SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),

or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number Three Angels Broadcasting Network, Inc. Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees 1179056 Part I (See page 1 of the instructions. List each one. If there are none, enter "None.") (a) Name and address of each employee paid more (b) Title and average hours (d) Contributions to employee benefit plans & deferred compensation than \$50,000 (e) Expense (c) Compensation per week devoted to position account and other CA Murray allowances 14645 Paulton Rd, Thompsonville, IL 62890 Production Manager 55,832 **Director of Engineering** P.O. Box 39, Thompsonville, IL 62890 63,880 Lenard Westphal **Trust Service Director** 25306 Cypress St., Loma Linda, CA 92354 52,860 Total number of other employees paid over \$50,000 . Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 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 Siegel Brill Greupner Duffy (c) Compensation 100 Washington Ave S Ste 1300, Minneapolis, MN 55401-2110 Legal Services The Hartford 631,330 P.O. Box 2907, Hartford, CT 06104-2907 Insurance Fierst, Pucci and Kane LLP 191,823 64 Gothic Street, North Hampton 01060-3042 Legal Service Guadian Life Insurance 121,069 P.O. Box 95101, Chicago, IL 60694-5101 Insurance-Employee Benefits Davis Wright Tremaine LLP 75,368 1201 Third Ave Suite 2200, Seattle, WA 98101 Legal Services Total number of others receiving over \$50,000 for 68,127 professional services Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service Intelsat Corporation (c) Compensation P.O. Box 7247-8912, Philadelphia, PA 19170-8912 Satellite SES Americom California, Inc 627,330 P.O. Box 642961, Pittsburgh, PA 15264-2961 Satellite R.R. Satellite Communications 450,073 4 Hagoren Street, Industrial Park, Omer, Israel 84965 Satellite TopField N & S America 446,000 1064 Salk Road, Unit 11, Pickering, ON Canada L1W 4B5 Satellite Receiver Equipment Smith & Butterfield 363,614 PO Box 3446, Evansville, IN 47733-3446 Printing Total number of other contractors receiving over 331,568 \$50,000 for other services

21

I	Part III	Statements About Activities (0)			Page 2
Ξ		Statements About Activities (See page 2 of the instructions.)		Yes	No
	or incu	the year, has the organization attempted to influence national, state, or local legislation, including any of to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid in connection with the lobbying activities (Must equal amounts on line 38, A, or line I of Part VI-B.)	1		
	Organiz organiz	zations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other ations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of bying activities.			
2	with an	the year, has the organization, either directly or indirectly, engaged in any of the following acts with any utial contributors, trustees, directors, officers, creators, key employees, or members of their families, or y taxable organization with which any such person is affiliated as an officer, director, trustee, majority or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the income.)			
	a Sale, ex	change, or leasing of property?	0-		,
ł		of money or other extension of credit?	2a 2b		<u>√</u>
C	Furnishir	ng of goods, services, or facilities?	2c	1	
c	l Payment	of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		✓
е	Transfer	of any part of its income or assets?	2e		✓
3а	Did the o of how th	rganization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation ne organization determines that recipients qualify to receive payments.)	3a		✓
b		rganization have a section 403(b) annuity plan for its employees?	3b		✓ <u> </u>
С	Did the or space, the	ganization receive or hold an easement for conservation purposes, including easements to preserve open e environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3с		✓_
d		ganization provide credit counseling, debt management, credit repair, or debt negotiation services? .	3d		<u>/</u>
		ganization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete			
		ganization make any taxable distributions under section 4966?	4a 4b	,	<u>/</u>
		ganization make a distribution to a donor, donor advisor, or related person?	4c		_
		otal number of donor advised funds owned at the end of the tax year			0
		iggregate value of assets held in all donor advised funds owned at the end of the tax year \dots \blacktriangleright $lue{}$		·—	0
f :	Enter the to funds inclu amounts in	otal number of separate funds or accounts owned at the end of the tax year (excluding donor advised ded on line 4d) where donors have the right to provide advice on the distribution or investment of such funds or accounts			0
g l	Enter the ac	ggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year	2		0
					_

Pai	rt:	V Reason for Non-Priv	vato Foundatio	- 01-1 (0			Page
			vate Foundatio	n Status (See pages	4 through	8 of the instru	ıctions.)
5		y that the organization is not a p A church, convention of church	ches, or association	pecause it is: (Please ch	eck only ONE	applicable box.)
6					170(b)(1)(A)(i).		
		A school. Section 170(b)(1)(A)					
7		A hospital or a cooperative ho	ospital service orga	anization. Section 170(b)	(1)(A)(iii).		
8		A federal, state, or local gover	rnment or governm	nental unit. Section 170(b)(1)(A)(v).		
9		A medical research organization and state ▶	on operated in coni	romatica de la compansión	_	(1)(A)(iii). Enter t	he hospital's name, city
10		An organization operated for the (Also complete the Support Sci	e benefit of a collec	IE Or University owned or			
1a [eceives a substantia the Support Sche	al part of its support from dule in Part IV-A.)	a governmen	tal unit or from tl	he general public. Sectior
1b [J	A community trust. Section 170	0(b)(1)(A)(vi). (Also d	complete the Support S	ichedule in Pa	art IVA \	
3 [] ,	An organization that normally red from activities related to its cha from gross investment income organization after June 30, 1975. An organization that is not con requirements of section 509(a)(3) Type I Type II	and unrelated bus 5. See section 509(strolled by any dis- 3). Check the box	siness taxable income (la)(2). (Also complete the	ess sections, and Support School than foundator of supporting	d (2) no more the first tax) from bust the first two from managers) a corganization:	nan 33%% of its support sinesses acquired by the A.) and otherwise meets the
			,,,,		•	□Type III-Othe	
		Provide the following inf	(b)	ne supported organiza	tions. (See pa	ge 8 of the instr	ructions.)
Name	e (s)	s) of supported organization(s)			(e) Amount of support		
					Yes	No	_
-							
al .							
al .	<u>. </u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>		▶	
	Ar	n organization organized and op	perated to test for	oublic safety. Section 50	 09(a)(4). (See p	oage 8 of the ins	etructions.)

Schedule A (Form 990 or 990-EZ) 2007

P No	art IV-A Support Schedule (Complete onlete: You may use the worksheet in the instructions	y if you checked a	a box on line 10,	11, or 12.) Use of	ash method of	of accounting.
Cai	endar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15	Gifts, grants, and contributions received. (Do	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(6) 2001	(4) 2000	(e) rotar
	not include unusual grants. See line 28.).	16,784,084	14,671,736	14,237,962	12,918,51	1 58,612,293
16	Membership fees received			,,,,,,,,,	12,010,01	. 00,012,233
17	Gross receipts from admissions, merchandise					
	sold or services performed, or furnishing of facilities in any activity that is related to the	,				
	organization's charitable, etc., purpose	2,531,931	2,016,368	1,924,281	2,310,64	2 8,783,222
18	Gross income from interest, dividends,					
	amounts received from payments on securities loans (section 512(a)(5)), rents, royalties,					
	income from similar sources, and unrelated		·			
	business taxable income (less section 511					
	taxes) from businesses acquired by the organization after June 30, 1975	58,447	51,271	27 076	40.01	105 744
19	Net income from unrelated business	30,447	31,271	37,076	48,91	7 195,711
	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					
23	include gain or (loss) from sale of capital assets Total of lines 15 through 22	19,374,462	10 720 275	40 400 040	42 4-2 4-	
24	Line 23 minus line 17	16,842,531	16,739,375	16,199,319	15,278,070	
25	Enter 1% of line 23	193,745	14,723,007 167,394	14,275,038	12,967,428	
26				161,993	152,78	
	Organizations described on lines 10 or 11:				1	
b	Prepare a list for your records to show the name governmental unit or publicly supported organizations.	e of and amount	contributed by ea	ich person (other	than a	
	amount shown in line 26a. Do not file this list wi	alion) whose lotal	gitts for 2003 three	bugh 2006 excee	ded the 26b	
С	Total support for section 509(a)(1) test: Enter lin	ie 24. column (e)	or the total of all t	ilese excess ailio	unts ► 26c	
d	Add: Amounts from column (e) for lines: 18	1	9			
		2			▶ 26d	
е	Public support (line 26c minus line 26d total)				260	
f	Public support percentage (line 26e (numera	tor) divided by lin	e 26c (denomina	ator))	▶ 26f	%
27	Organizations described on line 12: a For person," prepare a list for your records to show t Do not file this list with your return. Enter the	amounts include	d in lines 15, 16,	and 17 that we	re received fro	om a "disqualified
	(2006) 417,415 (2005)	263,700	(2004)	185,984	(3003)	206,809
b	For any amount included in line 17 that was received	ed from each perso	on (other than "disc	qualified persons"	nrenare a liet	for your records to
	snow the name of, and amount received for each v	ear, that was more	than the larger of	(1) the amount on	line 25 for the	VOOR OF (0) OF 000
	(Include in the list organizations described in lines 5 the difference between the amount received and t	through 11b, as we	ll as individuals.) D lescribed in (1) or	o not file this list	with your retur	n. After computing
	amounts) for each year:					
	(2006) 1,660,056 (2005)	608,010	(2004)	570,694	(2003)	563,540
С	Add: Amounts from column (e) for lines: 15 _	58,612,293	6			
	178,783,22220		21	_	▶ 27c	67,395,515
d		nd line 27b total	3,402,30	~)	27d	4,476,208
е	Public support (line 27c total minus line 27d total	al)			27e	62,919,307
f	Total support for section 509(a)(2) test: Enter am	ount from line 23.	column (e)	► <u>27f</u> 67,	591,226	_,,_
g	Public support percentage (line 27e (numerat	or) divided by line	e 27f (denomina	tor))	. ▶ 27g	93.09 %
h	Investment income percentage (line 18, colun	nn (e) (numerator) divided by line	27f (denominate	or)). ► 27h	.29 %
28	Unusual Grants: For an organization described	in line 10, 11, or	12 that received	any unusual gra	ints during 20	03 through 2006.
	prepare a list for your records to show, for each description of the nature of the grant. Do not file	i vear, the name i	of the contributor	the date and a	mount of the	grant and a brint

Part V

35

	Part V Private School Questionnaire (See page 9 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)			F	age
29	Does the organization have a racially nondiscriminatory policy toward at ideate by a tow		Y	'es	N
30	a same and the a resolution of its doverning body.	1 0	9		_
	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, that the propriet is a statement of its racially nondiscriminatory policy toward students in all its programs, and scholarships?		,	•	
31	rids the organization publicized its racially pondiscriminaton, notice the		+	\dashv	_
	that makes the policy known to all parts of the general community it corrects	31			
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			7	
		7.			
32	Does the organization maintain the following:				
	Records indicating the racial composition of the student body, faculty, and administrative to	328	,		
b	Trecords documenting that scholarships and other financial assistance are awarded on a residue with	3	1	\top	_
С	Copies of all catalogues, brochures appouncements and other with a	32b	-		
4		320			
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.)				
33	Does the organization discriminate by race in any way with respect to:				
а		220			
h		33a	-	+	_
Ü	Admissions policies?	33b	ļ	_	
С	Employment of faculty or administrative staff?	33c			
d	Scholarships or other financial assistance?	33d			
е	Educational policies?	33e			
f	Use of facilities?	33f			
g	Athletic programs?				
h	Other extracurricular activities?	33g		\vdash	_
		33h		-	
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)				
a l	Does the organization receive any financial aid or assistance from a governmental agency?	240			
	Has the organization's right to such aid ever been revoked or suspended?	34a			_
I	If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b			_
[Does the organization certify that it has complied with the applicable and		ž.		
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	1		

	Lobbying Expenditures by (To be completed ONLY by	an engible of da	c Charities (Sanization that	ee page 11	of th	ne instruc	tions	Pag
<u>Cr</u>	neck ▶ a ☐ if the organization belongs to an af	filiated group. C	heck ► b 🗌	if you checked	" a " ar	nd "limited o	ontrol	" provisions appl
	Limits on Lobb	ying Expenditi	ıres			(a)		(b)
	(The term "expenditures" me	eans amounts pai	d or incurred.)			Affiliated of totals		To be complete for all electing
36	Total lobbying expenditures to influence pub	lic oninion (grass)	costa labla de la		36	· · · · · · · · · · · · · · · · · · ·		organizations
37	rotal loopying expenditures to influence a lea	dislative hody (dir	act labbuing)		37			
38	and lobbying experiditures (add lines 36 and	1.37)			38			
39	Cirier exempt purpose expenditures				39			
40	iotal exempt purpose expenditures (add line)	s 38 and 39\			40	· · · · · · · · · · · · · · · · · · ·		
41	to be ying normaxable amount. Enter the amou	unt from the follow	wing table—	•				
	The	lobbying nontax	able amount in	_				
	Not over \$500,000	of the amount o	n line 40					
	Over \$1,000,000 but not over \$1,000,000 . \$100	0,000 plus 15% of	the excess over \$	500,000				
	Over \$1,000,000 but not over \$1,500,000 . \$175	,000 plus 10% of t	ne excess over \$1	,000,000	41			
	Over \$1,500,000 but not over \$17,000,000 . \$225 Over \$17,000,000 \$1.00	,000 plus 5% of th	e excess over \$1	,500,000	- 1			
42	Grassroots pontavable amount (enter 050)	00,000						
13	Grassroots nontaxable amount (enter 25% of Subtract line 42 from line 36. Enter 0. 16 line	ine 41).			42			
14	Subtract line 42 from line 36. Enter -0- if line 4. Subtract line 41 from line 38. Enter -0. if line 4.	42 is more than li	ne 36		43			
	Subtract line 41 from line 38. Enter -0- if line			II.	44			
	Caution: If there is an amount on either line 4.	3 or line 44. vou i	must file Form 4	720				
	(Some organizations that made a section See the instructions f	The second serious	in 30 on page 1.	of the instru	ictions	5.)		
	Colonda	LOD	bying Expenditu	res During 4	I-Year	Averagin	g Per	iod
	Calendar year (or fiscal year beginning in) ▶	(a)	(b)	(c)		(d)	T	(e)
		2007	2006	2005		2004		Total
5	Lobbying nontaxable amount							
6	Lobbying ceiling amount (150% of line 45(e))							·
7	Total lobbying expenditures							
3	Grassroots nontaxable amount							-
)	Grassroots ceiling amount (150% of line 48(e))							
)	Grassroots lobbying expenditures				\top			
ari	VI-B Lobbying Activity by Nonelect	ting Public Ch	arities					
ring	(For reporting only by organizating the year, did the organization attempt to influence public opinion on a logislating of the part to influence public opinion on a logislating or the part of the pa	ons that did in	or complete P	art VI-A) (Si	ee pa	ge 14 of	the i	nstructions.)
em	pt to influence public opinion on a legislative ma	etter or referende	e or local legisla	tion, including	g any	Yes N	0	Amount
a ¹	Volunteers			se of:				
	Dold staff	in expanses ran						
	raid stail or management (Include compensation			through h)			1	
o l	Paid staff or management (Include compensation Media advertisements	, iii expenses rep	orted on lines C	unough m.).				
l d	Todat davertisements.			· · · · ·	• •			
b I c I d I f F	Mailings to members, legislators, or the public. Publications, or published or broadcast statement		· · · · · · ·		· · ·			
b l c l l l l l l l l	Mailings to members, legislators, or the public . Publications, or published or broadcast statemer Grants to other organizations for lobbying purpose	nts	· · · · ·	· · · · ·				
	Mailings to members, legislators, or the public Publications, or published or broadcast statemer Grants to other organizations for lobbying purpospirect contact with legislators, their staffs, govern	nts						
b c l d l l d l l l l l	Mailings to members, legislators, or the public. Publications, or published or broadcast statement	nts	a legislative boo		· · · · · · · · · · · · · · · · · · ·			

Part VII

Pa	rt V	Exempt (Transfers To and Tra (See page 14 of the instru				
51 a		d the reporting org 1(c) of the Code (d	ganization directly other than section	or indirectly engage in any constitutions or in 501(c)(3) organizations) or in	f the following with a	any other organization to political organizatio	described	in section
	(i)	Cash	sporting organiza	tion to a noncharitable exempt	organization of:			Yes No
	(ii)	Other assets					51a(i)	✓
b	Oth	ner transactions:					a(ii)	/
			ides of assets wit	h a noncharitable				
	(ii)	Purchases of as	sets from a none	h a noncharitable exempt orga haritable exempt organization	inization		b(i)	_ /
	(iii)	Rental of facilitie	es, equipment or	other assets			b(ii)	
	(iv)	Reimbursement	arrangements	omor assets	• • • • • •		b(iii)	
	(v)	Loans or loan gu	uarantees				b(iv)	
	1.0	i chomiance of s	services or memo	Pership or fundraising solicitati	ana	$(\boldsymbol{x}_{i}, \boldsymbol{x}_{i}, \boldsymbol{x}_{i}, \boldsymbol{x}_{i}, \boldsymbol{x}_{i}, \boldsymbol{x}_{i}, \boldsymbol{x}_{i}, \boldsymbol{x}_{i})$	b(v)	✓
С	Ona	ring or racinities, e	quibment, mailine	Ilists other assets or noid or	oml	* * * * * * *	b(vi)	
u	aood	ds. other assets	the above is "Ye	is," complete the following sche by the reporting organization. In column (d) the value of the column	dule. Column (b) shou	IId always show the fair	c r market va market val	alue of the lue in any
(4)	<i>'</i>	(D)		(c)	, , , , , , , , , , , , , , , , , , , ,			
Line	no.	Amount involved	Name of no	oncharitable exempt organization	Description of tra	(d) nsfers, transactions, and s	haring arrang	gements
								
	_						-	
——	-							
 -	+							
	-							
2a is de b if	the escri "Yes	s," complete the f	ectly or indirectly 1(c) of the Code ollowing schedule	affiliated with, or related to, (other than section 501(c)(3)) os:	one or more tax-exer in section 527?	empt organizations	Yes	☑ No
		(a) Name of organiza	tion	(b)		(c)		
			don	Type of organization		Description of relationship		
			<u> </u>					
					 			
					 			
					 			
					 			
								
					 			
					 	· · · · · · · · · · · · · · · · · · ·		
					 			

#37-1179056

Statement 1 Form 990, Part I, Line 8 Net Gain (Loss) form Noninventory Sales

Publicly Traded Securities

Description:
Date Acquired:
How Acquired:
Date Sold:
To Whom Sold:

Gross Sales Price

Cost Basis Loss on Sale

Other Assets

Description:
Date Acquired:
How Acquired:
Date Sold:
To Whom Sold:

Gross Sales Price Cost Basis Loss on Sale Securities
Various
Purchased or Donated
Various

Market Shares - Unknown

377,013 371,878 5,135

Capital Assets Various Purchased or Donated

Various Various

> 138,914 140,721 (1,807)

#37-1179056

Statement 2 Form 990, Part II, Line 43 Other Expenses

Other Expenses	Total	Program Services	Management & General	Fundraising
Advertising and Promotion Bad Debts Bank Charges Broadcasting Cable Promotion Cost of Goods Given Away Contract Labor Donations Dues and Registration Insurance Miscellaneous Music Production Special Projects Trust	92,286 330 73,342 273,709 1,145 1,065,030 105,866 125,739 31,624 344,958 74,421 41,684 701,597 106,333 3,038,064	273,709 1,145 1,065,030 105,796 31,624 41,684 677,874	92,286 330 73,342 70 125,739 344,958 74,421 23,723 106,333 841,202	
04-4				

Statement 3 Form 990, Part IV, Line 55 Land, Buildings and Equipment

Land held in Charitable Remainder Unitrusts

3,120,000

Statement 4 Form 990, Part IV, Line 57 Land, Buildings and Equipment

Asset	Cos	Accum. Deprec.	. 100 001
Buildings Land Land Improvements Machinery & Equipment Vehicles Construction in Progress	6,679,379 725,273 534,047 20,958,895 1,415,948 391,676 30,705,218	1,319,658 161,117 16,435,241 1,364,609 19,280,625	5,359,721 725,273 372,930 4,523,654 51,339 391,676 11,424,593

#37-1179056

Statement	5		
Form 990 I	Part IV	Line	58
Other Asse		,	

Deposits Annuities Trusts	288,951 10,577,027 29,120,646 39,986,624
Statement 6 Form 990 Part IV, Line 65 Other Liabilities	
Annuities Liabilities under Unitrust Agreements Revocable Trust Liabilities	12,723,751 1,595,547 29,120,646 43,439,944
Statement 7 Form 990 Part IV-A, Line B(4) Other Amounts	
Cost of Goods Sold - Satelites Rental Expenses	435,725 2,089
Statement 8 Form 990 Part IV-B, Line B(4) Other Amounts	437,814
Cost of Goods Sold - Satelites Rental Expenses	435,725 2,089 437,814

#37-1179056

Statement 9
Form 990, Part V-A
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title & Avg. Hrs/Wk	Comp.	Employee Benefits	Expense Account
Dr. Walter Thompson 174 Fox Borough Burr Ridge, IL 60521	Chairman None	0	0	0
Kenneth Denslow 619 Plainfield Rd., 3rd Floor Willowbrook, IL 60521-5381	Director None	0	0	0
May Chung 155 Manchester Lane San Bernardino, CA 92408	Director None	0	0	0
Larry Ewing PO Box 75 Thompsonville, IL 62890	Treasurer 40 hrs/wk	62,558		
Merlin Fjarli 670 Mason Way Medford, OR 97501	Director None	0	0	0
Bill Hulsey PO Box 596 Collegedale, TN 37315	Director None	0	0	0
Ellsworth McKee PO Box 750 Collegedale, TN 37315	Director None	0	0	0
Wintley Phipps PO Box 8008 Vero Beach, FL 32963	Director None	0	0	0
Danny Shelton 2954 New Lake Road West Frankfort, IL 62896	President Director 40 hrs/wk	78,404	0	0

#37-1179056

Statement 9
Form 990, Part V (Continued)
List of Officers, Directors, Trustees, and Key Employees

Mollie Steenson 400 E. 9th Street Johnston City, IL 62951	Secretary Director 40 hrs/wk	65,592		
Carmelita Troy 4024 Ronda Rd. Pebble Beach, CA 93953	Director None	0	0	0
Larry Welch 715 S Mulkey Christopher, IL 62822	Director 40 hrs/wk	43,356	0	0
	-	249,910		

Statement 10
Form 990, Part V, Line 90A
List of States Which This Return is Filed
California
Illinois
Oregon

Statement 11 Form 990, Part VII

Relationship of Activities to the Accomplishment of Exempt Purposes

Line #	Explanation of Activities		
93	Payment for airtime & production of certain religious programming		
95	Interest income is used to help offset general operating expenses		
97	Rental income is used to help offset general operating expenses		
100	Gain or loss from sales other than inventory helps offsett general operating expenses		
102	Sale of satellite dishes to enable veiwers to receive programming		
103c	Other income is used to help offset general operating expenses		

Statement 12 Schedule A, Part III, Line 2c

Three Angels Broadcasting Network, Inc. uses the services of the Westphal Law Group a principal of which is related to the Director of Trust Services

Three Angels Broadcasting Network, Inc. purchases inventory from a corporation controlled by a person related to the President.

Three Angels Broadcasting Network, Inc. contracts music services from a person related to the President.