Type III non-functionally integrated supporting organizations must co | mplete Se | ections A through E. | | |
| Sect | ion 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 | | | |
| Sect | ion 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): | | | | |
| а | Average monthly value of securities | 1a | | | |
| b | Average monthly cash balances | 1 b | | | |
| с | Fair market value of other non-exempt-use assets | 1c | | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | | |
| е | 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 | | | |
| Sect | ion 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 | Check here if the current year is the organization's first as a non-functional | ly integrat | ed Type III supporting org | anization (see | |
| | instructions). | | | | |

Schedule A (Form 990 or 990-EZ) 2016

| Par | ↑ V Type III Non-Functionally Integrated 509 | (a)(3) Supporting Orga | anizations _(continued) | |
|-------|---|-------------------------------|-----------------------------------|-----------------|
| Secti | ion D - Distributions | | <u> </u> | Current Year |
| 1 | Amounts paid to supported organizations to accomplish exe | | | |
| 2 | Amounts paid to perform activity that directly furthers exemple | | | |
| | organizations, in excess of income from activity | | | |
| 3 | Administrative expenses paid to accomplish exempt purpos | ns | | |
| 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 t | he organization is responsive | Э | |
| | (provide details in Part VI). See instructions | | | |
| 9 | Distributable amount for 2016 from Section C, line 6 | | | |
| 10 | Line 8 amount divided by Line 9 amount | | | |
| | | (i) | (ii) | (iii) |
| Saati | ion E. Distribution Allocations (see instructions) | Excess Distributions | Underdistributions | Distributable |
| secu | ion E - Distribution Allocations (see instructions) | | Pre-2016 | Amount for 2016 |
| 1 | Distributable amount for 2016 from Section C, line 6 | | | |
| 2 | Underdistributions, if any, for years prior to 2016 (reason- | | | |
| | able cause required- explain in Part VI). See instructions | | | |
| 3 | Excess distributions carryover, if any, to 2016: | | | |
| а | | | | |
| b | | | | |
| С | From 2013 | | | |
| d | From 2014 | | | |
| е | From 2015 | | | |
| f | Total of lines 3a through e | | | |
| g | Applied to underdistributions of prior years | | | |
| h | Applied to 2016 distributable amount | | | |
| i | Carryover from 2011 not applied (see instructions) | | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| 4 | Distributions for 2016 from Section D, | | | |
| | line 7: \$ | | | |
| а | Applied to underdistributions of prior years | | | |
| b | Applied to 2016 distributable amount | | | |
| С | Remainder. Subtract lines 4a and 4b from 4 | | | |
| 5 | Remaining underdistributions for years prior to 2016, if | | | |
| | any. Subtract lines 3g and 4a from line 2. For result greater | | | |
| | than zero, explain in Part VI. See instructions | | | |
| 6 | Remaining underdistributions for 2016. Subtract lines 3h | | | |
| | and 4b from line 1. For result greater than zero, explain in | | | |
| | Part VI. See instructions | | | |
| 7 | Excess distributions carryover to 2017. Add lines 3j | | | |
| | and 4c | | | |
| 8 | Breakdown of line 7: | | | |
| а | | | | |
| | Excess from 2013 | | | |
| | Excess from 2014 | | | |
| d | Excess from 2015 | | | |
| е | Excess from 2016 | | | |

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| Part VI | (Form 990 or 990-EZ) 2016 PRESBYTERIAN MO-RANCH ASSEMBLY | 74-1168931 Page 8 |
|---------|--|---|
| rait vi | Supplemental Information. Provide the explanations required by Part II, line 10; Part I Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Secti line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for (See instructions.) | on B, lines 1 and 2; Part IV, Section C, line 1; Part V, Section B, line 1e; Part V, |
| | (See manactions.) | |
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