**Return of Organization Exempt From Income Tax** 

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

> Do not enter accial security numbers on this form as it may be made public.

OMB No. 1545/0047

Department of the Tressury Internal Revenue Service

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

Open to Public Inspection

~	rur u	is 20 to Calendar year, or talk year beginning JUN 1, 2018	and stiding	MAY JI, A	019	
B	Check i applicat	C Name of organization		D Employer I	dentific	ation number
	Add			1		
	North	Doing business as		1 2	2-22	234076
	Inditia rokin	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite			
	Firm retur termi exec	4044 MAKYES ROAD		1		69-5051
		City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts		1,012,059.
	Amer	SYRACUSE, NY 13215		H(a) is this a g	roup ret	
	Appli fier pend	F Name and address of principal officer.MICHAEL GETTMAN				Yes X No
	þønd	13919 GRIFFIN RD, SYRACUSE, NY 13215				Auded? Yes No
1	Tax-ex	empt status: X 501(c)(3) 501(c)( ) ◀ (insert no.) 4947(a)	(1) or 527	4		st. (see instructions)
		te: > WWW.MARSHILLNETWORK.ORG		H(c) Group ex		
	Form o	forganization: X Corporation Trust Association Other	L Year	of formation, 19	78 M	State of lagal domicite: NY
9	1	Briefly describe the organization's mission or most significant activities: CO	MUNICAT	ION OF T	HE G	OSPEL OF
Activities & Governance		JESUS CHRIST PRIMARILY THROUGH CHRISTIA	AN RADIO	BROADCA	STIN	IG AND
Ē	2	Check this box 📂 🔲 if the organization discontinued its operations or dis	sposed of more	than 25% of its	net ase	
Š	3	Number of voting members of the governing body (Part VI, line 1a)	*******************	***************************************	3	9
4	4	Number of independent voting members of the governing body (Part VI, line 1	b)	****************	4	
.5	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	*************		6	18
Z	В	Total number of volunteers (estimate if necessary)		******************	6	75
Ş	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	1 2 1 2 7 -	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		8,828.
_	b	Net unrelated business taxable income from Form 990-T, line 38	m	ستنسخ وسورت وتناث	7b	0.
				Prior Year		Current Year
8	8	Contributions and grants (Part VIII, line 1h)		416,0		425,595.
Revenue	9	Program service revenue (Part VIII, line 2g)		376,9		377,658.
2	10	Investment Income (Part VIII, column (A), lines 3, 4, and 7d)	********	-7.2		3,886.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		184,1		149,246.
-		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1		969,8		956,385.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.	0.
	14	Benefite paid to or for members (Part IX, column (A), line 4)	************		0.	0.
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1	0)	574,2		555,590.
Expenses	108	Professional fundralsing fees (Part IX, column (A), line 11e)			0.	0.
B	_ B	Total fundralsing expenses (Part IX, column (D), line 25)	446.	105 0		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	***********	407,0		378,660.
	16	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		981,3		934,250
<b>b</b> 18	19	Revenue less expenses, Subtract line 18 from line 12		-11,4		22,135.
體	00.	Federal Process (Chart W. Roy of Ch		Inning of Current		End of Year
盟		Fotal assets (Part X, line 16) Fotal liabilities (Part X, line 26)		1,533,0		1,570,400.
壟	2 -	Not assets or fund balances. Subtreat line 21 from line 20		1,510,99		37,271.
-	rt II	Signature Block	41.49 .10	1,510,9	7.4 =	1,533,129.
_		ties of perfury, I declare that I have examined this return, including accompanying sched-	ulan and atakana		ا ما مد ا	
		and complete. Deglaration of prevarer (other than officer) is based on all information of				nowledge and belief, it is
I.M.O.	CUITE	The County lots of the latest	Whiteh histories i	ias any knowledge		
)   Igr	. 1	Signature of officer		Date		
ier ier		MICHAEL GETTMAN, VICE PRESIDENT		2019		
169 (	. 1	Type or print name and title			_	
	- 1	Print/Type preparer's name Preparer's signature	106	ita Chi	rsk	PTIN
ald		MGELA M. FRANCO ANGELA M. FRAN	CO 10	)/08/19 id		P00589741
	F	Firm's name > FUST CHARLES CHAMBERS LLP	50 Z(	Firm's Ell		6-1226221
	- DE	Firm's address 5784 WIDEWATERS PARKWAY		1 1111 3 5 (1	4 (E)	TVPANT
		SYRACUSE, NY 13214		Phone on	315-	446-3600
lay	the IR	S discuss this return with the preparer shown above? (see instructions)		T HOUGH	923	X Yes No
1.1				The second second second		1,140

	n 990 (2018) MARS HI	LL BROADCASTING CO. I	NC. 22-	2234076 Page 2
	Int III Statement of Program Se	rvice Accomplishments  sponse or note to any line in this Part III		
3	Briefly describe the organization's missk	sponse of note to any line in this Part III	1940 and (((1940))) and ((1940)) and ((1940))	HILLIAN TO THE REAL PROPERTY.
		GOSPEL OF JESUS CHRI	ST PRIMARILY THROTT	GH
	CHRISTIAN RADIO BROA	DCASTING AND SECONDAR	ILY THROUGH CONCER	TS.
	PRESENTATIONS, LITER	ATURE DISTRIBUTION, A	ND PARTICIPATION I	N AND
	PROMOTION OF LOCAL C	OMMUNITY MINISTRIES.		
2		ficant program services during the year wi	nich were not listed on the	
				Yes X No
	If "Yes," describe these new services on	Schedule O.		
3	Did the organization cease conducting, o	or make significant changes in how it cond	uots, any program services?	Yes X No
	if "Yes," describe these changes on Sch			
4	Describe the organization's program serv	rice accomplishments for each of its three	largest program services, as measur	ed by expenses.
	Section 501(c)(3) and 501(c)(4) organizate	lons are required to report the amount of g	grants and allocations to others, the t	otal expenses, and
_	revenue, if any, for each program service			
49		571,955 • Including grants of \$	) (Revenue \$	377,658.
	COMMUNICATION OF THE	GOSPEL OF JESUS CHRI	ST PRIMARILY THROUG	H CHRISTIAN
	RADIO BROADCASTING A	ND SECONDARILY THROUG	H CONCERTS PRESENT	rations,
	LITERATURE DISTRIBUT	ION, AND PARTICIPATION	N IN AND PROMOTION	OF LOCAL
	COMMUNITY MINISTRIES			
4b	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$ .	
		11 (2) (2) (1) (2) (3) (4) (4)	/ trieventus a.	
4c	(Code:) (Expenses \$	Including grants of \$	) (Revenue \$	)
	Other program services (Describe in Sched		MONSET 12	
	DOUGLASS -	lule 0.)	) (Revenue S	)

			Yes	No
1	- 410 a Service and appropriate on tological and table to the service to the serv			
	If "Yes," complete Schedule A	1	X	-
3	Activation of the second of College of Colle	2	X	-
3	and a second of the second of			
4	public office? If "Yes," complete Schedule C, Part I	3		X
	And the state of t			
5	during the tax year? If "Yes," complete Schedule C, Part II	4	-	X
0		1000		- 20
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	.5		Х
0	The state of the s	0.00		-
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part i	6	-	X
	- 12 115 115 115 115 115 115 115 115 115			-00
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		X
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
9	Schedule D, Part III	8		X
B	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?	1		
40	If "Yes," complete Schedule D, Part IV	.8		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parta VI, VII, VIII, IX, or X as applicable.			
8	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	1 1		
	Part VI	11a	X	_
	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	11b		X
C	Did the organization report an amount for investments - program related in Part X, fine 13 that is 5% or more of its total			
-1	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110		X
q	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	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	110		X
Т	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111	X	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII			
	highly printed in the control of the	12a	X	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?			
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	-	X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
146.	Did the organization maintain an office, employees, or agenta outside of the United States?	14a		X
D	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV	16	_	X
10	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
7	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	-	X
	Did the organization report a total of more than \$15,000 of expenses for professional fundralsing services on Part IX,			
8	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	$\rightarrow$	X
9	Did the organization report more than \$15,000 total of fundraleing event gross income and contributions on Part VIII, lines			
9	1c and 8a? if "Yes," complete Schedule G, Part II	18	-	X
•	Did the organization report more than \$15,000 of gross income from gaming activities on Part Viii, line 9a? If "Yes,"			
0-	Complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? // "Yes," complete Schedule H	20a	-	X
4	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b	-	
	domestic government on Part IX, column (A). line 17 if "Yes," complete Schedule I, Parts I and II			
	45 44 45	21		X

-	art IV Checklist of Required Schedules (continued)		i.	- All
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	-		-
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22	-	X
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			ĺ
				- 200
94	Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	-	X
271	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Sobrefule X. If this is no to the USS.	1		
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		_
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
,	any tax-exempt bonde?	240		_
25.	Section 501(a)(3), 501(a)(4), and 501(a)(29) organizations. Did the organization engage in an excess benefit	24d		-
	transaction with a disqualified namen during the used if IVes I semple Selection (Cont.	11-11		22
le le	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	252		Х
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? // "Yes," complete	11 /		
		15/32/		
00	Transcendent and	25b		Х
26	Did the organization report any amount on Part X, iine 5, 8, or 22 for receivables from or payables to any current or	1 1		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? if "Yes,"	1		
-	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	1 1		
00	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	0.58	200	
	instructions for applicable filing thresholds, conditions, and exceptions):	2000		
8	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	-	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	_	X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	_	X
29	Did the organization receive more than \$25,000 in non-cash contributions? if "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? if "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part /	31	_	X
3/2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	_	X
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		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	36e		X
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		
16	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
7	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		X

140100	The state of the s	IIG U
Pärt V	Statements Regarding Other IRS Filing	gs and Tax Compliance
	Check if Schedule O contains a response or note t	

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

_	14 (5			$\perp$
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
þ	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 winters?	10	x	

832004 12-31-16

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Form 990 (2018) MARS HILL BROADCASTING CO., INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

26	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements.		1		Yes	No
	flied for the calendar year ending with or within the year covered by this return	28	18			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	ıma?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	18)	***************************************			
<b>3</b> e	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	X	
b	If "Yas," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule	0		36	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	rtty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	int)?	4a		X
b	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accou	nts (FBAR).	-04		1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			50		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-	action	?	5b		X
Ç	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			Бс		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	he org	anization solicit			
	any contributions that were not tax deductible as charitable contributions?		ABOUTE	ва		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions o	or gifta			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					-
a	Did the organization receive a payment in excess of \$76 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
0	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	ulred			
	to file Form 8282?			7c	_ [	X
d	if "Yes," Indicate the number of Forms 8282 filed during the year	7d				-
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontra	:t?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	ract?	1120	71		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fi	orm 88	199 as required?	70		
h	if the organization received a contribution of cars, boats, sirplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					100
	sponsoring organization have excess business holdings at any time during the year?			в		
9	Sponsoring organizations maintaining donor advised funds.					117
8	Did the sponsoring organization make any taxable distributions under section 4986?		411141	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(o)(12) organizations, Enter:					
8	Gross Income from members or shareholders	11a		=0		
ь	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
128	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in fleu of Form			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
	Section 601(c)(29) qualified nonprofit health insurance issuers.					
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.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	111111111111111111111111111111111111111			
b	Enter the amount of reserves the organization is required to maintain by the states in which the				- 1	
	organization is licensed to issue qualified health plans	13b				
C		13c				
l4a	Did the organization receive any payments for indoor tanning services during the tax year?		******************	14a		X
b	f "Yes," has it filed a Form 720 to report these payments? if "No," provide an explanation in Schedule	0		14b		
15	s the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner	ration	or			
	excess parachute payment(s) during the year?			15		X
	f "Yes," see instructions and file Form 4720, Schedule N.					
	s the organization an educational institution subject to the section 4968 excise tax on net investment	incon	19?	16		X
	f "Yes," complete Form 4720, Schedule O.					
				Form 9	90 (2	018)

Form 990 (2018) MARS HILL BROADCASTING CO, INC. 22-2234076 Page 6
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

Cal	Check if Schedule O contains a response or note to any line in this Part VI		1000	X
Se	ction A. Governing Body and Management			_
10	Enter the number of voting members of the governing body at the end of the tax year	0	Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing	9		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule C.			1
ь	Protocolles acceptant description and the state of the st	0		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	9	1 79	
~				
3	officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct supervision	2	-	X
9	and the organization delegate control over management duries customarily performed by or under the direct supervision			-
4	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
-	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	-	X
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets?	100	-	X
_	Did the organization have members or stockholders?	6		X
/8	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	100		
	more members of the governing body?	7a		X
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8h	X	
9	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 "Yas," provide the names and addresses in Schedule O	9		Х
98¢	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
(Ca	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
<b> 2</b> a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? if "Yes," describe			
	in Schedule O how this was done	12o	X	
3	Did the organization have a written whistleblower policy?	13	X	
4	Did the organization have a written document retention and destruction policy?	14	X	
	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	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
	if "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	n joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed > NONE			
3 ;	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	only)	availab	10
1	or public inspection. Indicate how you made these available. Check all that apply.	•		
	Own website Another's website X Upon request Other (explain in Schedule 0)			
) (	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
	statements available to the public during the tax year.			
) 8	State the name, address, and telephone number of the person who possesses the organization's books and records			
- 3	VAYNE TAYLOR - 315-469-5051			
- 1	1044 MAKYES ROAD, SYRACUSE, NY 13215			
	12-31-18	- 4	990 (2	

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's ourrent 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.

(A) Name and Title	(B) Average hours per week	box	not o c, unhi	sheck Isa De	MEGN	than is bo	b an l	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	boffield and trustee or alrector	hefforest trustee	0000	Key stapleyee	Highest Date percented on principal	Perster	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) KEITH MARSHAL AUSTIN	5.00								_	
DIRECTOR / TREASURER	F : 00	Х			-			0.	0.	.0.
(2) WILLIAM BITTLER	5.00	х								_
DIRECTOR (3) BRYAN CLEAVELAND	5.00	A	H	Н			-	0.	0.	0.
DIRECTOR	5.00	х						0 -	0.	0.
(4) WARREN DARBY	5.00	ZA					-	0.	· ·	- 0.
DIRECTOR		X			ľ.			0.	0.	0.
(5) MICHAEL GETTMAN	10.00									
VICE PRESIDENT		X		X				0.	0.	0.
(6) ROBERT GEYER	5.00									
DIRECTOR		X		_			-	0.	0.	0.
(7) WILLIAM JOHNSON	5.00									
DIRECTOR	5.00	X	-	-		-	-	0	0.	0.
(8) CLAYTON ROBERTS	3.00	x		x		П		0.	0.	0.
(9) JAMES STEWART	5.00					Н	-	0.	٧.	U.
SECRETARY	5.00	x		x				0.	0.	0.
(10) WAYNE TAYLOR	40.00									
EXECUTIVE DIRECTOR				X		1	i	72,049.	0.	0.
			1							
		1			-		4			
			Ш		П					

632007 12-31-18

	(A) Name and title	Name and title  Average hours per week  Average hours								(E) Reportable compensation from related		(F) stimat mount other	t of		
		(list any hours for related organizations below line)	bedreid and tracks or the char	Institutional Insta-	Officer	Kay employee	Key couplings	Kay omplayee	Hallest Demonstration	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	or	mpenai from th ganiza nd relai ganizat	<b>he</b> Ition Ited
					_										
0	Sub-total	rt VII, Section A 🔒	*****	.,,	117016			)>	72,049. 0. 72,049.	0.			0		
2	Total number of individuals (including become ensation from the organization	out not limited to th										Yes	No		
3	Did the organization list any former offi line 1a? If "Yes," complete Schedule J I For any Individual listed on line 1a, is th	for such individual	*****		*****		******	454114	44-44.44.64.64.04.04.64.04.04.04.04.04.04.04.04.04.04.04.04.04	sa'cab g bookkeptyppobagsib	3	108	X		
6	and related organizations greater than to Did any person listed on line 1a receive	\$150,000? if "Yes," or accrue compen	con sati	nple on fr	te S	che any	<i>dul</i> e unn	<i>J fo</i> i siate	r <i>such individual</i> d organization or individ	weenengejonen empresommathm	4		X		
Sec 1	rendered to the organization? If "Yes," of the B. Independent Contractors  Complete this table for your five highes	t compensated ind	epe	nder	nt cc	antra	ecto	ra tha	at received more than \$	•	setion	from	Х		
	the organization. Report compensation (A) Name and busin		NO			itra c	P WI	than T	ne organization's tax y (B) Description of se		(( Compe	C) Insatio	ก		

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Flevenue excluded from tax under Total revenue Related or exempt function business sections 512 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns ..... b Membership dues d Related organizations 1d Government grants (contributions) 10 f All other contributions, gifts, grants, and similar amounts not included above 425,595. ☑ Noncesh contributions included in lines 1s-1f: \$ h Total, Add lines 1a 11 425,595. Business Code 2 a BROADCASTING 366,984 515100 366,984. Program Service Revenue b CONCERTS, ETC 711300 10,674. 10,674. All other program service revenue 377,658 g Total, Add lines 2a-2f investment income (including dividends, interest, and other similar amounts) 3,886. 3.886. Income from investment of tax-exempt bond proceeds 4 Royalties ..... (I) Real (ii) Personal 6 a Gross rents 64,502. b Less: rental expenses ........ 55,674. c Rental income or (loss) ....., 8,828. d Net rental income or (toss) ... 8,828. 8.828. 7 a Gross amount from sales of (I) Securities (iii) Other assets other than inventory b Less: cost or other basis and sales expenses ...... c Gain or (loss) ..... d Net gain or (loss) 8 a Gross income from fundralsing events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 .....a b Less: direct expenses \_\_\_\_ b c Net income or (loss) from fundralsing events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold \_\_\_\_\_ b Net Income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a UNDERWRITING 515100 137,196. 137,196 **b** MISCELLANEOUS 561000 3.222. 3.222 d All other revenue e Total. Add lines 11a-11d 140,418 Total revenue. Son instructions 956,385 8,828. 518,076. 3.886.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do not	Check if Schedule O contains a respons include amounts reported on lines 6b,	(A)		(C)	(D)
7b, 8b,	, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management <b>and</b> general expenses	Fundrateing expenses
	rants and other assistance to domestic organizations				
	nd domestic governments. See Part IV, line 21 🔠 📙				
	ranta and other assistance to domestic				
	dividuals. See Part IV, line 22				
<b>3 G</b>	rants and other assistance to foreign				
	rganizations, foreign governments, and foreign				
	dividuals. See Part IV, lines 15 and 16				
	enefits paid to or for members				
	ompensation of current officers, directors,				
	ustees, and key employees	72,049.	42,995.	28,229.	825
	ompensation not included above, to disqualified				
	rsons (as defined under section 4958(f)(1)) and				
	rsons described in section 4958(c)(3)(B)				
	ther salaries and wages	361,070.	182,228.	175,338.	3,504
	insion plan accruals and contributions (include				
	ction 401(k) and 403(b) employer contributions)				
9 0	ther employee benefits	87,121.	45,302.	40,947.	872
10 Pa	ayroll taxes	35,350.	18,382.	16,615.	353
11 Fe	es for services (non-employees):				
	anagement				
b Le	gal				
e Ac	ecounting				
d Lo	bbying				
e Pri	ofessional fundralsing services. See Part IV, line 17 📗				
f Im	vestment menagement fees				
g Ot	her. (If line 11g amount exceeds 10% of line 25,				
	iumn (A) amount, list line 11g expenses on Sch O.) 📙	25,470.	25,470		
12 Ad	ivertising and promotion	52,780.	26,918.	24,806.	1,056
13 Of	fice expenses	41,611.	21,532.	19,555.	524
14 Inf	ormation technology				
15 Ro	yalties				
	cupancy	75,716.	49,574.	25,830.	312
17 Tra	ıval				
18 Pa	yments of travel or entertainment expenses				
for	any federal, state, or local public officials				
<b>19</b> Co	nferences, conventions, and meetings				
20 Int	erest				
21 Pa;	yments to affiliates				
22 De	preciation, depletion, and amortization	64,263.	58,479.	5,784.	
	urance	27,611.	17,947.	9,664.	
abo 24e	er expenses, itemize expenses not covered ove. (List miscellaneous expenses in line 24e. If line exmount exceeds 10% of line 25, column (A) ount, list line 24e expenses on Schedule 0.)				
	ROGRAMMING	67,493.	67,493.		
	IRS	23,089.	15,008.	8,081.	
c BA	AD DEBTS	627.	627.		
ď					
e All	other expenses				
	al functional expenses. Add lines 1 through 24	934,250.	571,955.	354,849.	7,446.
10 Join repo	nt costs. Complete this line only if the organization orted in column (B) joint costs from a combined cational campaign and fundraising solicitation.				, , 220
25ther	SOP 98-2  4-50 959-72 )				

882010 12-31-18

	Check if Schedule O contains a response or note to any line in this Part X	(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	81,895.	1	10,600
2	Savings and temporary cash investments	645,833.		725,990
3	Pladaes and grante resolvable, not	53.242.		45,922
4	Piedges and grants receivable, net			
5	Accounts receivable, net  Loans and other receivables from current and former officers, directors,	42,762.	4	51,963
	trustees, key employees, and highest compensated employees. Complete			
6	Part II of Schedule L  Loans and other receivables from other disqualified persons (as defined under		8	
0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
1	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
7	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use	00 000	8	
9	Prepaid expenses and deferred charges	28,269.	9	32,236
10a	Land, buildings, and equipment: cost or other		- 1	
	basis. Complete Part VI of Schedule D 10a 2,127,175.	440.450		
	Less: accumulated depreciation 106 1,667,178.	418,172.		459,997
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11	0.54	13	0.10 - 10
14	Intangible assets	261,505.	14	242,342
15	Other assets. See Part IV, line 11	1,350.	15	1,350
16	Total assets, Add lines 1 through 15 (must equal line 34)	1,533,028.	16	1,570,400
17	Accounts payable and accrued expenses	13,546.	17	28,700
18	Grants payable	0.400	18	0 504
19	Deferred revenue	8,488.	19	8,571
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.			
l an	Complete Part II of Schedule L		22	
	Secured mortgages and notes payable to unrelated third parties		23	
	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D	00.004	25	25 254
_	Total liabilities, Add lines 17 through 25	22,034.	26	37,271
	Organizations that follow SFAS 117 (ASC 958), check here > X and			
	complete lines 27 through 29, and lines 33 and 34.	1 444 440		
27	Unrestricted net assets	1,444,442.	27	1,533,129
28	Temporarily restricted net assets	66,552.	28	0.
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here			
00	and complete lines 30 through 34.			
27 28 29 30 31 32	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds	1 510 004	32	1 500 100
33	Total net assets or fund balances	1,510,994.	33	1,533,129.
34	Total liabilities and net assets/fund balances	1,533,028.	34	1 , 570 , 400 Form 990 (2018

	m 990 (2018) MARS HILL BROADCASTING CO, INC.	22-223	1076	P	age 12
P	Check & Schoolule O contribute a science and				
	Check if Schedule O contains a response or note to any line in this Part XI	11 million a a - a	11111111111	"ele	
1	Total revenue (must equal Part VIII, column (A), line 12)	4	95	6 . 3	385.
2	Total expenses (must equal Part IX, column (A), line 25)	2			250.
3	Revenue less expenses, Subtract line 2 from line 1	3			135.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		,51		
5	Net unrealized gains (losses) on investments	5	700		-
8	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 1	., 533	0.1	29
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
24	Were the organization's financial statements complied or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Ecth consolidated and separate basis				100
Ь	Were the organization's financial statements audited by an independent accountant?	*********	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,		377	
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes reaponability for oversight of the	audit,			
	review, or compliation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schei	lule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	ie Audit			
	Act and OMB Circular A-133?	H-111000110241114	3a		X
b	if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	d audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
		The state of the s	Form §	90	(2018)

#### SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

14141000 701020 20214 2000

Department of the Treasury Internal Revenue Service

## **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

De Go to www.irs.gov/Form990 for instructions and the letest information.

OMB No., 1545-0047

2018

Open to Public Inspection

Employer Identification number

MARS HILL BROADCASTING CO. INC. 22-2234076 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(ii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in asction 170(b)(1)(A)(iv), (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 12s through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, ita 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, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (f) Name of supported BV) is the organization nates (ID EIN (III) Type of organization (v) Amount of monetary (vi) Amount of other di your gove organization (described on lines 1-10) support (see instructions) support (see instructions) No above see instructions) Total

Schedule A (Form 990 or 990 EZ) 2018 MARS HILL BROADCASTING CO. INC. 22-2234076 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization falled to qualify under Part III. If the organization falls to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Caleadar year (or fiscal year beginning in) 🔊	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and						
membership fees received, (Do not						
include any "unusual grants.")						
2 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions						
by each person (other than a				-17		
governmental unit or publicly		E8 1987			- B	
supported organization) included		. x				
on line 1 that exceeds 2% of the		' I I I I I I				
amount shown on line 11,				0.5	- Line	
column (f)					100	
6 Public support. Support line 5 families 4						
Section B. Total Support						
Calendar year (or fiscal year beginning in) 🕪	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4						
8 Grose Income from Interest,						
dividends, payments received on						
securities loans, rents, royalties,					1	
and income from similar sources						
9 Net income from unrelated business						
activities, 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.)						
1 Total support. Add lines 7 through 10						
2 Gross receipts from related activities, et			***********************		12	
3 First five years, if the Form 990 is for the						
organization, check this box and stop hection C. Computation of Public	Support Per	centage	2234x2xxxxxxxxxxxxxxxxxx	Pital In 1978   Discourse of Children	ellikiekkelistatukuda entaken '	
4 Public support percentage for 2018 (line					14	9
6 Public support percentage from 2017 S	chedule A. Part i	I. line 14	· · · · · · · · · · · · · · · · · · ·	*******************************	15	9
6a 33 1/3% support test - 2018. If the org	anization did no	check the box on	line 13, and line 1	4 la 33 1/3% or n		
stop here. The organization qualifies as						
b 33 1/3% support test - 2017, If the org	anization did not	check a box on it	18 13 or 16a, and	line 15 la 33 1/3%	or more, check thi	a box
and stop here. The organization qualifie	s as a publicly s	upported organiza	tion			▶□
7e 10% -facts-and-circumstances test -	2018. If the orga	inization did not ch	neck a box on line	13, 16a, or 16b, a	nd line 14 is 10%	or more.
and if the organization meets the "facts-						
meets the "facts-and-circumstances" tes	st. The organizat	lon qualifies as a p	ublicly supported	organization		
b 10% -facts-and-circumstances test -	2017. If the orga	nization did not ch	neck a box on line	13, 16a, 16b, or 1	7a, and ilne 15 is 1	0% or
more, and if the organization meets the '	facts-and-circum	nstances" test, ch	ock this box and s	itop here. Explain	In Part VI how the	
organization meets the "facts-and-circum	nstances" test. 7	he organization qu	alifies as a public	ly supported orga	nization	<b>&gt;</b>
					**********	/
Private foundation. If the organization d	<u>lid not check a b</u>	ox on line 13, 16a.	16b, 17a, or 17b.	check this box a	nd see instructions	

(Complete only if you checked the box on line 10 of Part I or if the organization falled to qualify under Part II. If the organization falls to qualify under the tests listed below, blease complete Part IL)

Calendar year (or fleos) year beginning in) 🐎	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(r) Total
1 Gifts, grants, contributions, and						100
membership feas received. (Do not						
include any "unusual grants.")	415,267.	431,953.	466 211.	416.046.	425 595.	2155072
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	520,559.	537,779.	569,584.	534,890.	514,854.	
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
6 The value of services or facilities furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5	935,826.	969,732.	1035795.	950,936.	940,449.	4832738
7a Amounts included on lines 1, 2, and				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
3 received from disqualified persons	14,810	23,713.	14,762.	14,263.	10.000.	77,548
D Amounte included on lines 2 and 8 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 18 for the year						0.
c Add lines 7a and 7b	14,810	23,713.	14,762.	14,263.	10,000.	77,548.
B Public support, (Signature 7; from line 6)				1100		4755190
ection B. Total Support						475545
alendar year (or fiscal year beginning in) 📂	(a) 2014	(b) 2015	(c) 2016	(ස්) 2017	(e) 2018	(r) Total
9 Amounts from line 8	935,826.	969,732.	1035795.	950,936.	940,449.	4832738
On Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	670.	955.	1,297.	2,147.	3.886.	8,955
b Unrelated business taxable income	0.70	2001	414210	2,1471	3,000.	0,955
(less section 511 taxes) from businesses						
acquired after June 30, 1975	10,458.	7,723.	6,729.	7,916.	7,828.	40,654.
c Add lines 10a and 10b	11,128.	8 678.	8,026.	10 063.	11.714.	49,609
Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	22/120	0,470	0,020.	10,003.	11,714.	43,003
Other Income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
3 Total support. (Add lines 9, 10c, 11, and 12.)		978,410.				
First five years, if the Form 990 is for t	he organization's	first, second, third	l, fourth, or fifth tax	k year as a section	501(c)(3) organiza	tion,
check this box and stop here		4 pås pa 1 nind		100 00 0000		<b>&gt;</b>
ection C. Computation of Public						
5 Public support percentage for 2018 (lin	The second of the second		olumn (f))		15	97.40 %
Public support percentage from 2017 section D. Computation of Invest					16	75.81 %
Investment income percentage for 201			e 13. column (6)	T	17	1.02 %
Investment income percentage from 20	117 Schadula A 📮	an (i), divided by III) Part III, IIna 17	5 10, COIGHI (I))	11914-10	18	
be 33 1/3% support tests - 2018. If the o						
more than 33 1/3%, check this box and						
b 33 1/3% support tests - 2017. If the o line 18 is not more than 33 1/3%, chec	rganization did no	ot check a box on I	ine 14 or line 19a,	and line 16 is mor	e than 33 1/3%, ar	nd
		A.		- PORTOTY SUPPUI	a sa Mail therapping ''	
Private foundation. If the organization		ox on ilba 14 19a				

Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

	Y	96	No
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2	Н	۱	
.2			
3a			
3b			
3c			
4a			
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4b		1	
4c		7	
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		-	
5a		+	
5b		1	
5c		+	
		4	
		1	
6		1	
		1	
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8			
		1	7
9a			
	1	1	
9b		+	
9c		+	_
		ı	
10a			
10b			

832025 10-11-18

Schedule A (Form 990 or 990-EZ) 2018

1	Check here if the organization satisfied the integral Part Test as a qualifying	ng trust on I	Nov. 20, 1970 (explain in	Part VI.) See instructi
	other Type III non-functionally integrated supporting organizations must or			
Bec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (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	Depresidation and depletton	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	8		
7	Other expenses (see instructions)	7		
В	Adjusted Not Income (subtract lines 5, 8, and 7 from line 4)	8		
eol	lon B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (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):			
a	Average monthly. Value of securities	18		
Ь	Average monthly cash balances	16		
à	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 15, and 1c)	1d		
8	Discount claimed for blockage or other			THE PARTY NAMED IN
	factors (explain in detail in Part VI):			
2	Acquisition Indebtedness applicable to non-exempt tise 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	8		
7	Recoveries of prior year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ecti	on 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 B, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount Subtract line 5 from line 4 unless subject to			

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

Schedule A (Form 990 or 990-EZ) 2018

instructions).

emergency temporary reduction (see instructions)

-	art V Type III Non-Functionally Integrated 509	9(a)(3) Supporting Org	anizations (continued)				
800	tion D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish ex						
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported					
	organizations, in excess of income from activity						
8	Administrative expenses paid to accomplish exempt purpos	15					
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-saide 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 to provide details in Part VI). See instructions.	the organization is responsive					
9	Distributable amount for 2018 from Section C. line 6						
0	Line 8 amount divided by line 9 amount						
eci	ion E - Distribution Allocations (see instructions)	(I) Excess Distributions	(ii) Underdistributions Pre-2018	(ili) Distributable Amount for 2018			
1	Distributable amount for 2018 from Section C; line 6						
2	Underdistributions, if any, for years prior to 2018 (reason-	T124 LF 5 II					
	able cause required- explain in Part VI). See Instructions.						
)	Excess distributions carryover, if any, to 2018						
a	From 2018						
b	From 2014						
c	From 2015						
d	From 2016						
0	From 2017						
1	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
	Applied to 2018 distributable amount						
i_	Carryover from 2013 not applied (see instructions)						
L	Remainder, Subtract lines 3g, 3h, and 3i from 3f.						
	Distributions for 2018 from Section D, line 7:						
8	Applied to underdistributions of prior years						
ь	Applied to 2018 distributable amount						
Ġ.	Remainder, Subtract lines 4a and 4b from 4.						
	Remaining underdistributions for years prior to 2018, if	STRUKTHOUS					
	any. Subtract lines 3g and 4a from line 2. For result greater						
	than zero, explain in Part VI. See instructions.						
	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in						
	Part VI. See instructions.						
	Excess distributions carryover to 2019, Add lines 3j and 4o.						
	Breakdown of line 7:						
	Excess from 2014						
3	Excess from 2015		7/9/8/9				
3	Excess from 2016						
4	Excess from 2017						
W.	Excess from 2018						

Schedule A (Form 990 or 990-EZ) 2018

Schedule A	(Form 990 or 990 EZ) 2018 · MZ	RS HILL BI	<u>ROADCASTING</u>	CO. INC.	22-2234076 Page:
Part VI	Supplemental Informati Part IV, Section A, lines 1, 2, 3 line 1; Part IV, Section D, lines Section D, lines 5, 6, and 6; and (See Instructions.)	tion. Provide the ex b, 3o, 4b, 4c, 5a, 8, 2 and 3; Part IV, Se d Part V, Section E,	planations required b 9a, 9b, 9c, 11a, 11b, ction E, lines 1c, 2a, 2 lines 2, 5, and 6. Also	y Part II, line 10; Part II, lin and 11c; Part IV, Section 8 bb, 3a, and 3b; Part V, line o complete this part for any	e 17a or 17b; Part III, line 12; 3, lines 1 and 2; Part IV, Section C, 1; Part V, Section B, line 1e; Part V, y additional information.
	Cas nienconomy				

### Schedule A

# Payments from Disqualified Persons Included on Part III, Line 7a

2018

\*\* Do Not File \*\*
\*\*\* Not Open to Public Inspection \*\*\*

Payer's Name	2014 Amount	2015 Amount	2016 Amount	2017 Amount	2018 Amount
EITH M AUSTIN	14,810.	23,713.	14,762.	14,263.	10,000
al to Schedule A,					

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

#### Supplemental Financial Statements

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

Attach to Form 690.

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

2018
Open to Public Inspection

Name of the organization **Employer Identification number** MARS HILL BROADCASTING CO, INC 22-2234076 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private banefit? Part II | Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Hold at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b o Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation sasements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located in Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and snforcing conservation essements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(I) and section 170(h)(4)(B)(li)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, aducation, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that desorbes these items. b if the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (I) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X if the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 \_\_\_\_\_\_ > \$ b Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2018

832051 10-29-18

	edule D (Form 990) 2018 MARS H) irt III   Organizations Maintaining	LL BROADCA Collections of A	ASTING CO	TNC.	or Other	22-	223407	5 Page 2
3	Using the organization's acquisition, access							
	(check all that apply):							
6	Public exhibition	1	d 🛄 Lossn or e	exchange progr	ams			
l:	Scholarly research		Other					
O								
4	Provide a description of the organization's of						Part XIII.	
5	During the year, did the organization solicit							
100	to be sold to raise funds rather than to be in	mintained as part of	the organization's	collection?		*****	Yes_	No.
Pa	rt IV Escrow and Custodial Arrar reported an amount on Form 990, Pa		lete if the organiza	ition answered	"Yes" on F	orm 990, Part	IV, line 9, or	
10	is the organization an agent, trustee, custoo		diary for contribut	ions or other se	eate not in	cluded		
-	on Form 990, Part X?						Yea	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	allowing tebles	biolosovaná supetoja el mas			100	
-		are complete the it	Monning amore.				Amount	
c	Beginning balance					10	Amount	-
d	Additions during the year	o î.			10/01440/01914	1d		
	Distributions during the year	pyhokádádkinejy, aprasuszyjuá, s	***********************	passitenyi buayiig	***********	10		
1	Ending balance	**********************		******************	*********	11		
20	Did the organization include an amount on F	om 990. Part X. Ilna	21, for excrow or	custodial soco	unt liability		Yes	No
b	If "Yes," explain the arrangement in Part XIII						1.100	H NO
	rt V Endowment Funds. Complete					***************************************		
1		(a) Current year	(b) Prior year			Three years be	ok tel Four	wases back
10	Beginning of year balance	Tay contain your	(o) From your	[O] THO YOU	a nack	Lill go Atta 9 Or	ICK (B) COUL	years back
, <u></u>	Contributions				_			
	Net investment earnings, gains, and losses			-	_			-
4	Grants or scholarships			_	_		+	
- 4	Other expenditures for facilities							
	and programs Administrative expenses			-				
- 1				-	_			
2	End of year balance Provide the estimated parcentage of the cur	each ware and balance	a Maa da aabaan	(all hald as:				
-	Board designated or quasi-endowment		e (iine iy, column	(ay) neid as:				
b	Permanent endowment	%	_70					
_	Temporarily restricted endowment							
G	The percentages on lines 2s, 2b, and 2c sho	%						
- Clark	Are there endowment funds not in the posse							
98	by:	asion of the ordenizi	Trion that the Usid	and administer	ed for the (	organization	r <del>.</del>	
	-						[	Yes No
	(i) unrelated organizations						3a(I)	
	(II) related organizations				.444-4464140		3e(II)	
4	if "Yea" on line 3a(ii), are the related organizar Describe in Part XIII the intended uses of the	dons listed as requir	ed on Schedule M	· ************************************	4126120040004010	a s'e é av à c'a se s t a ce s'e ce	3b	
Par	t VI Land, Buildings, and Equipm		wment runds.					
1. 601	Complete if the organization answered		Don't lif the date	Dan Farry 000	D- 4 V II-			
	Description of property	(a) Cost or of basis (investment)		et or other	(c) Accu		(d) Book	value
4-	Land			s (other)	depred	HMCION	FR	601
	Land			57,621.	04	0 664		621.
b	Buildings		4.	32,102.	21.	2,661.	219	441.
6	Leasehold improvements		1 6	27 450	1 45	4 648	400	0.2 =
	Equipment	(i)	1,6.	37,452.	1,45	4,517.	182	,935.
e	Other as	Dayley Bases N	A CANADA TANDA	245W			455	000
rota.	Add lines 1 a through 1e (Column (d) must eq	uer rom 990, Part	Column (B), line	70c.)			459	,997.

Schedule D (Form 990) 2018

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2018

(B)

Schedus D (Form 990) 2018 MARS HILL BROADCASTING CO.	INC.	22-	2234076 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statemen	nts With Revenue per	Return	No.
Complete if the organization answered "Yes" on Form 990, Part IV, fine 12a.  1 Total revenue, gains, and other support per audited financial statements			1 010 050
2 Amounts included on line 1 but not on Form 990, Part Vill, line 12:	haacoatii elda kesa läb linoo Pinkkesäääestabsäätti	. 1	1,012,059.
a Net unrealized gains (losses) on investments	2p		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c 2c	-	
d Other (Describe in Part XIII.)	2d 55,674		
e Add lines 2s through 2d	20 33,079	4 00	55,674.
a Add lines 2a through 2d	***************************************	2e	956.385.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	***************************************	a	930,363.
a Investment expenses not included on Form 990, Part VIII, line 7b	40		
b Other (Describe in Part XIII.)	4b		
o Add lines 4a and 4b		40	0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 2024 664 66 66 66 66 66 66 66 66 66 66 66 6	5	956,385.
Part XII Reconciliation of Expenses per Audited Financial Stateme	nts With Expenses pe	r Retur	n.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a,			
1 Total expenses and losses per audited financial statements		1	989,924.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	4000   1000   4000   4100   1000		000,022
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses	20		
d Other (Describe in Part XIII.)	2d 55,674		
e Add lines 2e through 2d		20	55,674.
3 Subtract line 20 from line 1		3	934,250.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4b		
c Add ilnes 4a and 4b		40	0.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	de de la constante de la constante de	5	934,250.
Part XIII Supplemental Information.			
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 addition	onal information,		
DADM V TIME 1.			
PART X, LINE 2:			
MUP ODCANTANTON TO A MOR BOD DOORTH CODANIES.	HTAN 1100 1110 1110	2500	
THE ORGANIZATION IS A NOT-FOR-PROFIT OGRANIZAT	LION AND HAS BE	SEN R	ECOGNIZED
AS TAX EXEMPT PURSUANT TO SECTION 501(C)(3) OF	a mus transport	D ESTAG	WIE CODE
THE BREAT I FORDOMINI TO BECTTON SUITCINS OF	TILE INTERNAL	REVE	NUE CODE.
IT HAS BEEN DETERMINED THAT THE ORGANIZATION 1	ו ביידעם ב ייירוא סו	ים שרו	TATO A THE CORT
	ID MAI W EVIAVI	E PO	JADATION.
AS OF MAY 31, 2019 AND 2018, THE ORGANIZATION	DID NOT HAVE A	NV	
	DID NOR IMITE A	may ph	
UNRECOGNIZED TAX BENEFITS OR ANY RELATED ACCRU	ED INTEREST OF	PEN	AT.TTRS
THE TAX YEARS OPEN TO EXAMINATION BY FEDERAL A	ND NEW YORK ST	ATR '	PAXTNG
			10,000,000
AUTHORITIES ARE MAY 31, 2016 THROUGH MAY 31, 2	019.		
	-		
PART XI, LINE 2D - OTHER ADJUSTMENTS:			
IANTED DIRECTOR F			
FOWER RENTAL			55,674.

Schedule D (Form 990) 2018 MARS HILL BROADCASTING CO. INC.  Part XIII   Supplemental Information (continued)	
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
TOWER RENTAL	55,674.

Schedule D (Form 990) 2018

#### SCHEDULE O (Form 990 or 990-EZ)

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.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Tressury

Name of the organization MARS HILL BROADCASTING CO. INC. **Employer Identification number** 22-2234076

The DECEMBER OF THE PROPERTY O
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SECONDARILY THROUGH CONCERTS, PRESENTATIONS LITERATURE DISTRIBUTION,
AND PARTICIPATION IN AND PROMOTION OF LOCAL COMMUNITY MINISTRIES.
FORM 990, PART VI, SECTION B, LINE 11B:
TREASURER AND BOARD MEMBERS REVIEW FORM 990 BEFORE FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
POLICY IS REVIEWED AT LEAST ANNUALLY FOR COMPLIANCE.
FORM 990, PART VI, SECTION B, LINE 15:
GENERAL MANAGER USES COMPARATIVE DATA, REVIEW OF DUTIES, ETC.
BOARD MEMEBERS USE COMPARATIVE DATA, REVIEW OF DUTIES, ETC.
FORM 990, PART VI, SECTION C, LINE 19:
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENT
ARE AVAILABLE UPON REQUEST.
FORM 990 PART XII, LINE 2C
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.