Form 990

OMB No. 1545-0047

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.

Open to Public

Information about Form 990 and its instructions is at www.irs.gov/form990.									Inspection	
A	For the 2	2016 calendar	year, or tax year begin	ning 1/01	2017	, 2 <del>016</del> , and endi	ng 5/	31	,	2017
В	Check if ap	plicable: C			/	2000.7.27		D Employ		ication number
	Addres	s change Of	fficers' Christ	ian Fello	wship of			38-1	4154	101
	Name		ne United State					E Telepho		
	Initial	127	784 South Inca					303-	761-	-1984
	H	urn/terminated En	nglewood, CO 80	110				303	/01	1304
	H	ded return						G Gross re		1 505 606
	H	<del>-</del>	Name and address of principal	Infline	-		IM(a) Is this	a group return	_	
	Applica			olicer:			43			143 110
_	T		ame As C Above	San Press	1 1404	te sees   I too	If 'No,	l subordinates ' attach a list.	(see instr	ructions) Lites Line
<u>ب</u>			501(c)(3) 501(c) (	)◀ (inser	t no.) 494.	(a)(1) or 527	1			
J	Websit	22.42.42.0	ocfusa.org					exemption nu		
K			Corporation Trust	Association	Other -	L Year of forma	tion: 194	3 Ms	tate of le	gal domicile: CO
Pa	rt I	Summary								
	1 Bri	efly describe t	the organization's missi	on or most sigi	nificant activiti	es:OCF engac	<u>es mil</u>	itary .	Leade	ers in
ø	<u>B</u> :	<u>iblical f</u>	ellowship and c	<u>growth_to_</u>	equip the	em for Chri	<u>st-lik</u>	<u>e servi</u>	ce a	t the
ĕ	<u> i</u> !	<u>ntersecti</u>	on of faith, fa	mily_and_	<u>professi</u>	<u> </u>			02	
ᇤ				· <del>-</del>						
O			if the organization						- 1	
9	3 Nu 4 Nu	mber of inden	g members of the gover pendent voting members	ning body (Par	t vi, line ia).	VI. line 1b)			3	22
83			individuals employed in						4 5	21
#			volunteers (estimate if						6	121
Activities & Governance			business revenue from F						7a	750 0.
-			siness taxable income						7b	0.
				· ·				rior Year	<del></del> +	Current Year
	8 Co	ntributions and	d grants (Part VIII, line	1h)				3,579,4	19	1,041,192.
Revenue		Program service revenue (Part VIII, line 2g)						1,462,680.		453,036.
Ver	1		me (Part VIII, column (A	_				69,6		60,549.
2			Part VIII, column (A), Iir					5,7		30,909.
			add lines 8 through 11					5,117,4		1,585,686.
			lar amounts paid (Part I					,, , , _		
	14 Be	nefits paid to	or for members (Part I)	(, column (A),	line 4)					
	1	•	compensation, employee		-			2,071,5	98	859,713.
9	1			es (Part IX, column (A), line 11e)						
Expenses							-	25,9	50.	10,500.
윩	1		expenses (Part IX, col			<u>'</u>				
	1		(Part IX, column (A), lir				_	2,329,0		1,010,415.
	1	•	Add lines 13-17 (must e	,		*		<u>1,426,5</u>		1,880,628.
		venue less ex	penses. Subtract line 1	8 from line 12.				690,9	07.	-294,942.
Not Assets or Fund Balances								ng of Current		End of Year
Ħ	20 To		rt X, line 16)					7,186,9		17,009,247.
₹ <u>₽</u>	<b>21</b> To	•	Part X, line 26)				· ·	L,354,5	64.	1,471,811.
			nd balances. Subtract fi	ne 21 from line	20	· · · · · · · · · · · · · · · · · · ·	. 15	5,832,3	78.	15,537,436.
Pa	rt II	Signature E	3lock	-			4.0		· .	
Unde	r penalties	of perjury, I declare	e that I have examined this retu (other than officer) is based on a	rn, including accom	panying schedules	and statements, and to	the best of n	ny knowledge	and belie	f, it is true, correct, and
COM	nete Decial	ation of preparer (	(other than officer) is based on a	au information of a	ch preparer has a	ny knowleage.			/	
			vean a	TALL	NA			10/	13/	17
Sig He	jn –	Signature of	ronicer	0.00			Di	ale /	,	- 1 × 1 × 1
He	re		A. Millard				Dir.	of Fin	ance	:
_			nt name and title		-	-		3 37		
		Print/Type prepa	arer's name	Preparer's signatu	re 🥖	Date	1	Check	ir F	MIT
Pai		Kyle Log	gan, CPA	6411	111	- 10/9	1/17	self-employe	d E	201674082
Pre	eparer	Firm's name	Logan and Ass	ociates,	LIC	1/1	/ /			
Us	e Only	Firm's address	► 6140 S Gun C]		<del>/</del> 132			Firm's EIN	36-	4703316
			Aurora, CO 80							835-6815
May	the IRS	discuss this re	return with the preparer		(see instruction	ons)				X Yes No
			uction Act Notice, see t				EA0113L 11/	/16/16		Form 990 (2016)

	1990 (2016) Officers' Christian Fellowship of	<u> 38-14154</u>	01	Page 2
Pai	t III Statement of Program Service Accomplishments			
	Check if Schedule O contains a response or note to any line in this Part III			X
٠	OCF engages military leaders in Biblical fellowship and growth	to equip th	em foi	_
	Christ-like service at the intersection of faith, family and pro			
2	Did the organization undertake any significant program services during the year which were not listed on the p	rior		
-	Form 990 or 990-EZ?		Yes	X No
	If 'Yes,' describe these new services on Schedule O.			<u> </u>
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s	ervices?	Yes	X No
	If 'Yes,' describe these changes on Schedule O.		•	
4	Describe the organization's program service accomplishments for each of its three largest program se Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation and revenue, if any, for each program service reported.	rvices, as measur ons to others, the	red by ex total exp	penses. penses,
4 a	(Code: ) (Expenses \$ 961,606. including grants of \$ )	(Revenue \$		)
	Conference Centers: Spring Canyon in Buena Vista, CO and White		rinas	in
	Manns Choice, PA, served approximately 5,000 - 6,000 quests dur	ing this la	st ve	
	These centers are two of OCF's primary training grounds for those			
	minister in the military society and offer a significant minist	ry to famil	ies ar	nd
	youth during Summer Celebration, Winter Sports Retreats, Father-			
	Together: Parent Youth Adventure, Allegheny Outback and Camp Camp Camp Camp Camp Camp Camp Camp			ed_is_
	Rocky Mountain High, an outdoor adventure leadership program to			
	midshipmen, noncommissioned officers, and junior officers for in			
	and profession, equipping and encouraging them to be the Office	rs God has	called	<u>them</u>
	to be.			
41	(Code: ) (Expenses \$ 234,390. including grants of \$	(Revenue \$		
7.	Academies & ROTC: OCF has staff couples located at each of the			
	academies, where they embolden the cadets and midshipmen to know	. rour_mirric	ary	
	Christ-follower through biblical leader development, Bible study	wildt it i	spin Fror	<u>a</u>
	conferences, retreats and mission trips. While all staff couple	y arscibie	ir bon	
	for training, counsel and hospitality, OCF owns properties near	the II S. M	ilita:	~v
	Academy, the U.S. Naval Academy, and the U.S. Coast Guard Academ	nv. allowin	g an	- <u>1</u>
	extraordinary level of hospitality to cadets, midshipmen and the	eir familie	s and	other
	guests. OCF currently hosts five ROTC regional retreat conferen			
	plans to expand into the northwest.			
40		(Revenue \$		)
	Field Ministries: OCF has staff couples assigned to regional co			
	and give quidance to the volunteer lay leaders in the different			
	forge relationships with local churches, and provide support to	the chapla	<u>incy.</u>	_They_
	help these leaders engage in their faith with those around them	<u>by getting</u>	progr	cams
	established and functioning in the regional area such as: small			os,
	training conferences, contacts within the area, and support for			
	pastors. In addition, we sponsor Spiritually Smart Family confe	erences to	<u>assist</u>	with_
	service separations, conflict resolution, staying close while ap	part, commu	nicati	L <u>on</u>
	and parenting tips, re-integration following deployment, and much	n_more		
4 0	Other program services (Describe in Schedule O.)  See Schedule O			
	(Expenses \$ 186,411. including grants of \$ ) (Revenue \$	<u> </u>	)	
_	Total program service expenses ► 1,558,301.			
BAA	TEE40102 11/15/15		Form 9	290 (2016)

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

			Yes	No
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
ı	of 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	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		х
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? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		х
24	a 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? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a.	24a		х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c 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		
25	a 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		х
١	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If 'Yes,' complete Schedule L, Part I	25b		х
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		x
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):			
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
١	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
•	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29		29	Х	
30	contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I.	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part It	32		Х
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? If 'Yes,' complete Schedule R, Part I	33		_x
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
١	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Note. All Form 990 filers are required to complete Schedule O.	38	Х	
BAA	•	Form	990 (	2016)

Part V Statements Regarding Other IRS Filings and Tax Compliance			(1)
Check if Schedule O contains a response or note to any line in this Part V	1200		-
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
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 121			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2Ь	Х	-
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1 -1	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3ь		
4 a 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		х
b If "Yes," enter the name of the foreign country: ➤	1		
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	3		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
bill 'Yes,' did the organization include with every solicitation an express statement that such contributions or diffs were			
not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).	6b	Marie Co.	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
services provided to the payor?	7 a		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	-	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
Form 8282?	7с		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	Ť		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	7h		
organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.		19.00	1000
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?	9Ь		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders		ļ .	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		_
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		I.a	
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
which the organization is licensed to issue qualified health plans	3	MA	
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.	14bl		

Form 990 (2016) Officers' Christian Fellowship of 38-1415401 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI.... Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year.....
If there are material differences in voting rights among members 1 a 22 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent ... 21 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?..... 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?..... 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... X 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets?.... X 5 6 Did the organization have members or stockholders?.... X 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a X b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... 8a X b Each committee with authority to act on behalf of the governing body?...... X 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O. 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates?..... X 10a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?.....  $\overline{X}$ 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See Schedule 0 Х 12 c 13 Did the organization have a written whistleblower policy?..... 13 Х 14 Did the organization have a written document retention and destruction policy? 14 Х 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official... See . Schedule...O....... 15a X b Other officers or key employees of the organization...See Schedule O..... X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... 16a X b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 161 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records: Dean A. Millard 3784 South Inca Englewood CO 80110 303-761-1984

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

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

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

- 1 a 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.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Position (do not check more than one box, unless person is both an officer and a director/trustee) (A) Name and Title (B) (D) (F) Reportable compensation from the organization (W-2/1099-MISC) Reportable compensation from related organizations (W 2/1099-M SC) Estimated amount of other compensation Average hours per week (list any Officer Individual Institutional Key employee employee Former Highest componsated from the organization and related hours to related organiza tions Inustee litrusice below (1) David B. Warner 40 Executive Dir. o X X 41,667 0 3,477. (2) Robert L Jassey 0 Member 0 X 0. 0 0. (3) James A Rader 0 Member 0 Х 0. 0 0. 0 Marc S. Gauthier X Member 0 0. 0 0. Amanda Birch 0 Vice President 0 X X 0. 0 0. (6) Stephen T Schmidt 0 Member 0 X 0 0 0. (7) Paul D. Schumacher 0 X Member 0 0. 0 0. (8) Benjamin L Scripture 0 Member 0 Х 0. 0 0. (9) Timothy L Tormey 0 X Member 0 0 0 0. Gordon A. Hood 0 Secretary 0 Χ X 0. 0 0. (11) Steven R. Berger 0 X Member 0 0 0 0. (12) Stephen Hoffman 0 Treasurer 0 X X 0 0 0. (13) Paul M. Reigert 0 Member 0 Х 0 0 0. Laurence Mixon 0 Member 0 X 0. 0. 0.

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TEEA0107L 11/16/16

Form 990 (2016)

Page 8

Fart VII Section A. Officers, Directors, Tri	istees, i	ney	CII	ibid	yе	es,	anc	a nignest com	ipensateo Empi	oyees (continu	iea)
	(B) (C)										
(A)	Average (do not check more than one box, unless person is both an		(D)	(E)	(F)						
Name and title	per	offi	cer an	nd a d	direct	or/trus	tee)	Reportable compensation from	Reportable compensation from	Estimated amount of other	
	(list any hours	or director	夏	Officer	€		굨	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the	
	for related	Individual trustæe or director	통	G.	Key employee	loyec	졑			organization and related organizations	
	- tions	9 5	틜		g	) ag					
	below dotted line)	80	nstitutional Irustee		G .	Highest compensated employee					
						8					
(15) Melvin Spiese	0		П				П		<del>.</del>		_
President	0	<b>X</b>		X				0.	0.		0.
(16) David G. Guida	0								-		
Member	0	Х	$\square$					0.	0.		0.
(17) Richard Breckenridge	00										
Member	0	Х	$\square$					0.	0.		0.
(18) Michael W Moyles Member	0-	x							0		^
(19) Alicia Smith	0	^	$\dashv$				H	0.	0.		0.
Member		X						0.	0.		0.
(20) Rich Goldsmith	0	<u> </u>	$\Box$					- 0.			<del>••</del>
Member	0	X						0.	0.		0.
(21) Matthew R Uber	0										_
<u>Member</u>	0	X					Ш	0.	0.		0.
(22) Vaughn E Hathaway	00							_			
Member (23) Dean A. Millard	40	_X	$\square$				_	0.	0.	····	0.
Dir. of Finance	-40-	-		х				22,910.	0.	2 24	- 0
(24)	-		$\dashv$	^	-			22,310.		3,36	10.
(25)											_
1 b Sub-total							<u>.</u>	64,577.	0.	6,84	<u> 15.</u>
c Total from continuation sheets to Part VII, Section of Total (add lines 1) and 10)								0.	0.		0.
d Total (add lines 1b and 1c)							zod.	64,577.	0.	6,84	<u> 15 .</u>
from the organization > 0	to those i	sicu	aboy	/C) Y	VIIO I	CUCIN	veu	more man \$100,000	o or reportable comp	ensation	
									<del></del> -	Yes	No
3 Did the organization list any former officer, direc	tor, or tru	stee.	kev	em	ınlas	100 (	or b	inhest compensat	ed employee		
on line 1a? If 'Yes,' complete Schedule J for suc	h individu	al						·····		3	X
4 For any individual listed on line 1a, is the sum of	reportabl	e co	mpe	nsa	tion	and	oth	er compensation f	rom		
the organization and related organizations greate such individual	er than \$1	50,00	00?	If 'Y	es, '	com	plei	le Schedule J for		4	Х
					anv	unrel	late	d organization or	individual		_
5 Did any person listed on line 1a receive or accrument for services rendered to the organization? If 'Yes	, comple	te Sc	hed	ule	J foi	r Suc	h pe	erson	individual	5	X
Section B. Independent Contractors			1								
<ol> <li>Complete this table for your five highest compen- compensation from the organization. Report compen</li> </ol>	sated inde sation for 1	epend the ca	zent slenc	cor dar y	ntrac /ear	tors endir	thai	t received more th vith or within the ord	ian \$100,000 of nanization's tax vear.		
(A)								(B)			
Name and business address  (B)  Description of services  (C)  Compensation											
		-									
2 Total number of independent contractors (including b	ut not limi	ted to	tho	se li	sted	abov	/e) v	who received more	than		35-1
\$100,000 of compensation from the organization							, .		200		
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	Check if Schedule O contains a response or note to a	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
at at	1 a Federated campaigns 1a				
25	b Membership dues				
23	d Related organizations 1d				
2 5	e Government grants (contributions) 1 e				
Contributions, Gifts, Grants and Other Similar Amounts	All other contributions gifts grants and		344		
3 5	f All other contributions, gifts, grants, and similar amounts not included above 1f 1,041,192.		A ST ST ST		
E 유	g Noncash contributions included in lines 1a-1f: \$ 136,344.				
8 €	h Total. Add lines 1a-1f	1,041,192.			
2	Business Code				
ğ	2a Conference Centers 900099	408,579.	408,579.		
Ě	b Academies & ROTC 900099	27,499.	27,499.		
옷	G Field Ministries 900099	16,958.	16,958.		
S	d				
Program Service Revenue	f All other program service revenue				12.50
ڳ	g Total. Add lines 2a-2f	453,036.			+
=	3 Investment income (including dividends, interest and	433,030.			
	other similar amounts)	60,549.	60,549.		
	4 Income from investment of tax-exempt bond proceeds !				
	5 Royalties				
	(i) Real (ii) Personal				A STATE OF THE STA
	6a Gross rents				
	b Less: rental expenses	EX. (1) = 1			5: Yi Y
	c Rental income or (loss) d Net rental income or (loss)				
	(2) Consulting (2) Office				
	7a Gross amount from sales of assets other than inventory				
	b Less: cost or other basis				
	and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
venue	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c).				
	See Part IV, line 18a		NELTO L		A IN A COLOR
Other Re	b Less: direct expenses b				
8	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities. See Part IV, line 19				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities	•			
	10a Gross sales of inventory, less returns and allowances				
	b Less: cost of goods soldb				
	c Net income or (loss) from sales of inventory  Miscellaneous Revenue Business Code				
		30,000	30 000		
	h Other_Revenue 900099	30,909.	30,909.		
	c	<del>                                     </del>			
	d All other revenue				
	e Total. Add lines 11a-11d	30,909.			
	12 Total revenue. See instructions	1,585,686.	544,494.	0	. 0.
BAA	TEE	A0109L 11/15/15			Form 990 (2016)

Form 990 (2016) Officers' Christian Fellowship of 38-1415401 Page 10 Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX... (D) Fundraising expenses (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Management and general expenses Program service expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 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 ...... Compensation of current officers, directors, trustees, and key employees ........ 71,422. 14,284 39,282. 17,856. Compensation not included above, to disqualified persons (as defined under

	section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0
7	Other salaries and wages	633,366.	525,417.	86,982.	0. 20,967.
8	Pension plan accruals and contributions (include section 401(k) and 403(b)				
	employer contributions)	31,598.	23,693.	6,975.	<u>930.</u>
9	Other employee benefits	73,574.	64,370.	7,826.	1,378.
10	Payroll taxes	49,753.	35,312.	11,190.	3,251.
	Fees for services (non-employees):				
	Management				
	Legal				
	: Accounting	7,300.		7,300.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	10,500.			10,500.
	Investment management fees	3,732.	3,168.		564.
	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	32,120.	14,727.	16,928.	465.
	Advertising and promotion	49,677.	49,577.	100.	
13	Office expenses	<u>190,637.</u>	140,911.	38,848.	10,878.
14	Information technology	6,421.		6,421.	
15	Royalties				
16	Occupancy	151,369.	149,520.	1,849.	
17	Travel	80,322.	64,843.	12,827.	2,652.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	15,271.	13,194.	1,157.	920.
20	Interest	12,974.	12,974.	27207.	320.
21	Payments to affiliates		,-		
22	Depreciation, depletion, and amortization	201,158.	198,116.	3,042.	
23	Insurance	18,056.	18,056.	3,012.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	General Ministry	118,712.	117,651.	1,038.	23.
	Food Services Supplies	93,165.	93,165.	2,000.	ــــــــــــــــــــــــــــــــــــــ
	Auto	16.030.	16,030.		
	Dues and Subscriptions	13,471.	3,293.	8,579.	1,599.
	All other expenses	20/4111		0,373.	1,333.
	Total functional expenses. Add lines 1 through 24e	1,880,628.	1,558,301.	250,344.	71,983.
	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 ► ☐ if following SOP 98-2 (ASC 958-720).		2,233,333	20070111	12,700.
BAA		TEEA0110L 11/16			Form <b>990</b> (2016)

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33

15,537,436.

15,832,378.

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year Cash — non-interest-bearing..... 67,155 1 59,044. Savings and temporary cash investments.... 1,457,120. 2 1,559,847. Pledges and grants receivable, net..... 3 3 863,113 279.292. Accounts receivable, net ..... 12,544 4 20,499. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L... 6 Notes and loans receivable, net..... 7 Inventories for sale or use..... 8 Prepaid expenses and deferred charges ..... 115,782 9 125,470. 10a Land, buildings, and equipment: cost or other basis.
Complete Part VI of Schedule D..... 10a 18,529,280 b Less: accumulated depreciation..... 10b 4,659,668. 10 c 13,481,880 13,869,612. Investments - publicly traded securities ..... 600,067. 564,461 11 12 Investments - other securities. See Part IV, line 11...... 357,550. 12 193,503. Investments - program-related. See Part IV, line 11..... 13 Intangible assets.... 14 Other assets. See Part IV, line 11..... 15 267,337 15 301,913. Total assets. Add lines 1 through 15 (must equal line 34)..... 16 17. 186,942 16 17,009,247. Accounts payable and accrued expenses..... 17 262,058 17 270.770. Grants payable ..... 18 19 Deferred revenue ..... 33,355 19 155.891. Tax-exempt bond liabilities..... 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.

Complete Part II of Schedule L 22 1.001.890 23 990,714. Unsecured notes and loans payable to unrelated third parties..... 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 57,261 54,436. Total liabilities. Add lines 17 through 25..... 1,354,564 26 1,471,811. Organizations that follow SFAS 117 (ASC 958), check here > X and complete or Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets..... 13,974,890 27 14, 121, 459. Temporarily restricted net assets.... 1,207,288 28 765,777. Permanently restricted net assets..... 650,200 29 650,200. Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34. Capital stock or trust principal, or current funds..... 30 Net Assets Paid-in or capital surplus, or land, building, or equipment fund..... 31 Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances..... 34 34 17,186,942 17,009,247. BAA Form 990 (2016)

Total net assets or fund balances.....

33

	The control of the co	LATOAA	_		age iz		
Pai	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,5	85,	686.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,8	180,	628.		
3	Revenue less expenses. Subtract line 2 from line 1	3			942.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			378.		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	15,5	<u> 37,</u>	<u>436.</u>		
Pai	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			1			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.							
2:	a Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a	-	Х		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis	d on a					
1	Were the organization's financial statements audited by an independent accountant?	.,	2 b	X			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis	te					
(	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2 c	Х			
_	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.						
	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		. За		Х		
	of 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	******	. 3b				
BAA			Forn	1 990	(2016)		

## **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.
 Information about Schedule A (Form 990 or 990-EZ) and its instructions is

Department of the Treasury Internal Revenue Service

Name of the organization

Officers' Christian Fellowship of

**SCHEDULE A** 

(E)

Total

(Form 990 or 990-EZ)

2016

OMB No. 1545-0047

Open to Public inspection

Employer identification number the United States of America 38-1415401 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 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 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. 12 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b | Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. g Provide the following information about the supported organization(s). (i) Name of supported organization (II) EIN (III) Type of organization (described on lines 1-10 (v) Amount of monetary (vi) Amount of other (iv) is the organization listed support (see instructions) support (see instructions) above (see instructions)) your governing document? No (A) (B) (C) (D)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)											
n A. Public Support	A. Public Support										
r year (or fiscal year	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	Г					

Sec	tion A. Public Support	under the tests its	sted below, please	e complete Part I	11.7	<del></del>	
Cale	endar year (or fiscal year	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.').	3,523,874.	3.445.347.	3.464.572	3.495.314		14,970,299.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0,110,017	3, 101, 3, 11	37 1337 313.	1,011,102.	0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	3,523,874.	3,445,347.	3,464,572.	3,495,314.	1,041,192.	14,970,299.
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)						0.
6	Public support. Subtract line 5 from line 4						14,970,299.
Sec	tion B. Total Support			1.	23.		14,510,233.
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	<b>(e)</b> 2016	(f) Total
7	Amounts from line 4	3,523,874.	3,445,347.	3,464,572.	3,495,314.	1,041,192.	14,970,299.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	23,262.	4,985.	3,372.	10,655.	60,549.	102,823.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	20,505	2,500	. 3,3,21	10,033.	00,345.	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI.	21,417.	1,554.	1,367.	963.	30,909.	56,210.
11	Total support. Add lines 7 through 10						15,129,332.
12	Gross receipts from related activ	vities, etc. (see in	structions)			12	5,078,268.
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th	ird, fourth, or fifth	tax year as a section		
Sec	tion C. Computation of Pu	blic Support P	ercentage			·	
14	Public support percentage for 20	016 (line 6, colum	n (f) divided by lir	ne 11, column (f))		14	98.95%
	Public support percentage from						99.47%
16a	33-1/3% support test—2016. If to and stop here. The organization	he organization d qualifies as a pul	id not check the b blicly supported o	ox on line 13, an rganization	d line 14 is 33-1/3	3% or more, check	this box
b	33-1/3% support test—2015. If the and stop here. The organization	ne organization die qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, o	check this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the facts a	and-circumstance	s'test chack this	hav and stan had	ra Evolaio in Dad	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstance: test. The organiza	s test, check this ation qualifies as	box and <b>stop he</b> i a publicly support	re. Explain in Parl ed organization	VI how the ►
18	Private foundation. If the organiz						
BAA	· ·	_		=			000 E3\ 2016

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Officers' Christian Fellowship of

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.)

Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services 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.					<u> </u>	
	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						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						***
Calen	dar year (or fiscal year beginning in) 🟲	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						1,
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						-
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 organization, check this box and	is for the organiza stop here	ition's first, secon	d, third, fourth, o	r fifth tax year as	a section 501(c)(	3) ▶ □
Sec	tion C. Computation of Pul	olic Support P	ercentage				
15	Public support percentage for 20	16 (line 8, column	(f) divided by lin	e 13, column (f)).		15	ક
	Public support percentage from 2						olo .
Sec	tion D. Computation of Inv						
17	Investment income percentage for						
	Investment income percentage f	rom <b>2015</b> Schedul	e A, Part III, line	17			ક
	33-1/3% support tests—2016. If t is not more than 33-1/3%, check	, this box and <b>sto</b> p	here. The organ	ization qualifies a	s a publicly suppo	orted organization	10111111111111111111111111111111111111
	33-1/3% support tests - 2015. If t line 18 is not more than 33-1/3%	he organization di , check this box a	d not check a boand stop here. The	con line 14 or line organization qua	e 19a, and line 16 alifies as a publici	is more than 33- y supported organ	1/3%, and
20	Private foundation. If the organiz	zation did not ched	ck a box on line 1	4, 19a, or 19b, cl	neck this box and	see instructions.	··········· - T
BAA			TEE A04031	00/29/16	C-1	andula A /Enum O	

Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

	and the organizations		_	
		_	Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	21.		
		3b		and the last
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.	Зс		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
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.	4b		
С	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 <b>Part VI</b> 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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by			
	amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	0	
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.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	•	più)	
•	(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).	7		
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).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?  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	9a		
	supporting organization had an interest? If 'Yes,' provide detail in Part VI.	9b		
	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.	9с		94.111
	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer 10b below.	10a	X	
Ь	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.)

10b

Pa	rt IV   Supporting Organizations (continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
	b A family member of a person described in (a) above?	11b		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
260	ction B. Type I Supporting Organizations			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
	or elect at least a majority of the organization's directors or trustees at all times during the tax year? If No, describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s)	100		
	that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			_
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees			
	of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1	_	
Sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	13		
	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		
		- 10		
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).			100
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	_	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations		_	
1	The most of the first state of t			
	The organization satisfied the Activities Test. Complete line 2 below.			
1	The organization is the parent of each of its supported organizations. Complete line 3 below.			
•	oxtimes The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see i	nstruc	tions).	
2	Activities Test. Answer (a) and (b) below.	- [	Yes	No
i	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the			
	supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted			
	substantially all of its activities.	2a		
١	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for			
	the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
i	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? Provide details in Part VI.			
		3a	1000	
_ I	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		
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Officers' Christian Fellowship of 38-1415401

ra	rt v   Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anızatı	ons	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organizatio	t on No	v. 20, 1970 (explain in t complete Sections A	Part VI). See through E.
Sec	tion 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	·	111
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		
Sec	tion B – Minimum Asset Amount	0.000	(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):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
-	Fair market value of other non-exempt-use assets	1c	<u></u>	
	Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		17
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		600-
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte	grated	Type III supporting or	ganization

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Schedule A (Form 990 or 990-EZ) 2016

Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	ations (continued)	
Sec	tion D — Distributions	101		Current Year
1	Amounts paid to supported organizations to accomplish exempt pur	rposes	- 10 Tr	
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization	as,	
3	Administrative expenses paid to accomplish exempt purposes of su			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organization ${\bf Part\ VI}$ ). See instructions.	on is responsive (provide	e details	· /2
9	Distributable amount for 2016 from Section C, line 6		77-2	
10	Line 8 amount divided by Line 9 amount			
Sect	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required — explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
a				
ь				
	From 2013			Marine Control of the
	From 2014	FR TESTINGET -		
	From 2015			
f	Total of lines 3a through e		-	
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
j	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7:			
_	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			_24
	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016, Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI, See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7:		Control of the Contro	
а				
b	Excess from 2013			
С	Excess from 2014.			
d	Excess from 2015			
e	Excess from 2016			
_				

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Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016

Officers' Christian Fellowship of

38-1415401

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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.)

### Part II, Line 10 - Other Income

Nature and Source	_	2016	_	2015	_	_2014	_	2013	 2012
Other Income Total	\$	30,909. 30,909.	\$	963. 963.	\$	1,367. 1,367.	\$	1,554. 1,554.	\$ 21,417. 21,417.

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Name of the organization Officers' Chri	stian Fellowship of	Employer identification number
the United Sta	tes of America	38-1415401
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treate	ed as a private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as	s a private foundation
	501(c)(3) taxable private foundation	s a private roundation
	[_] 501(c)(3) taxable private localidation	
Check if your organization is covered by the Ge	neral Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10)	organization can check boxes for both the General Rule	and a Special Rule. See instructions.
General Rule		
For an organization filing Form 990, 99 property) from any one contributor. Co	0-EZ, or 990-PF that received, during the year, contribution mplete Parts I and II. See instructions for determining a complete Parts I	ons totaling \$5,000 or more (in money or contributor's total contributions.
Special Rules		
— under sections 509(a)(1) and 170(b)(1)(A)	n 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3 (vi), that checked Schedule A (Form 990 or 990-EZ), Part II, I ng the year, total contributions of the greater of (1) \$5,00 n 990-EZ, line 1. Complete Parts I and II.	ling 12 16s, or 16h, and that
For an organization described in section during the year, total contributions of n purposes, or for the prevention of crue	n 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that re nore than \$1,000 <i>exclusively</i> for religious, charitable, scie Ity to children or animals. Complete Parts I, II, and III.	eceived from any one contributor, entific, titerary, or educational
during the year, contributions exclusive \$1,000. If this box is checked, enter he charitable, etc., purpose. Don't comple	n 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that re ely for religious, charitable, etc., purposes, but no such co are the total contributions that were received during the ye te any of the parts unless the <b>General Rule</b> applies to this aritable, etc., contributions totaling \$5,000 or more during	ontributions totaled more than ear for an <i>exclusively</i> religious, is organization becayse
990-PF), but it must answer 'No' on Part I'	by the General Rule and/or the Special Rules doesn't file V, line 2, of its Form 990; or check the box on line H of its the filing requirements of Schedule B (Form 990, 990-E2	s Form 990-FZ or on its Form 990-PF

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Page

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) 1 of Part I 1 of Name of organization Employer identification number Officers' Christian Fellowship of 38-1415401 Part Contributors (see instructions). Use duplicate copies of Part Lif additional space is needed. (b) Name, address, and ZIP + 4 (a) Number (c) Total (d) Type of contribution contributions Person 1\_\_ Google.com **Payroll** 1600 Amphitheatre Pkwy 48,265 Noncash (Complete Part II for Mountain View, CA 94043-1351 noncash contributions.) (a) Numbei (b) Name, address, and ZIP + 4 (d)
Type of contribution (c) Total contributions Person My Pillow, Inc. 2\_\_ **Payroll** 343 E. 82nd Street #102 24,000. Noncash (Complete Part II for Chaska, MN 55318 noncash contributions.) (b) Name, address, and ZIP + 4 (d) Type of contribution (a) Number (c) Total contributions Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) Number (d)
Type of contribution (c) Total contributions (b) Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (a) Number (c) Total (d) Type of contribution contributions Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) Number (b) (c) Total contributions (d) Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) BAA TEEA0702L 08/09/16 Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Page

1 to

1 of Part II Employer identification number

Officers' Christian Fellowship of

38-1415401

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional sp	pace is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	Advertising	\$48,265.	5/31/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	480 Queen size pillows and pillow cases	\$24,000.	5/19/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	<b>-</b>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
BAA	Sche	dule B (Form 990, 990-EZ	, or 990-PF) (2016)

"CHANGE OF ACCOUNTING PERIOD" Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Page Name of organization Employer identification number Officers' Christian Fellowship of 38-1415401 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)...... ▶ \$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (d) Description of how gift is held (c) Use of gift N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

(e)
Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

(a)
No. from Part I

(b)
Purpose of gift
Use of gift
Description of how gift is held

(c) Use of gift

(a)
No. from Part I

Purpose of gift

Use of gift

Description of how gift is held

(b)
Transfer of gift

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

(a) No. from

Part I

(b) Purpose of gift

Relationship of transferor to transferee

(d) Description of how gift is held

### SCHEDULE 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.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2016

m990. Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Officers' Christian Fellowship of

, -

	the United States of Ameri	38-1415401								
Par	Organizations Maintaining Done	or Advised Funds or Oth	er Similar Fur	ids or Accounts.						
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.									
		(a) Donor advised	funds	(b) Funds and other accounts	s					
1	Total number at end of year									
2	Aggregate value of contributions to (during year)									
3	Aggregate value of grants from (during year)									
4	Aggregate value at end of year									
5	Did the organization inform all donors and dor are the organization's property, subject to the	nor advisors in writing that the organization's exclusive legal	assets held in do	nor advised funds	 ∏No					
6										
Par	t II Conservation Easements.	*			<del>4</del>					
	Complete if the organization ans			7.						
1	Purpose(s) of conservation easements held by	the organization (check all th	at apply).							
	Preservation of land for public use (e.g., r	ecreation or education)	I	f a historically important land area						
	Protection of natural habitat	[	Preservation o	f a certified historic structure						
	Preservation of open space									
2	Complete lines 2a through 2d if the organization hast day of the tax year.	neld a qualified conservation conf	tribution in the form							
	T-1-1			Held at the End of the Ta	ıx Year					
	Total number of conservation easements.									
	Total acreage restricted by conservation ease									
	Number of conservation easements on a certi-		100000							
C	Number of conservation easements included in structure listed in the National Register			∄.  2d						
3	Number of conservation easements modified, trantax year ▶	sferred, released, extinguished,	or terminated by th	e organization during the						
4	Number of states where property subject to conse	rvation easement is located >								
5	Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitoring	g, inspection, har	idling of violations,	¬No					
6	Staff and volunteer hours devoted to monitoring, i				1					
7	Amount of expenses incurred in monitoring, insper	ecting, handling of violations, and	l enforcing conserv	ration easements during the year						
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the re	quirements of sec	etion 170(h)(4)(B)(i)	No					
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote is conservation easements.	conservation easements in its restormed to the organization's financial s	evenue and expensional expension	se statement, and balance sheet, and escribes the organization's accounting	ng for					
Par	Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical wered 'Yes' on Form 990	Treasures, or , Part IV, line	Other Similar Assets. 8.						
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finar	r SFAS 116 (ASC 958), not to eld for public exhibition, education icial statements that describes	report in its rever n, or research in fu these items.	nue statement and balance sheet wo rtherance of public service, provide,	rks of					
t	If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	or public exhibition, education, or	research in furthe	rance of public service, provide the	of art,					
	(i) Revenue included on Form 990, Part VIII,									
	(ii) Assets included in Form 990, Part X $\dots$									
2	If the organization received or held works of art, hamounts required to be reported under SFAS	iistorical treasures, or other simil 116 (ASC 958) relating to thes	ar assets for finance items:	cial gain, provide the following						
а	Revenue included on Form 990, Part VIII, line	1								
- 1	Assets included in Form 990, Part X									

Part III Organizations Maintai	ining Collection	s of Art, Histo	rical Treasures, o	or Other Similar	Assets (	continu	ed)					
3 Using the organization's acquisition items (check all that apply):	, accession, and other	r records, check ar	ny of the following that	are a significant use	of its collecti	on						
a Public exhibition			or exchange programs									
b Scholarly research		e Other										
c Preservation for future generations												
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.												
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No												
Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV.												
line 9, or reported an amount on Form 990, Part X, line 21.												
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes No												
b If 'Yes,' explain the arrangement	in Part XIII and cor	unlete the following	no table:	• • • • • • • • • • • • • • • • •	res.	, L	7 140					
		inplote the tellowin	ig tubic.		Amour	nt .						
c Beginning balance		veneroe c		1c	7111001							
d Additions during the year												
e Distributions during the year												
f Ending balance												
2a Did the organization include an a					Ye:		No					
b If 'Yes,' explain the arrangement				_		' <sub>~</sub>  -	- "0					
bit res, explain the attangement	iii r ait XIII. Olleck	nere ii tile explait	ation has been provid	ed on Fall Alli	2000							
Part V   Endowment Funds. C	omplete if the o	raanization an	swered 'Ves' on E	orm 000 Part I	V line 10							
il ait i Elidowillent i unus. O	(a) Current year	(b) Prior year				Four years	c back					
1 a Beginning of year balance	1,856,488					.,863,	-					
b Contributions	280,220											
	200,220	1,023,0	1,032,0	20. 1,403,	140.	041,	817.					
c Net investment earnings, gains, and losses	54,970	61,9	47. 7,53	36. 70,	528.	11,	943.					
d Grants or scholarships		-										
e Other expenditures for facilities and programs	775,701	1,406,4	99. 1,330,83	30. 1,594,	556. 1	,720,	630.					
f Administrative expenses												
g End of year balance	1,415,977	<u> </u>			<u>8</u> 00. 1	,102,	700.					
2 Provide the estimated percentage			e 1g, column (a)) hek	i as:								
a Board designated or quasi-endowme		<sup>%</sup>										
b Permanent endowment	% =											
c Temporarily restricted endowmen		<sup>8</sup>										
The percentages on lines 2a, 2b, ar	F24											
3a Are there endowment funds not in the organization by:	ne possession of the	organization that a	re held and administere	ed for the		Yes	No					
(i) unrelated organizations						163						
(ii) related organizations							X					
b If 'Yes' on line 3a(ii), are the rela					3a(ii)	$\vdash$	X					
4 Describe in Part XIII the intended					зь							
		zation's endowine	iit iulius. See Pa:	LE XIII								
Part VI Land, Buildings, and I Complete if the organic		l 'Yes' on Forn	n 990, Part IV, Iin	e 11a. See Forr	n 990, Pa	rt X, lir	ne 10.					
Description of property	(a) Co	st or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulate depreciation	ed (d)	Book va						
1 a Land			1,229,515.			1,229,	515.					
<b>b</b> Buildings			16,202,445.	3,888,9		2,313,						
c Leasehold improvements						.,,	320.					
d Equipment			1,097,320.	770,7	36	326	584.					
e Other			1,001,020.	, , , , , ,	30.	JZU,	504.					
Total. Add lines 1a through 1e. (Column		rm 990, Part X. c	olumn (B), line 10c.)		. ▶ 13	3,869,	612					
BAA	.,,	, ,, 0			Schedule D (F							

Part VII In	vestments -	- Other Securiti	es.		N/A	000 B 1 V 1 10
						See Form 990, Part X, line 12.
		egory (including name of		(b) Book value	(c) Method of valua	tion: Cost or end-of-year market value
			2000			
	ia equity interes	sts				
(3) Other						
$\frac{(A)}{(B)}$				<u>.</u>		
(C) (D)						
(E)						
(F)						
(G)				-		
(H)						
(1)						
	) must equal Form 9	90, Part X, column (B) lin	121			
		- Program Relat			N/A	
Co	omplete if the	e organization a	nswered	'Yes' on Form 990	D, Part IV, line 11c.	See Form 990, Part X, line 13.
(a	) Description of	investment		(b) Book value		n: Cost or end-of-year market value
(1)						
(2)						
(3)						1
(4)						
(5)		<u> </u>				
(6)						
(7)						
(8)						
(9)				<del>.</del>		
(10)			10: 5			
	<i>) must equal Form 9</i> <b>ther Assets.</b>	90, Part X, column (B) li	ne I3.)	N/A		
C	omplete if the	e organization a	nswered	'Yes' on Form 990	). Part IV. line 11d.	See Form 990, Part X, line 15.
	·		(a) Des			(b) Book value
(1)						
(2)						
(3)						
(4)						<u> </u>
(6)						
(7)						
(8)						
(9)					-	
(10)						
Total. (Column	n (b) must equa	l Form 990, Part X,	column (B	) line 15.).		anteresante P
Part X O	ther Liabilitie	es.				
Co	mplete if the org	ganization answered	'Yes' on Fo		le or 11f. See Form 990,	Part X, line 25
(1) Enderal i	ncome taxes	tion of liability		(b) Book value		
(2) Annuit				54,43		
(3)	ties Due			34,43		
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)		-				Samuel Line
(11)						A SECOND PROPERTY OF SECOND PROP
		90, Part X, column (B) lin			6.	
tay positions under	ETTAIN TAX POSITIONS.	In Part XIII, provide the	text of the fool	inote to the organization's fi	nancial statements that reports	the organization's liability for uncertain See Part XIII [X]
rev hosionita midel	T 111 40 (MOU 740).	overy vere it the fext of	me roomote na	22 neen browned in Latt YII	here en	SEC LATITIVITY V

Га	Complete if the organization answered 'Yes' on Form 990, Page 1	art IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	1,585,686.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		2000	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
i	a Net unrealized gains (losses) on investments	2 a	\$	
	Donated services and use of facilities			
	Recoveries of prior year grants	2c	fac. (	
	d Other (Describe in Part XIII.)	2d		
	Add lines 2a through 2d	erenner och en en en en en	2e	
3	Subtract line 2e from line 1		3	1,585,686.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			_,
	a Investment expenses not included on Form 990, Part VIII, line 7b.	4 a	100	
- 1	Other (Describe in Part XIII.)	4 b		
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	contractor and and a		1,585,686.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  † XII Reconciliation of Expenses per Audited Financial Statemen			1,585,686.
		ts With Expens		
Pai	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered 'Yes' on Form 990, Pa	ts With Expens	es per Return.	
Pai	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered 'Yes' on Form 990, Pa	its With Expens art IV, line 12a.	es per Return.	
1 2	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered 'Yes' on Form 990, Pa Total expenses and losses per audited financial statements	its With Expens art IV, line 12a.	es per Return.	
1 2	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered 'Yes' on Form 990, Pa Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ts With Expens art IV, line 12a.	es per Return.	
Pai	Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Partotal expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ts With Expens art IV, line 12a.	es per Return.	
1 2 ;	Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Part IX, line 25:  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities	ts With Expens art IV, line 12a. 2a 2b	es per Return.	
1 2 i	Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Part Italian expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Cother losses	ts With Expens art IV, line 12a. 2a 2b 2c 2d	es per Return.	
1 2 i	Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Part IX, line 25: a Donated services and use of facilities Prior year adjustments Other losses. Other (Describe in Part XIII.)	2a 2b 2c	es per Return.	1,880,628.
1 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Partola expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c	es per Return.	
1 2 ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d. Subtract line 2e from line 1.	ets With Expens art IV, line 12a.	es per Return.	1,880,628.
1 2 3 4 4 4 4 4 1	Complete if the organization answered 'Yes' on Form 990, Part IXII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Part IXIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIIII IXIIII IXIIIII IXIIII IXIIII IXIIII IXIIIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIIII IXIIII IXIIII IXIIII IXIIIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIIII IXIIIIII	ts With Expens art IV, line 12a.	es per Return.	1,880,628.
1 2 i i i i i i i i i i i i i i i i i i	Complete if the organization answered 'Yes' on Form 990, Part IXII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Part IXIII IXIIII IXIII IXIIII IXIII IX	ts With Expens art IV, line 12a.  2a 2b 2c 2d	2e 3	1,880,628.
1 2 ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	Complete if the organization answered 'Yes' on Form 990, Part IXII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Part IXIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIIII IXIIII IXIIIII IXIIII IXIIII IXIIII IXIIIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIIII IXIIII IXIIII IXIIII IXIIIII IXIIII IXIIII IXIIII IXIIII IXIIII IXIIIII IXIIIIII	ts With Expens art IV, line 12a.  2a 2b 2c 2d	2e 3	1,880,628.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

### Part V, Line 4 - Intended Uses Of Endowment Fund

The Harrison House Maintenance Endowment was established to provide for the maintenance expenses of the Harrison House at White Sulphur Springs Conference Center. Since the donors intended that the funds contributed would be permanently maintained and that only the earnings and gains of the Endowment be used for the annual maintenance, the OCF Council has determined that the amount contributed would be classified as Permanently Restricted Funds while the earnings on any investments

associated with the Harrison House Maintenance Endowment would be classified as

Schedule D (Form 990) 2016

### Part V, Line 4 - Intended Uses Of Endowment Fund (continued)

Temporarily Restricted Funds.

In addition, the Scholarship Endowment was established to provide for Scholarships for junior officer and enlisted families, cadets, and midshipmen to attend week-long or week-end conferences at either one of the two Conference Centers. Since the donors intended that the funds that were contributed would be permanently maintained and that only the earnings and gains of the Endowment be used for Scholarships, the OCF Council has determined that the amount contributed would be classified as Permanently Restricted Funds while the earnings on any investments associated with the Scholarship Endowment would be classified as Temporarily Restricted Funds.

The Investment Committee was delegated the authority by the Council to administer both of these Endowments. In accordance with Modern Portfolio Theory, the Investment Committee has invested the Endowments in a variety of Equity, Bond, and Cash Instruments with the help of a retained Investment Advisor. The Investment Committee emphasizes the preservation of capital. However, they feel that by investing in a variety of Equity, Bond, and Cash Instruments, it should be possible to maintain, on average, an Investment Return of 7% to 8% annually with a Spending Plan of 4% per year which was established in 2012. The Endowments should provide adequate funds for the stated purpose of both Endowments while allowing the Principal Amount of the Endowments to keep up with inflation.

ANNUITIES: The ministry maintains two Charitable Remainder Trusts where annual payments of \$6,000.00 in one case and \$600.36 in the other case are made. These payments will be made throughout the lifetime of the recipients. The recipients are given an IRS Form 1099-R showing the taxable portion of their annual payment. In

### Part V, Line 4 - Intended Uses Of Endowment Fund (continued)

recipients in order to make sure the ministry has the cash available to make the annual payments.

#### Part X - FIN 48 Footnote

The Fellowship is exempt from income tax under Sections 501(c)(3) of the United States Internal Revenue Code. The Fellowship did not have any material unrelated business income tax liability for the year 2016 and the short year ended May 31, 2017. The Fellowship's tax filings are subject to audit by various taxing authorities. The Fellowship's ending open audit periods are December 31, 2014, 2015, 2016 and May 31, 2017. The Fellowship believes it does not have significant uncertain tax provisions for the periods ended December 31, 2016 and short period ended May 31, 2017.

### SCHEDULE M (Form 990)

### **Noncash Contributions**

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

2016

2010

Department of the Treasury internal Revenue Service

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Officers' Christian Fellowship of the United States of America

► Attach to Form 990.

Employer Identification number 38-1415401

1 611	Types of Froperty			32.27.00.00				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Мeth лопсаsh	(d) od of de contrib	etermin	ing mounts
1	Art - Works of art			-	5 - 90			-
2	Art — Historical treasures							
3	Art — Fractional interests.							
4	Books and publications.				7			
5	Clothing and household goods				-			
6	Cars and other vehicles				7 77 7			
7	Boats and planes				7 -077			
8	Intellectual property.							
9	Securities — Publicly traded	Х	6	28,752.	EMU			
10				20,132.	LITTY			
11	Securities - Partnership, LLC, or trust interests.							-
	Securities - Miscellaneous							-
	Qualified conservation contribution — Historic structures					11110		
1/	Qualified conservation contribution — Other.							
	Real estate – Residential							
	Real estate — Commercial					2010		
17	The SECURE CO. A CONTROL OF THE SECURE CO. CO. CO.		· · · · · · · · · · · · · · · · · · ·					
18	TOTAL PROPERTY OF THE PROPERTY				_			
	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
	Historical artifacts.							
23								
	Scientific specimens		·	·········	_		_	
25	Archeological artifacts		- F.D.	00.044			_	
26	Other (Travel)		59	23,044.			_	-
27	Other Misc Gifts )		60	60,548.				_
	7-1-3-1-1-1-1		1	24,000.	FMV			
_					1//			_
29	Number of Forms 8283 received by the organization dorganization completed Form 8283, Part IV, Dones	uring the tax	year for contributions for	which the	29			
	organization completed form d200, fait 14, botter	- ACKIONIEU	igement	······································	25	-	Yes	No
							ies	No
30a	During the year, did the organization receive by contril	oution any pr	operty reported in Part I,	lines 1 through 28, that			100	115 -17
	it must hold for at least three years from the date for exempt purposes for the entire holding period?					20.0		77
Ь	of Yes, describe the arrangement in Part II.		C. C			30 a		X
	Does the organization have a gift acceptance police	v that requi	res the review of any o	onstandard contribution	ne 2	31		v
					is:	31		X_
	Does the organization hire or use third parties or r noncash contributions?	eiated organ	iizations to solicit, prod	cess, or sell		32 a		_X_
	of Yes,' describe in Part II.							
33	If the organization didn't report an amount in colur describe in Part II.	nn (c) for a	type of property for wh	nich column (a) is chec	ked,		-3	

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

Schedule M (Form 990) (2016)

Schedule M (Form 990) (2016) Officers' Christian Fellowship of 38–1415401 Page

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

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service 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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **20**16

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Officers' Christian Fellowship of the United States of America

38-1415401

Employer identification number

### Form 990, Part III, Line 4d - Other Program Services Description

Communications: The Communications Department employs all communications media available that will enable leaders and members of OCF to accomplish the OCF purpose, vision, and objectives. It informs members and others about OCF people and activities, and instructs them in biblical truths and applications concerning life and ministry in the U.S. Armed Forces. This is achieved through the publications and distribution of four issues of Command Magazine to our members worldwide. The Communications Department also publishes and makes available books and pamphlets such as "Thriving Not Just Surviving," "Equipped to Lead," and other publications that target the unique challenges faced by military members and their families. This department maintains the OCF website and communicates through social networking tools such as "Facebook," and an e-newsletter titled "Leader Touch." Advertising conferences, retreats, and summer programs helps inform members and friends of the activities and programs provided by OCF.

Education Centers: OCF has four staff couples located at key military installations with large concentrations of officers undergoing training such as: Quantico, (Virginia); Maxwell Air Force Base, (Alabama); Ft. Leavenworth, (Kansas); and Pensacola Naval Air Station (Florida). They equip and encourage current and new members and their spouses by counseling, supporting, and teaching them how to organize local fellowship groups and minister throughout the military society. They also mentor members on what it means and how to practically integrate the Christian faith with professionalism so that personal integrity and high moral standards are sustained.

Name of the organization Officers' Christian Fellowship of the United States of America

Employer identification number 38-1415401

### Form 990, Part VI, Line 11b - Form 990 Review Process

Organization's process is to review the Form 990 by emailing an electronic copy to all the members of the entire Council for their review. Any questions or comments were resolved before the Form 990 was filed. The members of the Council verified their approval of the final version of the Form 990 by e-mail.

### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Every Council Member and Field Staff employee must disclose their business and family relationships before assuming their position. These are double checked to ensure that there would be no undisclosed conflict in carrying out their duties. Also, this information is updated yearly by each currently serving Council Member and Field Staff employee. Plus, the Finance Department periodically monitors the businesses that the ministry does business with to see if there is any indication that a Council Member or a Field Staff employee is listed as a principle with that business.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The compensation of the employees of the ministry is reviewed in detail by the

Finance Committee as part of the annual budget process. In addition, the salaries

of the Executive Director, the Director of Finance, and the Director of Ministry

Advancement are reviewed by the Executive Committee (less the Executive Director)

and are compared with the salaries of comparable positions for other Not-for-Profit

Organizations in the Western United States. The salary data for comparable

positions are found in the 2017 Compensation Survey Report for Christian

Organizations. This was last done by the Executive Committee in consideration and

approval of the ministry's 2018 budget.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The compensation of the employees of the ministry is reviewed in detail by the

Finance Committee as part of the annual budget process. In addition, the salaries

Name of the organization Officers' Christian Fellowship of the United States of America

Employer identification number 38-1415401

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees (continued) of the Executive Director, the Director of Finance, and the Director of Ministry Advancement are reviewed by the Executive Committee (less the Executive Director) and are compared with the salaries of comparable positions for other Not-for-Profit Organizations in the Western United States. The salary data for comparable positions are found in the 2017 Compensation Survey Report for Christian Organizations. This was last done by the Executive Committee in consideration and approval of the ministry's 2018 budget.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

GOVERNING DOCUMENTS DISCLOSURE EXPLANATION:

The ministry makes its governing documents, audited financial statements, and IRS Form 990 available on its website, www.ocfusa.org. The conflict of interest policy is available upon request.