Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

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

Open to Public Inspection

A	For the	e 2020 calen	dar year, or tax year beginning 07/01/2020 and ending	I	06/30/2	021								
в	Check if	f applicable:	cable: C Name of organization POINT OF VIEW MINISTRIES INC D Employ											
	Address	s change	Doing business as				75-1751385							
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address)	n/suite	E Telephone number									
	Initial re	turn	9330 Lyndon B Johnson Fwy Ste 1050			972-692-1300								
	Final ret	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code											
	Amende	ed return	Dallas, TX, 75243		G Gross	receipts \$ 1,586,191								
	Applicat	tion pending	H(a) Is this a grou	ıp return f	or subordinates? 🗌 Yes 🗹 No									
	_		9330 Lyndon B Johnson Fwy Ste 1050, Dallas, TX 75243		H(b) Are all sul	oordinat	es included? 🗌 Yes 🗌 No							
I	Tax-exe	empt status:	✓ 501(c)(3) 501(c) () ◄ (insert no.) 4947(a)(1) or 52	7	If "No," attach	a list. S	ee instructions							
J	Website	e: 🕨 pointof	view.net		H(c) Group exe	emption	number 🕨							
κ	Form of	organization: 🗸	Corporation ☐ Trust ☐ Association ☐ Other ► L Year of fo	rmation	: 1974	M State	of legal domicile: TX							
Ρ	art I	Summa	ry											
	1	Briefly des	cribe the organization's mission or most significant activities: 501	c)3 Re	ligious Orga	nizatio	n. As a media							
e		ministry, w	e use the powerful tool of live, daily, national talk radio and the latest	digital	technology	to prov	vide biblical clarity,							
Activities & Governance		truth, and o	content to restore a Christian biblical worldview to the culture.											
veri	2	Check this	box \blacktriangleright if the organization discontinued its operations or dispos	ed of	more than 2	5% of	its net assets.							
ő	3	Number of	voting members of the governing body (Part VI, line 1a)			3	8							
~	4	Number of	independent voting members of the governing body (Part VI, line	1b) .		4	5							
ties	5	Total numb	per of individuals employed in calendar year 2020 (Part V, line 2a)	5	11									
tivi	6	Total numb	per of volunteers (estimate if necessary)	6										
Ac	7a	Total unrel	ated business revenue from Part VIII, column (C), line 12		7a	5,171								
	b	Net unrelat	ted business taxable income from Form 990-T, Part I, line 11			7b	0							
					Prior Year		Current Year							
e	8	Contributio	ons and grants (Part VIII, line 1h)		1,13	81,791	1,371,494							
Revenue	9	Program se	ervice revenue (Part VIII, line 2g)			0	0							
eve	10	Investment	t income (Part VIII, column (A), lines 3, 4, and 7d)			-90	7,456							
Œ	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2	2,598	207,241							
	12	Total reven	ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12		1,15	54,299	1,586,191							
	13	Grants and	d similar amounts paid (Part IX, column (A), lines 1–3)			0	525							
	14	Benefits pa	aid to or for members (Part IX, column (A), line 4)			0	0							
Se	15	Salaries, ot	her compensation, employee benefits (Part IX, column (A), lines 5–10		66	5,354	713,017							
nse	16a	Profession	al fundraising fees (Part IX, column (A), line 11e)		1	3,885	14,884							
Expenses	b	Total fundr	raising expenses (Part IX, column (D), line 25) ►210,676											
Ш	17	Other expe	enses (Part IX, column (A), lines 11a–11d, 11f–24e)		39	96,189	551,688							
	18	Total expe	nses. Add lines 13–17 (must equal Part IX, column (A), line 25) .		1,07	5,428	1,280,114							
	19	Revenue le	ess expenses. Subtract line 18 from line 12		7	8,871	306,077							
s or				Beg	inning of Curre	nt Year	End of Year							
Net Assets or Fund Balances	20	Total asset	ts (Part X, line 16)		27	5,710	311,016							
t As Id Bå	21	Total liabili	ties (Part X, line 26)		33	39,429	68,658							
			or fund balances. Subtract line 21 from line 20		-6	53,719	242,358							
Pa	art II	Signatu	re Block											

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

Sign Here	Signature of officer Kerby Anderson, CEO Type or print name and title			Date	!				
Paid	Print/Type preparer's name	Preparer's signature	Date		Check if if self-employed	PTIN			
Preparer Use Only	Firm's name	Firm's name							
Use Only	Firm's address ►	Phone no.							
May the IRS discuss this return with the preparer shown above? See instructions									
For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form									

Form 99	(2020) Page	2
Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	_
1	Briefly describe the organization's mission:	_
	501(c)3 Religious Organization. As a media ministry, we use the powerful tool of live, daily, national talk radio and the latest digital	
	technology to provide biblical clarity, truth, and content to restore a Christian biblical worldview to the culture.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?)
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	,
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured l expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$891,680 including grants of \$0) (Revenue \$1,586,191) As a media ministry, we use the powerful tool of live, daily, national talk radio and the latest digital technology to provide biblical clarity, truth, and content to restore a Christian biblical worldview to the culture.	
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)	
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)	
4d	Other program services (Describe on Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)	
4e	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0) Total program service expenses ► 891,680	—
		_

Form 99	0 (2020)		F	Page 3
Part	V 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)? <i>If "Yes," complete Schedule A</i>	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		r
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		r
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? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		~
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? <i>If "Yes," complete Schedule D, Part IV</i> .	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .	10	~	
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, Part VI	11a	~	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	~	
С	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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		~
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	~	
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		r
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		r
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		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
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 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		~
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 foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		~
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? <i>If "Yes," complete Schedule G, Part I</i> See instructions	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		r
20a b	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a 20b		~
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		~

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		~
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? <i>If "Yes," complete Schedule J</i> .	23		~
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		~
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
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? <i>If "Yes," complete Schedule L, Part I </i>	25b		~
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		~
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
b	"Yes," complete Schedule L, Part IV	28a 28b		~ ~
b C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
	"Yes," complete Schedule L, Part IV	28c		~
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	~	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		~
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		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
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		~
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
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	~	
Part				
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			

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Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	~	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b	~	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
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		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
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	~	
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?	7c		~
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		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
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.	•		
a	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: Initiation fees and capital contributions included on Part VIII, line 12			
a	•			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a				
b	Gross income from other sources (Do not net amounts due or paid to other sources			
100	against amounts due or received from them.)	12a		
12a		128		
ь 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	154		
h				
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
с	the organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	170		
10	excess parachute payment(s) during the year?	15		~
	If "Yes," see instructions and file Form 4720, Schedule N.	10		-
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.			-

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Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Sc	chedule O. S	See in	struc							
	Check if Schedule O contains a response or note to any line in this Part VI				~						
Secti	on A. Governing Body and Management			Yes	No						
	Enter the number of voting members of the governing body at the and of the towney.										
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	8									
	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 on Schedule O.										
b											
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation any other officer, director, trustee, or key employee?		2	~							
3	Did the organization delegate control over management duties customarily performed by or under the supervision of officers, directors, trustees, or key employees to a management company or other performed by the supervision of officers.		3		~						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 v	was filed?	4		~						
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?.	5		~						
6	Did the organization have members or stockholders?		6		~						
7a	Did the organization have members, stockholders, or other persons who had the power to elect o one or more members of the governing body?	r appoint	7a		~						
b	Are any governance decisions of the organization reserved to (or subject to approval by) r	nembers.									
-	stockholders, or persons other than the governing body?		7b		~						
8	Did the organization contemporaneously document the meetings held or written actions undertake	en durina									
	the year by the following:	J									
а	The governing body?		8a	~							
b	Each committee with authority to act on behalf of the governing body?		8b	~							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	eached at									
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		~						
Secti	on B. Policies (This Section B requests information about policies not required by the Inter	nal Reveni	le Co	ode.)							
				Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	[10a		~						
b	If "Yes," did the organization have written policies and procedures governing the activities of such affiliates, and branches to ensure their operations are consistent with the organization's exempt purp		10b								
11a											
b	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	~							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflicts?	12b	~							
с	Did the organization regularly and consistently monitor and enforce compliance with the policy?	t t									
	describe in Schedule O how this was done		12c	~							
13	Did the organization have a written whistleblower policy?		13	~							
14	Did the organization have a written document retention and destruction policy?		14	~							
15	Did the process for determining compensation of the following persons include a review and applicate independent persons, comparability data, and contemporaneous substantiation of the deliberation and deliberat	proval by									
а	The organization's CEO, Executive Director, or top management official		15a	~							
	Other officers or key employees of the organization		15b	~							
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		150	•							
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arra	ngomont									
16a	with a taxable entity during the year?		16a		~						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to ev participation in joint venture arrangements under applicable federal tax law, and take steps to safe	guard the									
	organization's exempt status with respect to such arrangements?		16b								
Secti	on 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 (1024 or 1024-A, if applicable), 990, (3)s only) available for public inspection. Indicate how you made these available. Check all that apply		(Sec	tion 5	501(c)						
	✓ Own website ✓ Another's website ✓ Upon request ✓ Other (explain on Schedule)	e O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents and financial statements available to the public during the tax year.				olicy,						
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks and rec	ords								
	Rob Manley - Director of Finance, (972)692-1329										

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

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.

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

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

(A) (B) Position (D) (E) (E) Name and title Average hours Average hours Image: Average hours <th>amount ner sation the ion and</th>	amount ner sation the ion and
Name and title Average hours (do not check more than one box, unless person is both an officer and a director/trustee) Reportable Reportable Estimated	amount ner sation the ion and
hours officer and a director/trustee) compensation compensation of ot	ner sation the ion and
por wook transferrence transferr	the on and
hours for divide the provided state of the p	on and
related $\begin{vmatrix} c \\ b \\ c \\$	Inizations
below $\begin{bmatrix} \alpha & \alpha \\ \alpha & \beta \\ \alpha & $	
Warren Kelley 40.00	
COO V V 81,777 0	64,970
Kerby Anderson 40.00 40.00	
CEO 🖌 🖌 🖌 95,142 0	0
David Carruth 0.00	
Vice President V 0 0	0
Jennie Malouf Gilchrist 0.00	
Trustee 0 0	0
Thomas Leppert 0.00	
Trustee 0 0	0
Mary Maddoux 0.00	
Trustee 0 0	0
Kelly Shackelford 0.00	
Trustee 0 0	0
Rev Kermit Bridges 0.00	
Secretary V V 0 0	0

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Em	ploy	yee	s, an	d⊦	lighest Compe	nsated	Emplo	yees (a	contin	iued)
	(A) Name and title	(B) Average hours	Average (do not check more that box, unless person is b						(D) Reportable compensation from the	(E) Reportable compensation		on of other		
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from re organiza (W-2/1099	ations	fro	pensation om the zation a organiza	and
			-											
			-											
1b c	Subtotal					 	•	► ►	176,919		0			4,970
d 2	Total (add lines 1b and 1c)						above		176,919	o than ¢1	0	of	64	4,970
	reportable compensation from the organi			1056	- 1151			<i>=)</i> vv			00,000	01	Yes	No
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete s</i>								loyee, or highes			3		~
4	For any individual listed on line 1a, is the organization and related organizations <i>individual</i>	greater th	an \$1	150,	000)? /:	f "Yes	s,"	complete Sched					~
5	Did any person listed on line 1a receive of for services rendered to the organization?	or accrue co	ompe	nsa	tion	froi	m any	' un	related organizat			5		~
Secti	on B. Independent Contractors													
1	Complete this table for your five high compensation from the organization. Rep													
	(A) Name and business add	ress							(B) Description of serv	vices		(C) Compens	ation	
None														
2	Total number of independent contracto	ors (includir	ng bu	ıt n	ot	limit	ed to	th	ose listed abov	e) who				

2	Total number	of	independent	contractors	(including	but	not	limited	to	those	listed	above)	who
	received more	tha	n \$100,000 of	compensatio	on from the	orga	aniza	tion 🕨			0		

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to an	ny line in this Pa	urt VIII....		🗆
	(A)	(B)	(C)	(D)

			1	<i>y</i>			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
its ts	1a	Federated campaigns 1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	0				
۵ ق	с	Fundraising events 1c	0				
fts, r A	d	Related organizations 1d	0				
Gi İlaı	е	Government grants (contributions) 1e	0				
ns, Sim	f	All other contributions, gifts, grants,					
tio ∍r S	•	and similar amounts not included above 1f	1,371,494				
ibu	q	Noncash contributions included in	.,				
d O	9	lines 1a–1f	\$ 27,987				
an	h	Total. Add lines 1a–1f		1,371,494			
			Business Code	1,371,474			
e	2a	-	Dusiness Code				
vic							
jram Ser Revenue	b						
n S /en	C						
lrai Re/	d						
Program Service Revenue	е						
ų.	f	All other program service revenue					
	g	Total. Add lines 2a-2f		0			
	3	Investment income (including dividends,					
		other similar amounts)		7,456	7,456	0	0
	4	Income from investment of tax-exempt bor	nd proceeds 🕨	0	0	0	0
	5	Royalties <u></u>		0	0	0	0
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c 0	0				
	d	Net rental income or (loss)	🕨				
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
ē	b	Less: cost or other basis					
Revenue		and sales expenses . 7b					
eve	с	Gain or (loss) 7c 0	0				
r Ŗ	d	Net gain or (loss)	🕨				
Othe	8a	Gross income from fundraising					
ð		events (not including \$ 0					
		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	c	Net income or (loss) from fundraising ever	nts 🕨				
	-	Gross income from gaming					
	vu	activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activities	s 🕨				
		Gross sales of inventory, less					
	iva	returns and allowances 10a					
	h	Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventor	rv 🕨				
			Business Code				
Miscellaneous Revenue	110	Spots and Commissions		E 474		E 474	
nec	-		515100	5,171	0	5,171	0
llaı /en	b	Paycheck Protection Program Loan Forgive	900099	123,470	123,470	0	0
scellanec Revenue	C	Accounts Payable Write-off	813110	78,600	78,600	0	0
Mis		All other revenue		0	0	0	0
£		Total. Add lines 11a–11d		207,241			
	12	Total revenue. See instructions	🕨	1,586,191	209,526	5,171	0
							Form 990 (2020)

					Page 10
	X Statement of Functional Expenses	ate all columns All	other organizations	must complete ealur	an (A)
Sectio	on 501(c)(3) and 501(c)(4) organizations must comple Check if Schedule O contains a response				
Dono	t include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	<u> </u> (D)
	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	525	525	3	
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	201,410	152,567	36,022	12,821
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	406,793	253,674	68,494	84,625
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	74,259	49,600	12,761	11,898
10	Payroll taxes	30,555	20,409	5,251	4,895
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	700	0	700	0
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	14,884			14,884
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	12,269	12,269	0	0
12	Advertising and promotion	730	730	0	0
13	Office expenses	12,243	8,336	2,848	1,059
14	Information technology	20,855	10,427	10,428	0
15	Royalties				
16	Occupancy	102,685	71,470	21,005	10,210
17 18	Travel	14,356	2,871	4,307	7,178
19	Conferences, conventions, and meetings	71,246	26,567	0	44,679
20	Interest	,			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	12,036	9,629	2,407	0
23		9,597	7,760	1,225	612
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Program and Content Distribution	145,050	145,050	0	0
b	Cost of Premiums	51,651	51,651	0	0
С	Cost of Mailings	56,576	45,261	0	11,315
d	Equipment, Maintenance and Supplies	8,864	6,205	1,773	886
е	All other expenses	32,830	16,679	10,537	5,614
25	Total functional expenses. Add lines 1 through 24e	1,280,114	891,680	177,758	210,676
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here \blacktriangleright if following SOB 08.2 (ASC 058.720)				
	following ŠOP 98-2 (ASC 958-720)				

Form 990 (2020)

	n 990 (20	,			Page 11
Ρ	art X		+ V		
		Check if Schedule O contains a response or note to any line in this Par	(A) Beginning of year		
	1	Cash-non-interest-bearing	197,208	1	109,493
	2	Savings and temporary cash investments	25,399	2	100,413
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
¥	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 404,129			
	b	Less: accumulated depreciation 10b 365,540	26,011	10c	38,589
	11	Investments-publicly traded securities		11	
	12	Investments-other securities. See Part IV, line 11	19,219	12	54,648
	13	Investments-program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	7,873	15	7,873
	16	Total assets. Add lines 1 through 15 (must equal line 33)	275,710	16	311,016
	17	Accounts payable and accrued expenses	211,775	17	55,732
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
iab		controlled entity or family member of any of these persons		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	123,470	24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
	06		4,184	25	12,926
	26	Total liabilities. Add lines 17 through 25	339,429	26	68,658
Fund Balances		Organizations that follow FASB ASC 958, check here ► □ and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions		27	
B	28	Net assets with donor restrictions		28	
r Fun		Organizations that do not follow FASB ASC 958, check here ► ✓ and complete lines 29 through 33.			
ĵ Ol	29	Capital stock or trust principal, or current funds	0	29	0
iets	30	Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
A SS	31	Retained earnings, endowment, accumulated income, or other funds	-63,719	31	242,358
Net Assets or	32	Total net assets or fund balances	-63,719	32	242,358
Ź	33	Total liabilities and net assets/fund balances	275,710	33	311,016

Form **990** (2020)

	-			conciliation of Net Assets	Part
Г				eck if Schedule O contains a response or note to any line in this Part XI	i arc
-	1,58		1	renue (must equal Part VIII, column (A), line 12)	1
· ·	1,28		2	penses (must equal Part IX, column (A), line 25)	2
6,07			3	eless expenses. Subtract line 2 from line 1	3
3,71			4	ets or fund balances at beginning of year (must equal Part X, line 32, column (A)) .	4
(5	alized gains (losses) on investments	5
(6	services and use of facilities	6
(7	ent expenses	7
(8	iod adjustments	8
(9	anges in net assets or fund balances (explain on Schedule O)	9
				ets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	10
2,35	24		10	mn (B))	
				nancial Statements and Reporting	Part
				eck if Schedule O contains a response or note to any line in this Part XII	
No	Yes				
				ing method used to prepare the Form 990: 🗌 Cash 🛛 Accrual 🗌 Other	1
		in	' explain	rganization changed its method of accounting from a prior year or checked "Other," of	
				e O.	
	~	. 2a	?	e organization's financial statements compiled or reviewed by an independent accountant?	2a
		or	compiled	check a box below to indicate whether the financial statements for the year were co	
				on a separate basis, consolidated basis, or both:	
				rate basis 🗌 Consolidated basis 🗌 Both consolidated and separate basis	
~		. 2b		e organization's financial statements audited by an independent accountant?	b
		na	udited or	check a box below to indicate whether the financial statements for the year were aud	
				basis, consolidated basis, or both:	
				ate basis 🗌 Consolidated basis 🗌 Both consolidated and separate basis	
				to line 2a or 2b, does the organization have a committee that assumes responsibility for ow	с
	~	. 2c	ne 12) 1 ne 25) 2 1 3 (must equal Part X, line 32, column (A)) 4 . 5 . 6 . 7 . 8 plain on Schedule O) 9 nbine lines 3 through 9 (must equal Part X, line 10 or note to any line in this Part XII 10 or note to any line in this Part XII . 0: Cash Accrual Other ounting from a prior year or checked "Other," explain in 10 s, or both: Both consolidated and separate basis . Both consolidated and separate basis . . are the financial statements for the year were audited on a Both consolidated and separate basis ave a committee that assumes responsibility for oversight of atements and selection of an independent accountant? . or required to undergo an audit or audits as set forth in the . or required to undergo an audit or audits as set forth in the .	t, review, or compilation of its financial statements and selection of an independent account	
		on	, explain	ganization changed either its oversight process or selection process during the tax year, ϵ	
				e O.	
		the	forth in t	ult of a federal award, was the organization required to undergo an audit or audits as set for	3a
~		. 3a		udit Act and OMB Circular A-133?	
				did the organization undergo the required audit or audits? If the organization did not un	b
Ĺ		. 3 b	h audits .	audit or audits, explain why on Schedule O and describe any steps taken to undergo such	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

2020 Open to Public Inspection

Name of the organization	
DOINT OF VIEW MINISTRIES	INI

-	
POINT OF VIEW MINISTR	IES INC

Employer identification number

NISTRIES INC		75-1751385

Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I

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).
- A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2
- 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 4 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 5 section 170(b)(1)(A)(iv). (Complete Part II.)
- A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An agricultural research organization described in 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 331/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11
- 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 а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
 - Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С 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) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V.
 - Check this box if the organization received a written determination from the IRS that it is a Type I. Type II. Type III. е functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - Provide the following information about the supported organization(s) α

9 · · · · · · · · · · · · · · · · · · ·									
(i) Name of supported organization	f supported organization (ii) EIN		(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
			Yes	No					
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part IISupport 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.)

Section	on A. Public Support		-				
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support		1		1	1	1
	dar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.					12	
13	First 5 years. If the Form 990 is for the organization, check this box and stop here	-			-		
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2020 (line 6	-		11. column (f)		14	%
15	Public support percentage from 2019 Sch					15	%
16a	331/3% support test-2020. If the organi						
	box and stop here. The organization qua			-			
b	33 ¹ /3% support test—2019. If the organization this box and stop here. The organization						
17a	10%-facts-and-circumstances test — 20 10% or more, and if the organization m Part VI how the organization meets the organization	eets the facts facts	-and-circumst umstances tes	ances test, ch st. The organiz	eck this box a zation qualifies	and stop here s as a publicly	. Explain in
b	10%-facts-and-circumstances test — 20 15 is 10% or more, and if the organizatio in Part VI how the organization meets the organization	n meets the fa e facts-and-cir	acts-and-circu cumstances te	mstances test, est. The organ	, check this bo ization qualifie	ox and stop he s as a publicly	re. Explain
18	Private foundation. If the organization of instructions						

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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
•	received. (Do not include any "unusual grants.")	1,145,980	951,756	1,016,984	1,131,791	1,371,494	5,618,005
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	1,145,980	951,756	1,016,984	1,131,791	1,371,494	5,618,005
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b						5,618,005
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	1,145,980	951,756	1,016,984	1,131,791	1,371,494	5,618,005
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	833	692	798	-90	7,456	9,689
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	20,497	23,001	27,230	20,822	5,171	96,721
с	Add lines 10a and 10b	21,330	23,693	28,028	20,732	12,627	106,410
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,168	67,628	30	1,776	202,070	273,672
13	Total support. (Add lines 9, 10c, 11, and 12.)	1,169,478	1,043,077	1,045,042	1,154,299	1,586,191	5,998,087
14	First 5 years. If the Form 990 is for the organization, check this box and stop he	organization's	s first, second	, third, fourth,	or fifth tax ye		n 501(c)(3)
Secti	on C. Computation of Public Suppor	rt Percentage	e				
15	Public support percentage for 2020 (line 8					15	93.66 %
16	Public support percentage from 2019 Sch					16	94.77 %
	on D. Computation of Investment Inc		-		(f))	47	0/
17	Investment income percentage for 2020 (-		17	1.77 %
18 19a	Investment income percentage from 2019 Schedule A, Part III, line 17						
b	331 /3% support tests—2019. If the organiz line 18 is not more than 331/3%, check this l	ation did not cl	neck a box on	line 14 or line 1	9a, and line 16	is more than 3	3 ¹ /3%, and
20	Private foundation. If the organization di	-	-	-	heck this box		ctions 🕨 🗌

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 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 line 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

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

10b

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
 - a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?
 - **b** A family member of a person described in line 11a above?
 - c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 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.

Section C. Type II Supporting Organizations

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).

Section D. All Type III Supporting Organizations

- 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).
- 3 By reason of the relationship described in line 2, above, 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.

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- а The organization satisfied the Activities Test. Complete **line 2** below.
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). Yes No
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а 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 that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more 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.
- Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a

2b

3a

3b

Yes No

11a

11b

11c



Yes No



1

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

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

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	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
е	(explain in detail in Part VI):	1e		
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 0.015 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 0.035.	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 0.85 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 ergenization's first as a neg function		ntograted Type III auppe	rting organization

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continue	d)	
	on D-Distributions	, oupporting organi			Current Year
1	Amounts paid to supported organizations to accomplish e	1			
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	rted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	3	
4	Amounts paid to acquire exempt-use assets			4	
_ 5	Qualified set-aside amounts (prior IRS approval required-	-provide details in Part	VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which (provide details in Part VI). See instructions.	h the organization is res	ponsive	8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
с	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI.</i> See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2016				
b	Excess from 2017				
C	Excess from 2018				
d	Excess from 2019				
e	Excess from 2020				

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

Schedule A, Part III, Line 12 - Other income is Paycheck Protection Plan Loan Forgiveness for \$123,470 and Accounts Payable Write-off for
\$78,600.

SCHE	DULE	D
(Form	990)	

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

2020 Open to Public

OMB No. 1545-0047

	ent of the Treasury Revenue Service		Attach to Form 990. 90 for instructions and the latest informa	ation	Open to Public Inspection
	f the organization			Employer identificati	
		TRIES INC			751385
			sed Funds or Other Similar Fund		
		ete if the organization answered "			
	•		(a) Donor advised funds	(b) Funds and	l other accounts
1	Total number a	at end of year			
2	Aggregate valu	ue of contributions to (during year) .			
3		ue of grants from (during year)			
4		ue at end of year			
5	0		advisors in writing that the assets hel		
•			organization's exclusive legal control?		
6			d donor advisors in writing that grant		
			t of the donor or donor advisor, or for		Yes No
Par		rvation Easements.		<u> </u>	
rai		ete if the organization answered "	ves" on Form 990 Part IV line 7		
1	•	conservation easements held by the o			
•			ation or education)	a historically imp	ortant land area
		of natural habitat		a certified histori	
	Preservatio	n of open space	_		
2			d a qualified conservation contribution	in the form of a c	onservation
	easement on t	he last day of the tax year.		Held at	the End of the Tax Year
а	Total number	of conservation easements		. 2a	
b	-	-			
С			storic structure included in (a)		
d			c) acquired after 7/25/06, and not or		
3	Number of contax year ►	nservation easements modified, trans	ferred, released, extinguished, or term	inated by the org	anization during the
4	Number of sta	tes where property subject to conserv	vation easement is located \blacktriangleright		
5			arding the periodic monitoring, inspe ements it holds?		
6	Staff and volunt	teer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation ease	ments during the year
7	Amount of exp ► \$	enses incurred in monitoring, inspecting	g, handling of violations, and enforcing c	onservation easen	nents during the year
8			(d) above satisfy the requirements of s		(i) 🗌 Yes 🗌 No
9	In Part XIII, de balance sheet	scribe how the organization reports co	onservation easements in its revenue a the footnote to the organization's finar	and expense state	ment and
Part		izations Maintaining Collections ete if the organization answered "`	of Art, Historical Treasures, or C Yes" on Form 990, Part IV, line 8.	Other Similar As	ssets.
1a	of art, historic	al treasures, or other similar assets	B ASC 958, not to report in its revenue held for public exhibition, education, o its financial statements that describe	or research in fu	
b	art, historical t provide the fol	reasures, or other similar assets held lowing amounts relating to these item		earch in furtheran	ce of public service,
	(i) Revenue in(ii) Assets incluin	cluded on Form 990, Part VIII, line 1 uded in Form 990, Part X		► \$ ► \$	
2	If the organization	ation received or held works of art, unts required to be reported under FA	historical treasures, or other similar a	assets for financia	al gain, provide the

	0						•						
а	Revenue included	on Form 9	90, Part VIII, line 1					•					\$

\$ ►

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

Schedul	e D (Form 990) 2020						Page 2				
Part	Organizations Maintaining	Collections of	Art, Historica	I Treasures	s, or O	ther Similar As	sets (continued)				
3	Using the organization's acquisition, collection items (check all that apply):		her records, ch	eck any of th	ne follov	wing that make si	gnificant use of its				
а	Public exhibition		d 🗌 Loa	an or exchang	ae proa	ram					
b	Scholarly research										
С											
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part										
5	XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar										
	assets to be sold to raise funds rather than to be maintained as part of the organization's collection?										
Part	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form										
	990, Part X, line 21.	answered "Yes	" on Form 990), Part IV, lin	e 9, or	reported an am	ount on Form				
1a	Is the organization an agent, trustee included on Form 990, Part X?						t TYes TNo				
b	If "Yes," explain the arrangement in P										
		·				Ar	nount				
с	Beginning balance				10	>					
d	Additions during the year				10	k l					
е	Distributions during the year				16	•					
f	Ending balance				11	F					
2a	Did the organization include an amound	nt on Form 990, Pa	art X, line 21, fo	or escrow or c	ustodia	I account liability	? 🗌 Yes 🗌 No				
b	If "Yes," explain the arrangement in P	art XIII. Check her	e if the explana	tion has beer	provid	ed on Part XIII .	🗌				
Par											
	Complete if the organization					1					
		(a) Current year	(b) Prior year	(c) Two yea	ars back	(d) Three years back	(e) Four years back				
1a	Beginning of year balance	5,000	5,0	00	5,000	5,000	5,000				
b	Contributions	0		0	0	0	0				
С	Net investment earnings, gains, and losses	0		0	0	0	0				
d	Grants or scholarships	0		0	0	0	0				
е	Other expenditures for facilities and										
	programs	0		0	0	0	0				
f	Administrative expenses	0		0	0	0	0				
g	End of year balance	5,000	5,0	00	5,000	5,000	5,000				
2	Provide the estimated percentage of t	he current year er	d balance (line	1g, column (a	a)) held	as:					
а	Board designated or quasi-endowment	nt 🕨(<u>)</u> %								
b		<u>00</u> %									
С	Term endowment ►0 %										
	The percentages on lines 2a, 2b, and	-									
3a	Are there endowment funds not in the	e possession of th	e organization	that are held	and ad	Iministered for the					
	organization by:						Yes No				
	(i) Unrelated organizations				• •		3a(i) 🗸				
	()						3a(ii) 🗸				
_	If "Yes" on line 3a(ii), are the related o	•			· · ·		3b				
4 Part	Describe in Part XIII the intended uses VI Land, Buildings, and Equip		on s endowmen	it iunus.							
Paru	Complete if the organization		" on Form 99() Dart IV lin	0 1 1 0	See Form 000	Part X line 10				
	Description of property	(a) Cost or ot		st or other basis		Accumulated	(d) Book value				
		(investm		(other)		epreciation					
1a	Land		0	0			0				
b	Buildings		0	0		0	0				
С	Leasehold improvements		6,238	0		2,537	3,701				
d	Equipment	·	397,891	0		363,003	34,888				
<u>e</u>	Other		0	0		0	0				
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part X, colu	mn (B), line 1	Uc.) .	🕨 📔	38,589				

Schedule D (Form 990) 2020

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" on Form 990, Part I	V, line 11b. See F	orm 990.	, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) M	ethod of valuation: nd-of-year market value
• • •	neld equity interests	54,648	End-of-Ye	ear Market Value
(A)				
(\mathbf{C})				
(H) Total (Colu	mn /b) must aquel Form 000 Port X agl /P) /ing 12)	54.440		
Part VIII	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ► Investments—Program Related.	54,648		
	Complete if the organization answered "Yes" on Form 990, Part I	V line 11c. See F	orm 990	Part X line 13
	(a) Description of investment	(b) Book value		ethod of valuation:
		(4) Doort Value		nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 13.) . ►			
Part IX	Other Assets.	I		
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990,	, Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11e or 11f.	See For	m 990, Part X,
1.	line 25.			
	(a) Description of liability			(b) Book value
(1) Federal ir	Act Deferred Payroll Taxes			12,926
(2) CARES (3)	Act Deletted Payloli Takes			12,720
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	mn (b) must equal Form 990, Part X, col. (B) line 25.)			12,926

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

Schedu	le D (Form 990) 2020		Page 4
Par		-	Return.
	Complete if the organization answered "Yes" on Form 990,		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	
а	Net unrealized gains (losses) on investments	2a	_
b	Donated services and use of facilities	2b	_
С	Recoveries of prior year grants		_
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		_
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part			er Return.
	Complete if the organization answered "Yes" on Form 990,		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin		5
Part	XIII Supplemental Information.		· · ·
2; Par	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part dule D, Part V, Line 4 - Income from the Endowment is available for Ministry op	to provide any additional in the pro	nformation.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service
Name of the execution

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

► Go to *www.irs.gov/Form*990 for instructions and the latest information.

2020 Open to Public Inspection

Name of	uie u	ganiz	allon		
POINT	OF \	VIEW	MINIS	TRIES	INC

Employer identification number
75-1751385

Part	Types of Property				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art-Works of art				
2	Art-Historical treasures				
3	Art-Fractional interests				
4	Books and publications				
5	Clothing and household				
	goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities-Publicly traded	~	4	27,987	Broker Statement
10	Securities-Closely held stock .				
11	Securities-Partnership, LLC,				
	or trust interests				
12	Securities-Miscellaneous				
13	Qualified conservation				
	contribution-Historic				
	structures				
14	Qualified conservation contribution—Other				
15	Real estate – Residential				
16	Real estate - Commercial				
17	Real estate-Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► ()				
26	Other ► ()				
27	Other ► ()				
28	Other► ()				
29	Number of Forms 8283 received				
	which the organization completed	Form 8283	3, Part V, Donee Acknowled	dgement	29
					Yes No
30a	During the year, did the organizat 28, that it must hold for at least the				

	to be used for exempt purposes for the entire holding period?	30a	
b	If "Yes," describe the arrangement in Part II.		
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard		
	contributions?	31	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash		
	contributions?	32a	
b	If "Yes," describe in Part II.		

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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Schedule M (Form 990) 2020 Page 2							
Part II							
Schedule M	, Part I, Line 32b - TD Ameritrade Institutional provides brokerage services for Point of View Ministries Inc						
	,						

SCHE	DUL	EC)	
(Form	990	or	990-	EΖ

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.



Internal Revenue Service	Go to www.irs.gov/Form990 for the latest information.	Inspection
Name of the organization		Employer identification number
POINT OF VIEW MINIS	TRIES INC	75-1751385
Form 990, Part VI, Sec	tion A, Line 2 - Warren Kelley (COO) is the son-in-law of Mary Maddoux (Trustee).	
	tion B, Line 11b - A PDF copy of Form 990 is provided to trustees prior to filing alor	ng with a request for review and
comment.		
	tion B, Line 12c - All officers and trustees are required to review any conflicts that a	ire reported. Any conflicts of
interest are resolved b	y ne board.	
Form 990 Part VI Sec	tion B, Line 15 - Compensation for Kerby Anderson, CEO; Warren Kelley, COO; and	Rob Manley, Director of Finance
	ved by a compensation committee that is appointed by the board. The reviews and	
	. It was completed in 2020 in advance of the 2021 calendar year.	
Form 990, Part VI, Sec	tion C, Line 18 - Point of View is exempt from the requirement of making a copy of t	he Form 1023 Exemption
	Point of View is an organization whose exemption application was filed before July	
	se exemption application was filed before July 15, 1987, and which lacked the exem	ption application on July 15, 1987,
need not make a copy	of the exemption application available."	
	tion C, Line 19 - Point of View's governing documents, conflict of interest policy, an	id financial statements available to
the public by request.		

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

Cat. No. 51056K