Form **990** (Rev. January 2020) Department of the Treasury

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.

OMB No. 1545-0047

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

Open to Public Inspection

_	ror t	and a solution of the part of	ending M	AY 31, 202	20				
₿	Check applie			D Employer iden	ntification	number			
		MARS HILL BROADCASTING CO, INC.							
	Ner ohe	ne Doing business as		22-2234	1076				
	initi retu Fini retu	m Number and street (or P.O. box if mail is not delivered to street address) (Room/suite	E Telephone num	one number 5-469-5051				
_	retu tern eter	City or town, state or province, country, and ZIP or foreign postal code							
Г		and dispression and a code		G Gross receipts \$ 1,168,40					
F	Apr			H(a) is this a grou	•	Yes X No			
-	pen	ding 3919 GRIFFIN RD, SYRACUSE, NY 13215		H(b) Are all aubordinat					
T	Тах-в	xempt status: X 501(c)(3) 501(c) () ◀ (Insert no.) 4947(a)(1) o	r 527			ee Instructions)			
		He: > WWW.MARSHILLNETWORK.ORG		H(c) Group exemp					
		of organization; X Corporation Trust Association Other	L Year o			of legal domicie: NY			
P	art I	Summary			111				
	1	Briefly describe the organization's mission or most significant activities: COMMU	NICAT	ION OF THE	GOSI	PEL OF			
Activities & Governance		JESUS CHRIST PRIMARILY THROUGH CHRISTIAN F							
Ē	2	Check this box is if the organization discontinued its operations or dispose	d of more t	than 25% of its net	assets.				
ě	3	Number of voting members of the governing body (Part VI, line 1a)	***************************************		3	9			
og	5	Number of independent voting members of the governing body (Part VI, line 1b)	•••••••	······	4	9			
Ę	6	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	•••••		5	18			
ă	7.	Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12	***************************************		6	75 1,340.			
₹		Net unrelated business taxable income from Form 990-T, line 39			7b	0.			
	-	THE GENERAL PROPERTY OF THE CONTROL	- 1	Prior Year	-	Current Year			
	8	Contributions and grants (Part VIII, line 1h)		425,595		599,768.			
Revenue	9	Program service revenue (Part VIII, line 2g)		377,658	_	377,124.			
8	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,886		634.			
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		149,246		127,205.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), (ine 12)	11//2	956,385	. :	1,104,731.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0		0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0		0.			
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		555,590		565,846.			
Expenses	16a	Professional fundralsing fees (Part IX, column (A), line 11e)		0	•	0.			
8		Total fundraising expenses (Part IX, column (D), line 25) > 7, 278	8.	200 440					
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		378,660		395,846.			
	18 19	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12		934,250 22,135		961,692.			
H S	_	Trevende leas expenses. Subtract line 15 from line 12				143,039.			
ets or	20	Total assets (Part X, line 16)		nning of Current Year 1,570,400		End of Year . , 722,060.			
Age Bass		Total liabilities (Part X, line 26)		37,271		45,892.			
2	22	Net assets or fund balances. Subtract line 21 from line 20		1,533,129		,676,168.			
Pa	rt II	Signature Block							
Unde	r pena	ities of perjury, I declare that I have examined this return, including accompanying schedules ar	nd statement	s, and to the best of n	ny knowle:	dge and bellef, it is			
true,	COLLB	and complete. Declaration of preparer (other than officer) is based on all information of which	n preparer ha	s any knowledge.					
		Canadina of artical		12/0	1/20	٠			
Sign		Signature of officer		Date					
Here	•	MICHAEL GETTMAN, VICE PRESIDENT Type or print name and title							
_			Dat	DB Check		PTIN			
ald		Print/Type preparer's name Preparer's signature ANGELA M. FRANCO ANGELA M. FRANCO	10.0	/09/20 of self-ampli		0589741			
repa	- 24	Firm's name FUST CHARLES CHAMBERS LLP	μ.4	Firm's EIN					
Jaa (- 4	Firm's address 5784 WIDEWATERS PARKWAY		I IIIII 8 EIN PS					
		SYRACUSE, NY 13214-		Phone no. 31	L5-44	6-3600			
/lay	the IF	S discuss this return with the preparer shown above? (see instructions)				Yes No			
agen-	01-90	20 I HA For Denouvery Deduction Act Notice are the concrete by the second			-	- 000			

		L BROADCASTING CO INC	22-223407	6 Page 2
P	art III Statement of Program Serv	THE PERSON SECTION AND ADDRESS OF THE PERSON SECTION AND ADDRESS OF THE PERSON SECTION ADDRESS OF THE PERSON SECTION AND ADDRESS OF THE PERSON SECTION		
_		onse or note to any line in this Part III		
1	Briefly describe the organization's mission			
		GOSPEL OF JESUS CHRIST		
		CASTING AND SECONDARIL		
	PRESENTATIONS, LITERA	TURE DISTRIBUTION, AND	PARTICIPATION IN AND	
_	PROMOTION OF LOCAL COL			
2		ant program services during the year which		
	prior Form 990 or 990-EZ?	***************************************	ү	'es 🗓 No
	If "Yes," describe these new services on Se	chedule O.		
3	Did the organization cease conducting, or	make significant changes In how it conduct	s, any program services?	es X No
	If "Yes," describe these changes on Sched			
4	Describe the organization's program service	e accomplishments for each of its three larg	gest program services, as measured by expens	68.
	Section 501(c)(3) and 501(c)(4) organization	as are required to report the amount of gran	ts and allocations to others, the total expenses	, and
_	revenue, if any, for each program service re			
4a		96,141. Including grants of \$) (Revenue \$ 377	7,124.
	COMMUNICATION OF THE	OSPEL OF JESUS CHRIST	PRIMARILY THROUGH CHRIS	TIAN
	RADIO BROADCASTING ANI	SECONDARILY THROUGH	CONCERTS, PRESENTATIONS,	
	LITERATURE DISTRIBUTIO	N, AND PARTICIPATION	IN AND PROMOTION OF LOCA	L
	COMMUNITY MINISTRIES.			
4b	(Code:) (Expenses \$	Including grants of \$) (Revenue \$	
-	/ (Cobe and a final a	mining of a first of a	/ (Hevenue \$	
				_
4c	(Code;) (Expenses \$	South Aller and the	16	
10	(Cooks) (Expenses 5	including grants of \$) (Revenue \$	
	-			
	-			
_				
ld	Other program services (Describe on Schedu	ile O.)		
_	William Control of the Control of th		(Revenue \$	
le	Total program service expenses	596,141.		
			Form	990 (2019)

Form 990 (2019) MARS HILL BR Part IV Checklist of Required Schedules

1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	_	Yes	No
Ī	If "Yes," complete Schedule A	\mathbb{L}_{1}	x	1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	+-
3		12	-	+
	public office? If "Yes," complete Schedule C, Part I	3	1	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	l-°	+	-
	during the tax year? If "Yes," complete Schedule C, Part II	4	1	X
5		-	+	-
_	similar amounts as defined in Revenue Procedure 98-19? // "Yes," complete Schedule C, Part //	5	1	x
6		-	+	+-
Ī	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		1	x
7		6	+	1
Ċ	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	11-1	1	x
B	Did the organization maintain collections of works of art, historical treasures, or other similar assets? if "Yes," complete	7	+	-
•			1	
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	8	-	X
•	amounts not listed in Dart Y, or provide gradit sequesting debt management and the count label of the country and the country			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			ll
10	If "Yes," complete Schedule D, Part IV	9	-	X
10				l
44	or in 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, Parts VI, VIII, IX, or X			100
	as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	_
D	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, line 13, that is 5% or more of its total			
	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII	110		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	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
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111	X	
12#	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	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, fundralsing, 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		<u>X</u>
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
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
_	or for foreign Individuals? // "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundralsing event gross income and contributions on Part VIII, lines			
	1c and 8a? if "Yes," complete Schedule G, Part II	18		<u> </u>
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
Oa.	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
þ	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	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? // "Yes, " complete Schedule I, Parts I and II	21		X
2003	01-20-20	Form !	200 -	2040

			-	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic indiv			1	1
-	Part IX, column (A), line 2? if "Yes," complete Schedule I, Parts I and III		22	9	X
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?	"Yes, " complete			1
24	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more to	·	23		X
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through	nan \$100,000 as of the			
	Schedule K. If "No," go to line 25a	24d and complete	04		x
-	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception		241	1	+^
-	Did the organization maintain an escrow account other than a refunding escrow at any time during	the year to defease	246	+-	+
	any tax-exempt bonde?	are year to dereade	240		
(Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the ye	e/?	240	-	1
25	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an ex	cess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I		250		X
	o is the organization aware that it engaged in an excess benefit transaction with a disqualified person	n in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ7	' If "Yes," complete			1
	Schedule L, Part I		25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to a				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 359	6			1
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Pert II	4114	. 28	-	X
	Did the organization provide a grant or other assistance to any current or former officer, director, to creator or founder, substantial contributor or employee thereof, a grant selection committee members.	JStee, key employee,	10	1	
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete	er, or to a 35% controlled		1	X
28	Was the organization a party to a business transaction with one of the following parties (see Sched	e Scriedule L, Part III ula I Part IV	. 27		A
	Instructions, for applicable filing thresholds, conditions, and exceptions):	aro L, reality			
•	A current or former officer, director, trustee, key employee, creator or founder, or substantial contril	outor? #			
	"Yes," complete Schedule L, Part iV		28a	1	X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L. Part IV	•	28b		X
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28	b? <i>if</i>			
	"Yes," complete Schedule L, Part IV	***************************************	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete School	dule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qual				
31	contributions? /f "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? /f "Yes," complete Schedule M		30		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // "Yes	edule N, Part I	31		X
_			40		x
33	Schedule N, Part II	suletione	32		-
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	guiationa	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pe	ert II III or IV and	-		
	Part V, line 1		34		ж
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		35a		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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charita				
37	If "Yes," complete Schedule R, Part V, line 2		36		<u>x</u>
41	Did the organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization.	anization			
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines	Part VI	37		<u>x</u>
	Note: All Form 990 filers are required to complete Schedule O	I ID AND 197	38	x	
Par	Statements Regarding Other IRS Filings and Tax Compliance		38	<u>A</u>	
	Check if Schedule O contains a response or note to any line in this Part V				
		7 V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 13			1.4
b	Enter the number of Forms W-2G Included in line 1a. Enter -0- if not applicable	1b (- 12		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re	sportable gaming			
	(gambling) winnings to prize winners?		1c	X	
32004	01-20-20		Form	990 (2019)

Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statementa. filed for the calendar year ending with or within the year covered by this return 18 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Dld the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O X **3**b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 40 b if "Yes," enter the name of the foreign country See Instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? X b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 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? X 7= 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? ______ X 7c e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X 7e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7α if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 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? Section 501(c)(7) organizations. Enter: a 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(c)(12) organizations, Enter: Gross income from members or shareholders 110 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 Section 501(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. 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 14a Did the organization receive any payments for indoor tanning services during the tax year? X **14a** b If "Yes." has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? X 15 If "Yes," see instructions and file Form 4720, Schedule N. is the organization an educational institution subject to the section 4968 excise tax on net investment income? X If "Yes." complete Form 4720, Schedule O.

Form **990** (2019)

Form 990 (2019) MARS HILL BROADCASTING CO, INC. 22-22-20,0 response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" 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 on Schedule O. See instructions.

_	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	ction A. Governing Body and Management									
	UVII W	-	Yes	No						
18	Enter the number of voting members of the governing body at the end of the tax year	9								
	if there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.									
b	Enter the number of voting members included on line 1a, above, who are independent1b	9								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			3						
	officer, director, trustee, or key employee?	2		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, trustees, or key employees to a management company or other person?	3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X						
6	Did the organization have members or stockholders?	6		X						
7a	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?	7a		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?									
8	Did the organization contemporareously 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?	8b	X							
8	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 on Schedule O	9		X						
26C	tion B. Policies (This Section B requests information about policies not required by the internal Revenue Code.)									
	TO THE STATE OF A DESCRIPTION AND A SECOND STATE OF THE S	_	Yes	No						
10a	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	x							
_	The second secon									
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
	12a Did the organization have a written conflict of interest policy? If "No," go to line 13									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	in Schedule O how this was done	12c	X	_						
	Did the organization have a written whistleblower policy?	13	X							
	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?									
8	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		<u>X</u>						
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b		_						
				_						
	List the states with which a copy of this Form 990 is required to be filed NONE			_						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)	s only) :	aveileb	ie						
1	for public Inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website Upon request Other (explain on Schedule O)									
	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finenc	ial							
	statements available to the public during the tax year.									
20 1	State the name, address, and telephone number of the person who possesses the organization's books and records									
	WAYNE TAYLOR - 315-469-5051									
	4044 MAKYES ROAD, SYRACUSE, NY 13215									
12006	01-20-20	Form	990 ₍₂	(019)						

INC. 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

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

(B) Average hours per week	bot	Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated on 11 year	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
5.00									
	X		X				0.	0.	0.
5.00									
	X						0.	0.	0.
5.00									
	X						0.	0.	0.
5.00									
	X						0.	0.	0.
10.00									
	X		Х	_	11		0.	0.	0.
5.00									
	X		_	_	Ш	_	0.	0.	0.
5.00									
F 00	X	_	\dashv	_	\perp	-	0.	0.	0.
5.00									
F 00	A	\dashv	A.		\dashv	-	0.	0.	0.
5.00		- 1	_						
40.00	A	\dashv	ᅀ	-	-	+	0.	0.	0.
40.00			x				79,052.	0.	0.
					+				
	Average hours per week (list any hours for related organizations below	Average hours per week (list any hours for related organizations below line) 5.00 X X X X X X X X X X X X	Average hours per week (list any hours for related organizations below line) 5.00 X 40.00	Average hours per week (itst any hours for related organizations below line) 5.00 X 5.00 X 5.00 X 5.00 X 5.00 X X X X X X X X X X X X	Average hours per week (list any hours for related organizations below line) 5.00 X 5.00	Average hours per week (list any hours for related organizations below line) 5.00 X 4 5.00 X 5.00	Average hours per week (list any hours for related organizations below line) 5.00 X 5.00	Average hours per week (list any hours for related organizations below line) 5.00 X X Compensation from the organization (W-2/1099-MISC) Compensation (W-2/1099-MISC) Compensation from the organization (W-2/1099-MISC)	Average hours per week (list any hours for related organizations below line) \$5.00\$ \$\$X\$ \$\$X\$ \$\$0.\$ \$\$0.\$ \$\$0.\$ \$\$0.\$ \$\$0.\$ \$\$X\$ \$\$0.\$ \$\$0.\$

932007 01-20-20

	rt VII Section A. Officers, Directors, 1 (A) Name and title	(B) Average hours per week (list any	(do		Pos heck	C) itior more reon i	then e	one	(D) Reportable compensation from	(E) Reportable compensation from related		Estin armo of	F) mated unt of her			
	houri relat organiz belo line		Individual trustne or director	Institutional treatee	Officer	enfoptum Ary	Highest compensated	Highest companied	Highest companied	Highest companyable	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)		fror organ and r	nsation n the ization elated zations
C	Subtotal Total from continuation sheets to Part Total (add lines 1b and 1c) Total number of individuals (including bu	VII, Section A)	>	79,052. 0. 79,052. elved more than \$100,0	0 0 0 00 of reportable			0.			
_	compensation from the organization		_		_						_	Ye	s No			
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the and related organizations greater than \$1	r such individual sum of reportable		mper	rsati	ion a	and (other	compensation from th	e organization	ŀ	3	x			
5	Did any person listed on line 1a receive of rendered to the organization? If "Yes " organization B, Independent Contractors	or accrue compens	eatic	n fro	m a	ny L	ınrel	ated	organization or individu	ual for services		5	x			
2001	Complete this table for your five highest the organization. Report compensation for										atio	n from				
1	/AL		NO	NE					(B) Description of se	rvices	Cor	(C) npensa	tion			
1	(A) Name and busine	88 address						_								
1		se accress														
1		se accress														

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Related or exempt Revenue excluded Total revenue Unrelated function revenue business revenue from tax under sections 512 - 514 1 a Federated campaigns Contributions, Giffs, Grants and Other Similar Amounts. b Membership dues 1b c Fundralsing events 1c d Related organizations 14 Government grants (contributions) # All other contributions, gifts, grants, and 599,768. similar amounts not included above ... 16 Noncesh contributions included in lines 1a-1f h Total Add lines 1a-1f 599,768. **Business Code** 2 a BROADCASTING 515100 360,642. 360,642. Program Service b CONCERTS, ETC 711300 16,482. 16,482. f All other program service revenue 377,124. Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 634. 634. Income from investment of tax-exempt bond proceeds Royalties (ii) Personal (I) Real 6 a Gross rents 65,010. 8a b Less: rental expenses ... 63,670. 6b 1,340. c Rental income or (loss) 1,340. 1,340. d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (II) Other assets other than inventory **b** Less: cost or other basis and sales expenses c Gain or (loss) 7c d Net gain or (loss) 8 a Gross income from fundralsing events (not Including \$ _____ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundralsing events 9 a Gross Income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net Income or (loss) from gaming activities 10 a Gross sales of Inventory, less returns and allowances 10a b Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 . UNDERWRITING 515100 125,865. 125,865. d All other revenue 125.865. Total. Add lines 11e-11d 104.731. 502,989. 1,340. Total revenue. See instructions 634. 982009 01-20-20 Form **990** (2019)

-	Check if Schedule O contains a respons	e or note to any line in t	his Part IX (B)		
	o not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1					
	and domestic governments. See Part IV, line 21				
2					
	Individuals. See Part IV, line 22				
3					
	organizations, foreign governments, and foreign		1		
_	Individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	E0 0E0	27.444	40.000	
	trustees, and key employees	79,052.	37,466.	40,866.	720
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	274 506	100 105	150 011	
7	Other salaries and wages	374,586.	198,426.	172,344.	3,816
8	Pension plan accruais and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	74,894.	38,945.	35,200.	749.
10	Payroli taxes	37,314.	19,403.	17,538.	373.
11	Fees for services (nonemployees):				
	Management				
b					
G	Accounting				
d					
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	39,389.	39,389.		
12	Advertising and promotion	49,655.	25,324.	23,338.	993.
13	Office expenses	34,831.	18,014.	16,371.	446.
14	Information technology				
15	Royalties				
16	Occupancy	81,634.	53,224.	28,229.	181.
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	53,323.	48,525.	4,798.	
23	Insurance	30,757.	19,992.	10,765.	
24	Other expenses, Itemize expenses not covered above (List miscallaneous expenses on line 24e. If ilne 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)		141512		
	PROGRAMMING	80,823.	80,823.		
b	DUES	25,213.	16,389.	8,824.	
_	BAD DEBTS	221.	221.	0,024.	
d			2211		
_	All other expenses				
	Total functional expenses. Add lines 1 through 24e	961,692.	596,141.	358,273.	7,278.
	Joint costs. Complete this line only if the organization	552,0521	224174	330,413.	1,410.
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	1			
	Check here if hillswing SOP 98-2 (ASC 956-720)				

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Form **990** (2019)

					(A) Beginning of year		(B) End of year
	1	Cash - non-Interest-bearing			10,600.	1	125,891
	2	Savings and temporary cash investments		·····	725,990.		191,567
	3	Pledges and grants receivable, net			45,922.		48,856
	4	Accounts receivable, net			51,963.		42,981
	5	Loans and other receivables from any current o	r former o	officer, director.		171	42,501
		trustee, key employee, creator or founder, subs	-				
		controlled entity or family member of any of the	se persor	18		6	
	6	Loans and other receivables from other disquall	fled pers	ons (as defined			
1		under section 4958(f)(1)), and persons described				8	
R	7	Notes and loans receivable, net			7		
4556TS	8	Inventories for sale or use				8	
2	9	Prepaid expenses and deferred charges	*************		32,236.		31,451
	10a	Land, buildings, and equipment: cost or other	1 1				02,101
		basis. Complete Part VI of Schedule D	10a	2 214 741.		1	
	b	Less: accumulated depreciation		1,720,380.	459,997.	10c	494,361
Ш	11	Investments - publicly traded securities			100,000	11	171,501
	12	investments - other securities. See Part IV, line 1	 1			12	
- 1	13	Investments - program-related. See Part IV, line	***************************************		13		
- 1	14	Intangible assets		242,342.		785,603	
- 1	15	Other assets. See Part IV, line 11		1,350.		1,350	
	16	Total assets. Add lines 1 through 15 (must equa	al line 33	NA.	1,570,400.	16	1,722,060
╗	17	Accounts payable and accrued expenses		28,700.	17	34,039	
- [18	Grants payable		20,7001	18	32,033	
- 1	19	Deferred revenue		8,571.	19	11,853	
- 1	20	Tax-exempt bond liabilities	0,5721	20	11,000		
- 1	21	Escrow or custodial account liability. Complete F	Schedule D		21		
.	22	Loans and other payables to any current or form					
		trustee, key employee, creator or founder, substi					
		controlled entity or family member of any of thes				22	
1		Secured mortgages and notes payable to unrelat				23	
- 1		Unsecured notes and loans payable to unrelated				24	
-		Other liabilities (including federal income tax, pay				24	
		parties, and other liabilities not included on lines				- 1	
		of Schedule D	•			25	
	26	Total liabilities. Add lines 17 through 25	4117775741		37,271.	26	45,892.
Т		Organizations that follow FASB ASC 958, chec	k here	×X		20	25,0521
		and complete lines 27, 28, 32, and 33.			- 1 2 - 37		
		Allel and the last of the last			1,533,129.	27	1,676,168.
1		Net assets with donor restrictions				28	2,0,0,2001
1		Organizations that do not follow FASB ASC 95	8. check	here	7 7 7 7 7 7 7		
T		and complete lines 29 through 33.	-, -,,				
Ш.		Capital stock or trust principal, or current funds				29	
1	30	Paid-in or capital surplus, or land, building, or equ	ilpment f	und		30	
	31	Retained earnings, endowment, accumulated inc	ome, or c	ther funds		31	
1	32	Total net assets or fund balances			1,533,129.	32	1,676,168.
100	33	Total liabilities and net assets/fund balances			1,570,400.	33	1,722,060.

	m 990 (2019) MARS HILL BROADCASTING CO, INC.	22-22	234076	Pag	ge 1
P	Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
		1 1			_
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,104	7	31.
2	Total expenses (must equal Part IX, column (A), line 25)	2	961		
3	Revenue less expenses. Subtract line 2 from line 1	3	143	The latest lates	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,533		
- 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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
		10	1,676	-16	68.
Pa	rt XII Financial Statements and Reporting	10.1		-	
	Check if Schedule O contains a response or note to any line in this Part XII			P	X
				$\overline{}$	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	n	-		
2a	Mare the expenientarie financial elektroneth countries or reduced by a full countries of		20		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	AD 9			
	separate basis, consolidated basis, or both:	OITE			
	Separate basis Consolidated basis Both consolidated and separate basis			- 1	
b			2b	x	
	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	haala			
	consolidated basis, or both:	Daele,		- 1	
	Separate basis Consolidated basis Both consolidated and separate basis				
G	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ما المارية			
	review, or compliation of its financial statements and selection of an independent accountant?	audit,	2c	x I	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dula O	Zc	_	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	dule O.		7	
	Act and OMB Circular A-1992	JIB AUGIT			•
Ь	Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ما من مالة	. 3a	-	<u>X</u>
_	an availibre available value and Cabacabala Council de coultre and the coultre and the country		0.	- 1	
	or addits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	00 =	_
			Form 9	au (2	U19)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Reserve 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.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(I). A school described in section 170(b)(1)(A)(II). (Attach Schedule E (Form 990 or 990-EZ).) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii), A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 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.) 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)(b) 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 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), 19 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. 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, 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) (I) Name of supported NI IRTIRO (II) EIN (III) Type of organization (v) Amount of monetary (vi) Amount of other organization (described on lines 1-10 support (see instructions) support (see instructions) Yes No above (see instructions) Tota

(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 fails to qualify under the tests listed below, please complete Part !!!.)

rtion A. Public Support ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(a) 2017	1.0010	(4-) 0040	744 7
Gifts, grants, contributions, and	(8) 2013	(6) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
membership fees received. (Do not				l'	1	
include any "unusual grants.")		1				
Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
The value of services or facilities						
furnished by a governmental unit to				1	1	
the organization without charge						
Total. Add lines 1 through 3				1		
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)						
Public support, Support are 5 from line 4.						
tion B. Total Support						
dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(e) 2017	(d) 2018	(e) 2019	(f) Total
Amounts from line 4					10/2010	Ity rotal
Gross income from interest,						
dividends, payments received on						()
securities loans, rents, royalties,						
and income from similar sources						
Net income from unrelated business						
activities, whether or not the					1 1	
ousiness is regularly carried on						
Other Income. Do not include gain						
or loss from the sale of capital		1			1	
ssets (Explain in Part VI.)					1	
Total support, Add lines 7 through 10						
Pross receipts from related activities, etc.	c. (see instruction	ns)			12	
First five years. If the Form 990 is for th			, fourth, or fifth ta	x vear as a section		
rganization, check this box and stop helon C. Computation of Public s						
Public support percentage for 2019 (fine	6, column (f) div	ided by line 11, co	lumn (f))		14	
Public support percentage from 2018 Sc	:hedule A, Part II	, line 14		***************************************	15	
3 1/3% support test - 2019. If the orga	anization did not	check the box on	line 13, and line 1	4 is 33 1/3% or m	ore, check this box	and
top here. The organization qualifies as		-	***************************************			
3 1/3% support test - 2018. If the orga	anization did not	check a box on lin	e 13 or 16a, and i	lne 15 is 33 1/3%	or more, check this	box
nd stop here. The organization qualifies	s as a publicly su	pported organizat	ion	***************************************	*************************	>
0% -facts-and-circumstances test - 2						
nd if the organization meets the "facts-a	ind-circumstance	s" test, check this	box and stop he	ere. Explain in Pa	rt VI how the organi	zation
iests the "facts-and-circumstances" test	t. The organization	on qualifies as a pu	iblicly supported o	organization		▶ □
7% -facta-end-circumstances test - 2	018. If the organ	nization did not ch	eck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 10	0% or
ore, and if the organization meets the "	facts-and-circum	stances" test, che	ck this box and	top here. Explain	In Part VI how the	
						▶
(Wate foundation. If the organization di	id not check a be	ox on line 13, 16a	16b 17a or 17b	check this box ar	nd see instructions	>
0% -facts-and-c nore, and if the or rganization meet	:ircumstances test - 2 rganization meets the " s the "facts-and-circum	ircumstances test - 2018. If the orgal rganization meets the "facts-and-circum s the "facts-and-circumstances" test. Th	ircumstances test - 2018. If the organization did not ch rganization meets the "facts-and-circumstances" test, che s the "facts-and-circumstances" test. The organization que	ircumstances test - 2018. If the organization did not check a box on line rganization meets the "facts-and-circumstances" test, check this box and a s the "facts-and-circumstances" test. The organization qualifies as a publicly	rircumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 1 rganization meets the "facts-and-circumstances" test, check this box and stop here. Explain a the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, 17a, or 17b, 17a, or 17b, 17b, 17b, 17b, 17b, 17b, 17b, 17b,	and-circumstances" test. The organization qualifies as a publicly supported organization stroumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10 reganization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the sthe "facts-and-circumstances" test. The organization qualifies as a publicly supported organization in if the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or

(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 falls to quality under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ondar year (or flocal year beginning in) 📂	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
- 1	Gifts, grants, contributions, and			1	1	10,100	17
	memberahip fees received. (Do not						
	include any "unusual grants.")	431,953.	466,211.	416,046.	425.595.	599,768.	2339573.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	537 779.				502,989.	
3	Gross receipts from activities that	007,7770	303,3011	334,0301	314,034.	302,303.	2000096.
	are not an unrelated trade or bus-						
	Iness under section 513						
4	Tax revenues levied for the organ-						
	Ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to		(
	the organization without charge						
6	Total. Add lines 1 through 5	969,732.	1035795.	950,936.	940,449.	1102757.	4999669.
7#	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	23,713.	14,762.	14,263.	10,000.	22,000.	84,738.
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 196 of the amount on line 13 for the year						0.
G	Add lines 7a and 7b	23,713.	14,762.	14,263.	10,000.	22,000.	84,738.
8	Public support. (Submitting 7c from line 6.)						4914931.
Sec	tion B. Total Support						17117011
Calen	dar year (or fiscal year beginning in) 🕪	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	969,732.	1035795.	950,936.	940,449.	1102757.	4999669.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	955.	1,297.	2,147.	3,886.	634.	8,919.
	Unrelated business taxable income						
	(less section 511 taxes) from businesses		- 1				
	acquired after June 30, 1975	7,723.	6,729.	7,916.	7,828.	1,340.	31,536.
C.	Add lines 10a and 10b	8,678.	8,026.	10,063.	11,714.	1,974.	40,455.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		3,0200			2,372	40/2331
12 (Other Income. Do not Include gain or loss from the sale of capital assets (Exclain in Part VI.)						
	Total support. (Add lines 8, 10o, 11, and 12.)	978,410.	1043821.	960,999.	952,163.	1104731.	5040124.
	First five years. If the Form 990 is for t						
	description of the second of t				_		
Sect	tion C. Computation of Public	Support Perc	entage				
15 F	Public support percentage for 2019 (lin	e 8, column (f), div	ided by line 13, co	olumn (f))		15	97.52 %
16 F	Public support percentage from 2018 \$	Schedule A. Part III	line 15			16	97.40 %
Sect	ion D. Computation of Invest	ment income	Percentage				1170
17 l	nvestment income percentage for 201	9 (line 10c, colum	(f), divided by line	e 13, column (f))		17	.80 %
18 li	nvestment income percentage from 20	018 Schedule A, P	art III, line 17			18	1.02 %
19a 3	13 1/3% support tests - 2019. If the o	rganization did no	t check the box or	line 14, and line 1	5 is more than 33		
	nore than 33 1/3%, check this box and						▶ X
	3 1/3% support tests - 2018. If the o						d
	ne 18 is not more than 33 1/3%, check						
	Private foundation. If the organization						•
	09-25-19					lule A /Form 990 c	- 990-E71 2019

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? // "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")?

 "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.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(S)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? if "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? if "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? if "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
	10	
1		
2		
За		
3b		
3c		
4a		
-701		
4b		
4c	_	_
	-41	
5a		
5b		_
5c		_
6		
7		- 10
8		
9a		
9b		
9c		
10a		
10h		
10b 90 or 990-	FZ) 20	210

_	Language Look Aniester fal suid (b) Deldas
•	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.
b	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.

3 Parent of Supported Organizations. Answer (a) and (b) below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.

b 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.

2b 3a 3b 3b 3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	lov. 20, 1970 (explain in l	Part VI). See Instructions.
_	other Type III non-functionally integrated supporting organizations must co	omplete Sec	tions A through E.	
Sec	tion A - Adjusted Net income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	10		
2	Recoveries of prior-year distributions	2		
3	Other gross Income (see Instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5 6, and 7 from line 4)	8		
3eci	don B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
_8	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
_d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other			
_	factors (explain in detail in Part VI):			- 41
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)	6		
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 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5_	Income tax Imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
_	emergency temporary reduction (see Instructions).	6		

instructions).

	edule A Form 990 or 990-EZ) 2019 MARS HILL BRO	(a)(3) Supporting Orga	INC. 2 anizations (continued)	22-2234076 Pa
Sec	tion D - Distributions		(COLUMNICA)	Current Year
1	Amounts paid to supported organizations to accomplish exc	empt purposes		
2	Amounts paid to perform activity that directly furthers exem- organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	as of automorted organization		
4	Amounts paid to acquire exempt use assets	es or eupported organization	5	
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 to	he omenization is responsive		
_	(provide details in Part VI). See Instructions.	ue ordenitration to technilotte		
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	tion E - Distribution Allocations (see Instructions)	(I) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
	From 2014			
b	From 2015			
C	From 2016			
	From 2017			
	From 2018			
f	Total of lines 3s through e			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
T	Carryover from 2014 not applied (see instructions)			
ĵ	Remainder, Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7:			
a	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
3	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See Instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
	Breakdown of line 7:			
_	Excess from 2015			
b	Excess from 2016			1 2 2 3
C	Excess from 2017			
d	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A	Form 990 or 990-l	EZ) 2019 MARS	HTP.	L BRO	AUCAS	TING	CO,	INC.		22-2234076	Page
Part VI	line 1: Part IV. Se	ction D, lines 2 an	, 40, 40, d 3: Part	IV. Section	, ab, ac, i on E. lines	18, 11D, 1c. 2s. 2	eunoriic Ph. Sasi	; Part IV, & nd 3h: Par	SECTION 15, tV line 1:	17a or 17b; Part III, line 12; lines 1 and 2; Part IV, Sectio Part V, Section B, line 1e; Padditional information.	
	TOCK MISTIGCUOTIS										
						-					

Schedule A

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

2019

** Do Not File **

*** Not Open to Public Inspection ***

Payer's Name	2015 Amount	2016 Amount	2017 Amount	2018 Amount	2019 Amount
KEITH M AUSTIN	23,713.	14,762.	14,263.	10,000.	22,000
tal to Schedule A,					

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

> Complete if the organization enswered "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.

OMB No. 1545-0047 Inspection

MARS HILL BROADCASTING CO. INC.

Employer Identification number 22-2234076

		(a) Donor advis	ed funds	(b)	Funds and other accounts
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 donor advisors in w	riting that the assets h	eld in donor advised	funds	
	are the organization's property, subject to the organization's e				Yes N
₿	Did the organization inform all grantees, donors, and donor ad	visors in writing that g	ant funds can be us	ed only	
	for charitable purposes and not for the benefit of the donor or				
	Impermissible private benefit?				Yes N
а	rt II Conservation Easements. Complete if the orga	unization answered "Ye	s" on Form 990, Pa	urt IV, line	7.
	Purpose(s) of conservation easements held by the organization			•	
	Preservation of land for public use (for example, recreation		_	historica	lly important land area
	Protection of natural habitat	· · · · · · · · · · · · · · · · · · ·			historic structure
	Preservation of open space	_			
	Complete lines 2a through 2d if the organization held a qualifie	d conservation contrib	ution in the form of	a conesi	vetion assument on the lost
	day of the tax year.			L CONTIGOR	Held at the End of the Tax You
	Total number of conservation easements			2	The second secon
3	Total acreage restricted by conservation easements	***************************************	***************************************	2	
	Number of conservation easements on a certified historic struc	ture included in (a)		20	
d	Number of conservation easements included in (c) acquired aff	er 7/25/06 and not on	a historia structura		+
	listed in the National Register				.11
	Number of conservation easements modified, transferred, release	and extensional ari	manda at he dha a	<u> 2</u> 1	
	year	reen' evrillânier ien' ou	ettilitieren nå nie ol	Sau irrand	on during the tax
	Number of states where property subject to conservation ease	mant in leaster the			
	Does the organization have a written policy regarding the perio		Van barrier d		
	violations, and enforcement of the conservation easements it h		_		□ □
					Yes N
	Staff and volunteer hours devoted to monitoring, inspecting, ha	indling of violations, ar	id enforcing conser	vation ea	sements during the year
	Arraunt of everyone incurred in manked as because handles				
	Amount of expenses incurred in monitoring, inspecting, handlin	ig of violations, and en	rording conservation	n easeme	ints during the year
	Does each conservation easement reported on line 2(d) above to	and a first and a second second	4 470534	41.001.00	
	and section 170(h)(4)(B)(ii)?				
	balance sheet, and include, if applicable, the text of the footnot organization's accounting for conservation easements.	e to the organization's	financial statement	s that de	scribes the
	HIII Organizations Maintaining Collections of A	et Historical Tra-	Marines on Other	- 610	ou Accords
ır	t III Organizations Maintaining Collections of A	rt, Historical Tre	asures, or Othe	r Simil	ar Assets.
	t III Organizations Maintaining Collections of A Complete if the organization answered "Yes" on Form St	90, Part IV, ilne 8.			
	Complete if the organization answered "Yes" on Form 98 If the organization elected, as permitted under FASB ASC 958,	90, Part IV, line 8. not to report in its reve	nue statement and	balance	sheet works
	till Organizations Maintaining Collections of A Complete if the organization enswered "Yes" on Form 98 If the organization elected, as permitted under FASB ASC 958, of art, historical treasures, or other similar assets held for public	90, Part IV, line 8. not to report in its reve exhibition, education,	nue statement and or research in furth	balance	sheet works
	Complete if the organization answered "Yes" on Form 98 If the organization elected, as permitted under FASB ASC 958, of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its financial	90, Part IV, line 8. not to report in its reve exhibition, education, al statements that desc	nue statement and or research in furth ribes these items.	balance erance o	sheet works f public
	Complete if the organization answered "Yes" on Form 98 If the organization elected, as permitted under FASB ASC 958, of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its financial if the organization elected, as permitted under FASB ASC 958,	90, Part IV, line 8. not to report in its rever exhibition, education, al statements that descriptions to the statements and the second in its revenue.	nue statement and or research in furth cribes these items. statement and bala	balance erance o	sheet works f public st works of
1	Complete if the organization answered "Yes" on Form 98 of the organization elected, as permitted under FASB ASC 958, of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its financial if the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exact, historical treasures, or other similar assets held for public exact.	90, Part IV, line 8. not to report in its rever exhibition, education, al statements that descriptions to the statements and the second in its revenue.	nue statement and or research in furth cribes these items. statement and bala	balance erance o	sheet works f public st works of
	Complete if the organization answered "Yes" on Form 98 of the organization elected, as permitted under FASB ASC 958, of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its financial if the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exprovide the following amounts relating to these items:	90, Part IV, line 8. not to report in its rever exhibition, education, all statements that described to report in its revenue chibition, education, or	nue statement and or research in furth cribes these items. statement and bala research in furthers	balance erance of unce sheet unce of pa	sheet works f public st works of
	Organizations Maintaining Collections of A Complete if the organization answered "Yes" on Form 98 If the organization elected, as permitted under FASB ASC 958, of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its financial if the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exprovide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1	90, Part IV, line 8. not to report in its rever exhibition, education, all statements that described to report in its revenue chibition, education, or	nue statement and or research in furth cribes these items. statement and bala research in furthers	balance erance of unce shee	sheet works f public st works of ublic service,
	Complete if the organization answered "Yes" on Form 98 If the organization elected, as permitted under FASB ASC 958, of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its financial if the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exprovide 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	90, Part IV, line 8. not to report in its reve exhibition, education, al statements that desc to report in its revenue chibition, education, or	nue statement and or research in furth cribes these items. statement and bala research in furthers	balance erance of unce of po	sheet works f public st works of ublic service, \$
	Complete if the organization answered "Yes" on Form 98 of the organization elected, as permitted under FASB ASC 958, of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its financial if the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exprovide the following amounts relating to these items:	90, Part IV, line 8. not to report in its reve exhibition, education, al statements that desc to report in its revenue chibition, education, or	nue statement and or research in furth cribes these items. statement and bala research in furthers	balance erance of unce of po	sheet works f public st works of ublic service, \$
	Complete if the organization answered "Yes" on Form 98 If the organization elected, as permitted under FASB ASC 958, of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its financial if the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exprovide 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.	20, Part IV, line 8. not to report in its reve exhibition, education, al statements that desc to report in its revenue chibition, education, or	nue statement and or research in furth ribes these items. statement and bala research in furthers sets for financial ga	balance erance of unce of po	sheet works f public st works of ublic service, \$
	Complete if the organization answered "Yes" on Form 98 If the organization elected, as permitted under FASB ASC 958, of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its financial if the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exprovide 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 the following amounts required to be reported under FASB ASC	20, Part IV, line 8. not to report in its reverance exhibition, education, all statements that described to report in its revenue chibition, education, or a contract or other similar as 1958 relating to these in the contract of the contr	nue statement and or research in furth ribes these items. statement and bala research in furthers sets for financial ga tems:	balance erance of purchase of	sheet works f public st works of ublic service, \$
	Complete if the organization answered "Yes" on Form 98 If the organization elected, as permitted under FASB ASC 958, of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its financial if the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exprovide 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.	20, Part IV, line 8. not to report in its reverance exhibition, education, all statements that describe report in its revenue chibition, education, or education, ed	nue statement and or research in furth cribes these items. statement and bala research in furthers sets for financial ga tems:	balance erance of purchase of	sheet works f public st works of ublic service, \$

Sch	edule D (Form 990) 2019 MARS H	ILL BROADCA	STING CO.	INC.			22-22	234076	Page
P	art III Organizations Maintaining	Collections of A	rt, Historical T	reasures, c	or Other	r Simila	r Asset	S (contin	uedi
3	Using the organization's acquisition, access	sion, and other record	ds, check any of th	e following the	at make si	gnificant	use of its		
	collection items (check all that apply):								
- 1				xchange prog	ram				
	Scholarly research		e Other						
4	Provide a description of the organization's of	collections and explai	in how they further	the organizati	ion's exen	npt purpo	se in Pari	XIII.	
5	During the year, did the organization solicit	or receive donations	of art, historical tre	asures, or oth	er simllar	assets			
	to be sold to raise funds rather than to be m	naintained as part of	the organization's o	collection?			-	Yes	No.
P	irt IV Escrow and Custodial Arran	igements. Comp	lete if the organizat	tion answered	"Yes" on	Form 990), Part IV,	line 9, or	
_	reported an amount on Form 990, Pa								
18	is the organization an agent, trustee, custod							_	
	on Form 990, Part X?						L	Yes	No
li:	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:						
								Amount	
C	Beginning balance					1c			
d	Additions during the year	************************				1d			
	Distributions during the year	***************************************	**********************			10			
T	Ending balance		***************************************			_1f		-	-
28	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or (custodial acco	unt liabilit	ly?		Yes	No
Pa	If "Yes," explain the arrangement in Part XIII.	. Check here if the ex	planation has beer	provided on	Part XIII	-			
	rt V Endowment Funds. Complete								Departure .
4-	Designing of two belongs	(a) Current year	(b) Prior year	(c) Two yea	s back (d) Three y	wars back	(e) Four	ears back
1a	***************************************			-	-				
D	Contributions			-	-				
G	Net investment earnings, gains, and losses				-		_		
d				-	_			_	
•				1					
	and programs			+	-				
T	Administrative expenses			-	-		_		
9	End of year balance Provide the estimated percentage of the curr		- All	201					
-	Board dealgnated or quasi-endowment	ent year end balance	iline 1g, column (a)) held as:					
- In	Permanent endowment	%	_76						
		76 %							
•	The percentages on lines 2a, 2b, and 2c shou	**							
30	Are there endowment funds not in the posses		tion that our hald o	= el = elected = t = t =			A.S		
Oll	by:	ssion of the organiza	uon that are neig a	na saministen	ed for the	organiza	tion	<u></u>	
	-								es No
	(ii) Unrelated organizations							3a(l)	-
b	(ii) Related organizations	Hone listed as require	nd on Schadule D7			***************************************		3a(ii)	
4	Describe in Part XIII the Intended uses of the	organization's endov	vment funde		************			_3b	
Par	t VI Land, Buildings, and Equipme	ent.	THORIS TORIGO,						
	Complete if the organization answered	"Yes" on Form 990.	Part IV. Ilne 11a. S	See Form 990.	Part X. ilr	ne 10.			
	Description of property	(a) Cost or ot basis (investm	her (b) Cost	t or other (other)	(e) Acc	umulated eciation	1	(d) Book v	ralue
1a	Land			7,621.	J. P.			57	621.
b	Buildings	"		7,007.	2:	24,21	9.		788.
	Leasehold improvements		- 1	.,		121		202	7001
d	Equipment		1.67	0,113.	1.49	96,16	1.	173	952.
			-101			- V 1 - V		-1-7	7441
	Other								

	(al) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
otal, (Column (b) must equal Forn	n 990, Part X. col. (B) line 15.)	b
Part X Other Liabilities.		

(b) Book value

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

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 MARS HILL BROADCASTING CO, INC. Part XIII Supplemental Information (continued)	22-2234076 Page 5
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
TOWER RENTAL	63,670.
	33,3,0,

SCHEDULE O

(Form 990 or 990-EZ)

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

OMB No. 1545-0047 Inspection

Name of the organization

MARS HILL BROADCASTING CO, INC.

Employer identification number 22-2234076

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 MEMBBERS USE COMPARATIVE DATA, REVIEW OF DUTIES, ETC.
FORM 990, PART VI, SECTION C, LINE 19:
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS
ARE AVAILABLE UPON REQUEST.
FORM 990 PART XII, LINE 2C:
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.