# Form **990**

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047
2007
Open to Rubig

Open to Public Inspection

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

A	For the	e 2007 calen	dar year,	or tax year beginning		, ;	and e	ending			
<u>B</u>	Check	ıf applıcable	Please	C Name of organization			-		D Em	ployer	identification number
	Addres	s change	use IRS	CONTINENTAL SINGERS,	INC				95-25	0950	9
一	Name	change	label or print or	Number and street (or P O box if		treet add	ress)	Room/suite			number
Ħ	Initial r	-	type	DO DOY 6072					(005)	000	450
H			See Specific	PO BOX 6972	St-4			L		289-3	
뭐	Termin		Instruc-	City or town	State or co	ıntry		P + 4	i	1	g method: X Cash Accrua
닏	Amend	ed return	tions	VENTURA	CA		93	3006			specify) <b>&gt;</b>
Ш	Applica	tion pending		on 501(c)(3) organizations and 494 must attach a completed Schedul							section 527 organizations
_	147_ L_=54		เกษรเร	must attach a completed schedul	e A (Politi 550 of 550-E2	-).		. ,	•		for affiliates? Yes X No
G	Websit	e: 💌			<del></del>			1 ' '			er of affiliates
.1	Organi	z <b>ation type</b> (ci	heck only o	ne) ►X 501(c) ( 3 ) <b>(</b> (in:	sert no.) 4947(a)(1)	ر ا	527	H(c) Are:			ded? Yes X No See instructions )
	<u> </u>		<del></del>	_ <u>;</u>			321	,	•		•
		nere 📂		organization is not a 509(a)(3) suppo		•					urn filed by an organization
		return, be sure		han \$25,000  A return is not required, omplete return	but a the organization of	ooses			ered by a		<del></del>
								Grou	ıp Exemp	otion Nu	mber •
	•			OL OF140E/ 1 40 5					ck 🕨		the organization is <b>not</b> required
				8b, 9b, and 10b to line 12	<del> </del>	2,170		L			m 990, 990-EZ, or 990-PF)
Pa	rt I	Revenue	e, Expe	nses, and Changes in N	et Assets or Fur	nd Bal	lanc	es (See	the in:	struct	ions.)
	1	Contribut	ions, giff	ts, grants, and similar amou	nts received					, ,	
	4	Contribut	ions to c	lonor advised funds		1 <u>a</u>		2,17	0,090	1 6	
	1	Direct pul	blic supp	oort (not included on line 1a)		1b			0	1 1/2	
		Indirect p	ublic su	pport (not included on line 1a	∍)	1c			0	3 4	
	(	d Governm	ent cont	ributions (grants) (not includ	ed on line 1a)	1d			0		
	6	Total (ad	d lines 1	a through 1d) (cash \$	0 noncash	\$		0	))	1e	2,170,090
	2	Program	service i	revenue including governme	nt fees and contrac	ts (fror	n Pa	rt VII, line	93	2	0
	3	Members	hip dues	and assessments						3	0
	4			is and temporary cash inves	tments				İ	4	0
	5	Dividends	s and int	erest from securities						5	0
	6 8	Gross rer	nts			6a	_				
		Less ren				6b					
_				or (loss) Subtract line 6b fr	om line 6a					6c	0
Ē	7			income (describe		,			)	7	0
evenue	8 a			m sales of assets other	(A) Securities	<u> </u>		(B) Other		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
α	( I	than inve	ntory D	Ebasis and sales expenses	0				0	Q:04.	
					0				0	\$ ( J.**)	
				Combined to (So of Impo	(A) and (B)	8c			0		0
	9	net gamp	QI, (IIOSS)	Combine/ime&c, columns	(A) allu (D)	11				8d	0
		Special eve	opilo (p	etivities (attach schedule) if any a	niouni is irom <b>gamin</b> ç O of	j, cneck	nere	***		3.7	
	1 '			orted off line 1b)	0 of	9a			0	1, 1, 5	
	1	Less dire	ct expe	ises other than fundraising e	expenses	9b			0	, 4	
				ss) from special events Sub						9c	0
				ventory, less returns and allo		10a		8	9,165	17.	
		Less cos				10b			6,952	. 4	
				from sales of inventory (attach so	hedule) Subtract line		n line			10c	42,213
	11			om Part VII, line 103)	,					11	3,540
	12			dd lines 1e, 2, 3, 4, 5, 6c, 7,	8d, 9c, 10c, and 1	1				12	2,215,843
	13			(from line 44, column (B))						13	1,782,110
Expenses	14			general (from line 44, colun	nn (C))					14	594,037
ĕ	15						15	0			
ᄶ	16		• •	ates (attach schedule)						16	<u>_</u>
	17	•		Add lines 16 and 44, column	n (A)					17	2,376,147
									-	18	-160,304
S. C.	19	• • •					19	-63,398			
Net Assets	20		anges in net assets or fund balances (attach explanation)					į	20	00,000	
Š	21		-	d balances at end of year Co		,	20			21	-223,702
			· · · · · · · · · · · · · · · · · ·			, <u> 2</u>	<u> </u>			!	

SCANNED DEC 1 9 2008

Part I						
	Functional Expenses organizations and section 4947(a)	)(1) none	xempt chantable to	rusts but optional fo	or others. (See the i	nstructions.)
	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 a	Grants paid from donor advised funds (attach schedule)					
	(cash \$ 0 noncash \$ 0)	1 1				
		220	o	^		
22 F	If this amount includes foreign grants, check here	22a		U		
22 D	Other grants and allocations (attach schedule)					
	(cash \$ 0 noncash \$ 0)		_	_		
	If this amount includes foreign grants, check here ▶	22b	0	0		
23	Specific assistance to individuals (attach			_		
	schedule)	23	0	0		
24	Benefits paid to or for members (attach	_,				
	schedule)	24	0	<u>U</u>		<del> </del>
25 a	Compensation of current officers, directors,	05-	400 004	75.004	05 000	0
	key employees, etc. listed in Part V-A .	25a	100,001	75,001	25,000	0
D	Compensation of former officers, directors,	254	0	_		0
_	key employees, etc. listed in Part V-B	25b	0	0	0	
C	Compensation and other distributions, not	1 1				
	included above, to disqualified persons (as	1 1				
	defined under section 4958(f)(1)) and persons	25-	0	_	o	0
28	described in section 4958(c)(3)(B)	25c		0		
26	Salaries and wages of employees not included	26	699,352	504 544	174 020	
27	on lines 25a, b, and c	20	099,352	524,514	174,838	
27	Pension plan contributions not included on	27	0			
28	lines 25a, b, and c					<del></del>
20	Employee benefits not included on lines 25a – 27	28	0			
29	Payroll taxes	29	59,311	44,483	14,828	
30	Professional fundraising fees	30	<u> </u>		14,020	
31	Accounting fees	31	0			
32		32	0			
33	Supplies	33	21,193		5,298	
34	Telephone	34	39,933			
35	Postage and shipping	35	29,726			
36	Occupancy	36	62,912			
37	Equipment rental and maintenance	37	25,212	·		
38	Printing and publications	38	26,732			
39	Travel	39	501,484			
40	Conferences, conventions, and meetings	40	0	5. 91.13	,,	
41	Interest	41	60,422	45,317	15,106	
42	Depreciation, depletion, etc. (attach schedule)	42	45,520	<del></del>		
43	Other expenses not covered above (itemize):		· —	, , , , , ,		
а	·	43a	704,346	528,260	176,087	o
b		43b	0	0	0	0
С		43c	0	0	0	0
d		43d	0	0	0	0
е		43e	0	0	0	0
f		43f	0	0	0	0
g		43g	0	0	0	0
44	Total functional expenses. Add lines 22a		<del></del>			
	through 43g (Organizations completing				1	
	columns (B)-(D), carry these totals to lines					
	13–15)	44	2,376,144	1,782,110	594,037	0
Joint	Costs. Check ▶ if you are following SOP 98-2					
	joint costs from a combined educational campaign and fundraising solici	tation rea	oorted in (B) Progr	am services?	▶□	Yes No
	" enter (i) the aggregate amount of these joint costs \$	-		llocated to Progran		
	amount allocated to Management and general \$	<u>_</u>		allocated to Fundr		·

### Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

All o of cl orga		ements in a clear and concise manner. State the number ents that are not measurable (Section 501(c)(3) and (4) ust also enter the amount of grants and allocations to others.)		Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
	ADULTS TEACHING AND LEARNING TO ESTA	ND INTERNATIONALLY INCLUDING YOUNG TEEN ABLISH BIBLICAL BASED FOUNDATIONS FOR LIF		
-	(Grants and allocations \$	0) If this amount includes foreign grants, check here	▶ □	2,379,605
b.				
•				
•	(Grants and allocations \$	0 ) If this amount includes foreign grants, check here	▶ _	О
c .				
•	(Grants and allocations \$	η ) If this amount includes foreign grants, check here		l o
d .				
	(Grants and allocations \$			٥
	Other program services (attach schedule)	U / II III alliant lineaco loragi. grante, ellest liere		<u> </u>
	(Grants and allocations \$	0 ) If this amount includes foreign grants, check here	▶ _	
f	Total of Program Service Expenses (should e	equal line 44, column (B), Program services)	<b>•</b>	2,379,605

Form **990** (2007)

Гаі	LIV	Balance Sheets (See the instructions.)					
	Note:	Where required, attached schedules and amounts within column should be for end-of-year amounts only.	the desc	ription	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing			20,465	45	16,902
	46	Savings and temporary cash investments		F		46	
	47 a	Accounts receivable	ounts receivable				
	ь	Less: allowance for doubtful accounts .	47b	0	426,815	47c	148,808
	48 a	Pledges receivable	48a	0			
		Less allowance for doubtful accounts	48b	0	0	48c	0
	49	Grants receivable				49	
	50 a	Receivables from current and former officers, di	rectors,	trustees, and			
		key employees (attach schedule)			0	50a	0
	b	Receivables from other disqualified persons (as defined u					
Assets		4958(f)(1)) and persons described in section 4958(c)(3)(	B) (attach	schedule)		50b	
1SS	51 a	Other notes and loans receivable (attach	1 (	_			
		schedule)	51a	0	_	[	_
	_	Less, allowance for doubtful accounts	51b	0		51c	0
	52	Inventories for sale or use	•	· · · ·	60,746		65,527
	53	Prepaid expenses and deferred charges	г		30,750		16,500
		Investments—publicly-traded securities.	_	CostFMV _	0	<del></del>	0
		investments—other securities (attach schedule).	▶	CostFMV _	0	54b	0
	55 a	Investments—land, buildings, and	1 1	_			
		equipment basis	55a	0		] ]	
	b	Less: accumulated depreciation (attach			•	- <u>-</u>	•
		schedule)	55b	0		55c	0
	56	Investments—other (attach schedule)	===	640 700	0	36	
		Land, buildings, and equipment basis  Less accumulated depreciation (attach	57a	648,798		] ]	
	ן ו	schedule)	57b	-524,322	133,427	570	124,476
	58	Other assets, including program-related investm		-524,522	133,421	370	124,470
	"	(describe	iciita	)	27,340	58	21,965
	59	Total assets (must equal line 74) Add lines 45	through	58	699,543		394,178
	60	Accounts payable and accrued expenses			445,931	60	453,761
	61	Grants payable				61	
	62	Deferred revenue				62	
littes	63	Loans from officers, directors, trustees, and key	employ	ees (attach	-		
		schedule)			98,740		57,045
Lab		Tax-exempt bond liabilities (attach schedule) .			0		0
_	l .	Mortgages and other notes payable (attach sche			218,270		152,640
	65	Other liabilities (describe		)	0	65	0
	66	Total liabilities. Add lines 60 through 65 .			762,941	66	663,446
_		anizations that follow SFAS 117, check here▶		<del></del>			
w	) Oigi	67 through 69 and lines 73 and 74	a			j ]	
ğ	67	Unrestricted			-78,398	67	-42,105
Пaп	68	Temporarily restricted		` . <b> </b>	15,000		
8	69	Permanently restricted		[	<u> </u>	69	<u> </u>
2	Orga	anizations that do not follow SFAS 117, check	here	<b>▶</b> and	<u> </u>		
Net Assets or Fund Balances		complete lines 70 through 74		_			
ō	70	Capital stock, trust principal, or current funds				70	
ets	71	Paid-in or capital surplus, or land, building, and			71		
<b>SS</b>	72	Retained earnings, endowment, accumulated in	<u> </u>		72		
) t /	73	Total net assets or fund balances. Add lines 6					
ž		70 through 72 (Column (A) must equal line 19	and colu	ımn (B) <b>must</b>		<u></u> -	
		equal line 21)	-63,398		-42,105		
	74	Total liabilities and net assets/fund balances	. Add lir	ies od and /3.	699.543	/4/	621.341

Part I	V-A	Reconciliation of Reinstructions.)	venue per A	Audited Financial St		ith F	Revenue per Ret	um (	See the
a	Total	revenue, gains, and other	er support per	audited financial statem	nents .			а	
b	Amo	unts included on line a bu	it not on Part l	l, line 12 <sup>.</sup>			•		
1	Net u	inrealized gains on invest	ments .			b1		1	
2		ated services and use of f				b2			
3		veries of prior year grant	s			<b>b3</b>			
4	Othe	r (specify).							
				• • • • • • • • • • • • • • • • • • • •		<u>b4</u>	0	<u>.</u>	_
		lines b1 through b4			- •	•		b	<u> </u>
C		ract line b from line a	40 6.4 4		•			C	
d		unts included on Part I, li			ı	d1	1		
1 2		stment expenses not inclu r (specify)			•	<u>u i</u>		1	
-	Othe					d2	1 0	, i	
	Δdd	lines d1 and d2					<u> </u>	d	C
е		I revenue (Part I, line 12				٠.		e	
	V-B	Reconciliation of Ex	penses per	Audited Financial S	tatements V	Vith	Expenses per R	Retur	n
а		expenses and losses pe						а	
b	Amo	unts included on line a bi	ut not on Part	I, line 17					
1	Dona	ated services and use of t	acılities .		-	<b>b1</b>			
2	Prior	year adjustments reporte	ed on Part I, li	ne 20		b2			
3		es reported on Part I, line				b3			
4	Othe	er (specify):							
						b4	<u> </u>	Ů	
		lines b1 through b4			•			<u> </u>	(
C		ract line b from line a	· :_ · . · .			•		C	(
d		unts included on Part I, li			1	مدا	1		
1		stment expenses not inclu				d1	<del> </del>	4	
2	Othe	er (specify):				d2		J	
				•••••		uz		ď	,
•		lines <b>d1</b> and <b>d2</b> i <b>l expenses</b> (Part I, line 1						e	
Part		Current Officers, Di							er director
rait	V - /~	trustee, or key employe							
		tructed, or key employe	o de diriy dirilo	(B)	(C) Compensation		(D) Contributions to emp		
		(A) Name and address		Title and average hours per	(If not paid,		benefit plans & deferr	ed	(E) Expense account and other allowances
				week devoted to position	enter -0)	+	compensation plans	3	
		TEMENT Str		Title	400.0			_	,
Cit	•		IP	Hr/WK	100,0	ווט		0	
	N/A	Str		Title					
Crt		•	IP	Hr/WK	<del></del>	+			
	N/A	Str		Title		1			
Cit			IP	Hr/WK		+			<u> </u>
	e N/A	Str		Title					
Cit			IP	Hr/WK		+	<del></del>		
	e N/A	Str		Title					1
Crt	•		IP	Hr/WK		+			
	e N/A	Str		Title		- 1			
Cit	_	***************************************	<u> </u>	Hr/WK		+			-
	e N/A	Str		Title					
Cit			<u>IP</u>	Hr/WK		+			
	e N/A	Str		Title					
Cit			ZIP	Hr/WK		+			
	e N/A	Str		Trtle					
Cit			IP	Hr/WK	<del></del>	+	<del></del>		
Nam	e N/A	Str		Title					
C-4	.,	et :	7ID	I MEGRIN		•			i e

Form 99	00 (2007) CONTINENTAL SINGERS, INC			95-2509509			Page U
Part \						Yes	No
75 a	Enter the total number of officers, directors, an	d trustees permitted to	o vote on organiza	tion business at board			1
	meetings						ĺ
b	Are any officers, directors, trustees, or key em	ployees listed in Form	990, Part V-A, or	highest compensated			
-	employees listed in Schedule A, Part I, or high	est compensated profe	essional and other	independent	] /		
	contractors listed in Schedule A, Part II-A or II-	-B, related to each oth	er through family o	or business			
	relationships? If "Yes," attach a statement that	identifies the individu	als and explains th	e relationship(s)	75b		X
С	Do any officers, directors, trustees, or key emp						
•	compensated employees listed in Schedule A,						l
	independent contractors listed in Schedule A, I						ł
	organizations, whether tax exempt or taxable,	that are related to the	organization? See	the instructions for			l
	the definition of "related organization"				75c	$\mathbf{x}$	
	If "Yes," attach a statement that includes the in	nformation described i	n the instructions	·			
d	Does the organization have a written conflict o				75d	X	
Part		and Key Employees	That Received Co	ompensation or Other Ber	refits (	If any	former
	officer, director, trustee, or key employe						
	person below and enter the amount of c						
	person below and enter the amount of e	i i i i i i i i i i i i i i i i i i i		<u></u>			
	(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid,	(D) Contributions to employee benefit plans & deferred		Expens int and o	
	(A) Name and address	(D) Louiso disa / taranoso	enter -0-)	compensation plans		owances	
Name	N/A Str						
City	ST ZIP						
Name	N/A Str						
City	· · · · · · · · · · · · · · · · · ·						
Name	N/A Str						
City							
Name	N/A Str			1 1			
Crty							
Name	N/A Str	ļ					
Crty							
Name	N/A Str						
City							
	N/A Str						
Crty							
	N/A Str	1					
Crty							
	N/A Str	-					
City	ALZA			<del>                                     </del>			
City		i		İ			
Part		tions )	l			Yes	No
76	Did the organization make a change in its activ		anducting activities	2 If "Ves " attach a	T	1.00	110
,,	detailed statement of each change .	vides of frictions of ec	onducting activities	i i i i i i i i i i i i i i i i i i i	76		X
77	Were any changes made in the organizing or	 novernina documente	but not reported to	the IPS2	77		X
• •	If "Yes," attach a conformed copy of the change	· ·	sat not reported to	ale into: , , .	"	$\vdash$	<del>  ^</del>
70 0	Did the organization have unrelated business		O or more during t	he year covered by	1		
10 A	_	gross income of \$1,00	o or more during t	no year covered by	79.0		- Y
	this return?				78a	<del> </del>	X
	If "Yes," has it filed a tax return on Form 990-				78b	<del> </del>	├^
79	Was there a liquidation, dissolution, termination	on, or substantial conti	raction during the y	year / it "Yes," aπacn		-	
	a statement				79	₩	X
80 a	Is the organization related (other than by asso			<del>-</del>	1		
	common membership, governing bodies, trust	ees, officers, etc , to a	iny other exempt o	r nonexempt			
	organization?				80a	X	<u> </u>
b	if "Yes," enter the name of the organization ▶	CHRISTIAN ARTIST	RECORDS, INC				
		and check whethe	rıtıs 🔲 exempt	or X nonexempt			
81 a	Enter direct and indirect political expenditures.	(See line 81 instruction	ons) .	81a			
	Did the organization file Form 1120-POL for the	•			81Ь	Ī-	Х
		<del>*</del>					

orm 99	0 (2007) CONTINENTAL SINGERS, INC 95-2	2509509			Page
art				Yes	No
32 a	Did the organization receive donated services or the use of materials, equipme	ent, or facilities at no charg	e i		ļ
	or at substantially less than fair rental value?		. 82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this am	nount	1		
	as revenue in Part I or as an expense in Part II	1 1		· ·	1
	(See instructions in Part III )	82b N/A		- ,	ĺ –
	Did the organization comply with the public inspection requirements for returns			X	<b>├</b> ─
	Did the organization comply with the disclosure requirements relating to quid p		83b	X	<del> </del>
	Did the organization solicit any contributions or gifts that were not tax deductib		84a	<del>  ^-</del> -	├
0	If "Yes," did the organization include with every solicitation an express stateme or gifts were not tax deductible?	ant that such contributions	84b		X
<b>35</b>	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	• •	. 85a		$\frac{\hat{x}}{x}$
	Did the organization make only in-house lobbying expenditures of \$2,000 or less	ss?	. 85b		X
_	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h				
	organization received a waiver for proxy tax owed for the prior year				
C	Dues, assessments, and similar amounts from members	85c			
	Section 162(e) lobbying and political expenditures	85d			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e			]
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) .	85f	<u> </u>		
	Does the organization elect to pay the section 6033(e) tax on the amount on lir		85g		X
n	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to its reasonable estimate of dues allocable to nondeductible lobbying and political		of to		
	following tax year?	al expenditures for the	. 85h		-x
B6	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	.   86a	.   0011	<del></del>	<del>  ^</del>
	Gross receipts, included on line 12, for public use of club facilities	86b			1
B7 ~	501(c)(12) orgs Enter. a Gross income from members or shareholders	87a			
b	Gross income from other sources (Do not net amounts due or paid to other			ļ	1
	sources against amounts due or received from them.)	87b			
88 a	At any time during the year, did the organization own a 50% or greater interest		r		
	partnership, or an entity disregarded as separate from the organization under F	Regulations sections			ļ.,
	301 7701-2 and 301.7701-3? If "Yes," complete Part IX		.   88a	<del> </del>	X
D	At any time during the year, did the organization, directly or indirectly, own a companion of particle F12(b)/12(2) If IVoc II complete Part XI.	ontrolled entity within the	<b>&gt;</b> 88b		x
RQ 2	meaning of section 512(b)(13)? If "Yes," complete Part XI  501(c)(3) organizations Enter: Amount of tax imposed on the organization dur	ring the year under:	660	<del> </del> -	┼^
00 a	, , , , , , , , , , , , , , , , , , , ,	ction 4955			
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958		;		
	during the year or did it become aware of an excess benefit transaction from a			l	
	a statement explaining each transaction		. 89b		X
C	Enter: Amount of tax imposed on the organization managers or disqualified				T
	persons during the year under sections 4912, 4955, and 4958	<b></b>			
	Enter Amount of tax on line 89c, above, reimbursed by the organization	<u> </u>			İ
е	All organizations At any time during the tax year, was the organization a party	to a prohibited tax shelter			
£	transaction?		89e 89f	├──	X
	For supporting organizations and sponsoring organizations maintaining donor a		. 691	├──	┼^
-	supporting organization, or a fund maintained by a sponsoring organization, ha		nas		1
	at any time during the year?		. 89g		X
90 a	List the states with which a copy of this return is filed ► CALIFORNIA				
þ	Number of employees employed in the pay period that includes March 12, 200	7 (See			
	instructions )		90Ь		
91 a	The books are in care of ► Name DEAN BUTLER	Telephone no.	3	9-3450	<u> </u>
_		ST CA ZIP + 4 ▶ 930		<b>-</b> -	
b	At any time during the calendar year, did the organization have an interest in o	•	-	Yes	No
	over a financial account in a foreign country (such as a bank account, securities	es account, or other financ	ıaı . <b>91b</b>	<del> </del>	X
	account)?		910	<del>                                     </del>	+^
	See the instructions for exceptions and filing requirements for Form TD F 90-2	22.1. Report of Foreign Bar	 nk	1	1
	and Financial Accounts			1	

Form 990 (2007)	NTINENTAL SINGE	RS INC				95-2509509		Page 8
Part VI Other Information (		110, 1110					Yes	No
c At any time during the calen If "Yes," enter the name of the	dar year, did the org				f the Unite	ed States?	91c	
92 Section 4947(a)(1) nonexen and enter the amount of tax		iling Form 990 ın	lieu of Fo	orm 1041 —			-	<b>▶</b> □
Part VII Analysis of Income	e-Producing Activ	ities (See the	instructio	ons.)				
Note: Enter gross amounts unless		Unrelated busine			ded by section	n 512, 513, or 514	(E	
ındicated		(A)	(B)		(C)	(D)		ed or function
93 Program service revenue		Business code	Amour	l l	sion code	Amount	inco	
- · · · · · · · · · · · · · · · · · · ·		- <u></u>						
a b								
c			_					
d								
е								
f Medicare/Medicaid payments .								
g Fees and contracts from governn	nent agencies						<b></b> _	
94 Membership dues and assessme							<del>                                     </del>	
95 Interest on savings and temporary								
96 Dividends and interest from secu	ıntıes						<del> </del>	
97 Net rental income or (loss) from I	real estate					<u> </u>		
a debt-financed property .	· · <u> </u>							
b not debt-financed property	· · · · ·		<u> </u>				<u> </u>	
98 Net rental income or (loss) from p	ersonal property							
99 Other investment income .			<u> </u>					<del></del>
100 Gain or (loss) from sales of assets		<del>-</del>		<del></del>			+	
101 Net income or (loss) from specia							<del> </del>	43,113
102 Gross profit or (loss) from sales	of inventory .					3,54	0	43,113
103 Other revenue a MISC							-	
b								
c d	1							
d e	<del></del>					-		<del></del>
104 Subtotal (add columns (B), (D), a	and (F))	<u> </u>		0		3,54	0	43,113
105 Total (add line 104, columns (B)						. ▶		46,653
Note: Line 105 plus line 1e, Part I,		ount on line 12,						· · · · · · · · · · · · · · · · · · ·
Part VIII Relationship of Ad				not Purpo	ses (See	the instruction	ons.)	
Line No. Explain how each activity of the organization's exen	for which income is repo	orted in column (E)	of Part VII of	contributed im			•	
106 CD'S AND T-SHIRT ARE					EL IN MUS	SIC		
		-						
		-				. <u>.</u>		
Part IX Information Regar	rding Taxable Sub	sidiaries and	Disrega	rded Entit	ies (See	the instruction	ons.)	
(A)		(B)		(C)	İ	(D)	ı	E)
Name, address, and EIN of corporation, partnership, or disregarded entity		Percentage ownership inte		Nature of ac	tivities	Total income		of-year sets
		ļ	<u>%</u> _				0	0
	<del></del>	<del> </del>	%				0	0
			%				0	0
			%   -	al De com	0	4= /O== #= *	0	0
Part X Information Regar								
(a) Did the organization, during the year,	receive any funds, direct	tty or indirectly, to p	ay premium:	s on a persona	al benefit co	ntract?	Yes	:No
(b) Did the organization, during the Note: If "Yes" to (b), file Form 887			directly, or	n a persona	l benefit co	ontract?	Yes	. No
							Form 9	90 (2007)

Part >		Transfers To and From on as defined in section 5:	Controlled Entities. Comple 12(b)(13)	te only if the	organiz	zation		
106	Did the reporting organization ma the Code? If "Yes," complete the	ke any transfers to a control	led entity as defined in section 5	12(b)(13) of	Yes	No X		
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer		(D) unt of transfer			
а								
b								
С								
	Totals					0		
107	Did the reporting organization rec	nive ony transfers from a se	entrolled entity as defined in see	hon	Yes	No		
	512(b)(13) of the Code? If "Yes,"					Х		
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of trai		fer		
a								
b								
С								
_	Totals					0		
108	Did the organization have a bindir	ng written contract in effect o	n August 17, 2006, covering the	Interest.	Yes	No		
	rents, royalties, and annuities des	-	_ · · · · · · · · · · · · · · · · · · ·		<u> </u>	Х		
Please Sign Here	and belief, it is true, correct, and complete	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has a danette. Here						
	Type or proof name and title  Preparer's							
Paid Prepare Use Ont	signature Firm's name (or yours If self-employed).	H FINANCE & CLERG						

## **SCHEDULE A**

(Form 990 or 990-EZ)

# Organization Exempt Under Section 501(c)(3) (Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),

or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

OMB No 1545-0047

CONTINENTAL SINGERS, INC			95-2509509	
Part I Compensation of the Five Hi	ghest Paid Employees	Other Than Off	icers, Directors,	and Trustees
(See page 1 of the instructions.	List each one. If there	are none, enter "l	None.")	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE	-			
	-			
Total number of other employees paid over \$50,000	<u> </u>			
Part II-A Compensation of the Five Hi (See page 2 of the instructions)				
(a) Name and address of each independent contracto		1	of service	(c) Compensation
NONE ,				
Total number of others receiving over \$50,000 for professional services	0	l—		
Part II-B Compensation of the Five Hi (List each contractor who perfo firms. If there are none, enter "	rmed services other tha	n professional se		
(a) Name and address of each independent contracto	r paid more than \$50,000	(b) Type	of service	(c) Compensation
NONE .				
				•
Total number of other contractors receiving over				

Enter the total number of donor advised funds owned at the end of the tax year

amounts in such funds or accounts.

Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year.

Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of

Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year . . .

Pan	IV	Reason for Non-Private	roundation 5	tatus (See pages 4 till	ough 8 of the	e instructions.)		
certif	y tha	t the organization is not a private four	ndation because it	is (Please check only ONE a	pplicable box.)			
6		A church, convention of churches,	or association of cl	nurches Section 170(b)(1)(A)	)(I)			
6		A school. Section 170(b)(1)(A)(II). (	Also complete Par	tV)				
7		A hospital or a cooperative hospital	service organizatio	on Section 170(b)(1)(A)(iii)				
8		A federal, state, or local governmen	t or governmental (	unit Section 170(b)(1)(A)(v)				
9		A medical research organization of and state	perated in conjunc			Enter the hospita Country	l's name, city,	
10		An organization operated for the be (Also complete the Support Scheo	-	university owned or operated	l by a governmen	ital unit. Section 17	O(b)(1)(A)(iv).	
11 a		An organization that normally receive 170(b)(1)(A)(vi) (Also complete the	•		nmental unit or fr	om the general pub	olic Section	
11 b		A community trust. Section 170(b)(	1)(A)(vi). (Also cor	nplete the Support Schedule	e in Part IV-A)			
12 13	$\square$	An organization that normally receive receipts from activities related to its of its support from gross investment acquired by the organization after J. An organization that is not controlled.	charitable, etc., fu it income and unre- une 30, 1975. See	nctions—subject to certain example income at the section 509(a)(2). (Also com-	cceptions, and (2) e (less section 51 plete the Suppor	) no more than 33 1 tax) from busine It Schedule in Par	3 1/3% sses t IV-A )	
		requirements of section 509(a)(3)		•	ting organization.		, uie	
		Provide the following info	ormation about	the supported organiz	ations (See n	age 8 of the ins	tructions \	·····
Namo	e(s)	(a) of supported organization(s)	(b)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	ls the su	d) upported on listed in upporting tation's	(e) Amount of support	
					Yes	No		
						<u> </u>	· · · · · · · · · · · · · · · · · · ·	0
								0
		<u> </u>						0
		·				<del>  </del>		0
						<del>                                     </del>		0
Total	 I	<u> </u>						0
· Ota	<u></u>	· · · · · · · · · · · · · · · · · · ·	· · ·	· · · · · · · · · · · · · · · · · · ·	<del></del>		<del> </del>	
14		An organization organized and oper	rated to test for pub	olic safety Section 509(a)(4)	(See page 8 of th	ne instructions )		

Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting (b) 2005 (c) 2004 (d) 2003 (a) 2006 (e) Total Calendar year (or fiscal year beginning in) Gifts, grants, and contributions received (Do 2,712,664 10,670,968 2,915,775 2,872,529 2,170,000 not include unusual grants See line 28) 16 Membership fees received 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose 89,165 131,034 149,946 196,418 566,563 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the 0 organization after June 30, 1975 . . . . Net income from unrelated business 0 activities not included in line 18 20 Tax revenues levied for the organization's benefit and either paid to it or expended on 0 its behalf 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the 0 public without charge 22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets 3,540 6.784 5.816 4.263 20,403 2,262,705 2.850.482 3,071,537 3.073.210 11,257,934 23 Total of lines 15 through 22 2.719.448 2,921,591 2,876,792 10,691,371 2,173,540 24 Line 23 minus line 17 . 28,505 30,715 30,732 25 Enter 1% of line 23 22,627 0 26a 26 Organizations described on lines 10 or 11: Enter 2% of amount in column (e), line 24 . b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts 26b 0 c Total support for section 509(a)(1) test Enter line 24, column (e) . . . 26c \_ 19 d Add: Amounts from column (e) for lines 18 0 26d 0 26e e Public support (line 26c minus line 26d total) . Public support percentage (line 26e (numerator) divided by line 26c (denominator)) . 0.00% 26f Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year (2005) (2004) (2003) b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals ) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year. (2005) (2004) 10,670,968 16 c Add Amounts from column (e) for lines 11,237,531 and line 27b total 27d d Add: Line 27a total 11,237,531 27e Public support (line 27c total minus line 27d total) . . . . . . 11,257,934 99.82% Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27g h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 0 00% 27h Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of

the nature of the grant Do not file this list with your return. Do not include these grants in line 15

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

cher governing instrument, or in a resolution of its governing body?  Does the organization include a statement of its racially nondiscriminatory policy toward students in all its trochurus. catalogues, and other written communications with the public dealing with student admissions, governments, and scholaringhes?  Has the organization publicated its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registeration period if has no solicitation program, in a way that makes the policy fromen to all parts of the general community it servers?  If "Yes," please describe, if "No," please explain, (if you need more space, attach a separate statement.)  22 Does the organization maintain the following Records indicating the recoil composition of the student body, faculty, and administrative staff?  32a Records documenting that scholariships and other financial assistance are awarded on a racially nondiscriminatory basis?  Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholariships?  32b Copies of all antiferant used by the organization or on its behalf to solicit contributions?  32c If you answered "No" to any of the above, please explain (if you need more space, attach a separate statement.)  33 Does the organization discriminate by race in any way with respect to:  33a Students' rights or privileges?  33b Admissions policies?  33c Employment of faculty or administrative staff?  33d Scholarships or other financial assistance?  33d White programs?  4 Dees the organization fraccial assistance?  33d Admissions policies?  33d Admissions policies?  33d Admissions policies?  33d Admissions policies?  33d Admissions policies?  33d Admissions policies?  33d Admissions policies?  33d Admissions policies?  33d Admissions policies?  33d Admissions policies?  33d Admissions policies?  33d Admissions policies?  33d Admissions policies?  33d Admissions	29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?  131 Has the organization publicized its racially nondiscriminatory policy through nevispaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community its server.  14 "Yes," please describe, if "Nor," please explain. (If you need more space, attach a separate statement.)  15 Records indicating the racial composition of the student body, faculty, and administrative staff?  16 Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?  17 Describes of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?  17 Describes of all material used by the organization or on its behalf to solicit contributions?  18 Jou answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)  19 Describe organization discriminate by race in any way with respect to:  18 Students' rights or privileges?  29 Admissions policies?  29 Employment of faculty or administrative staff?  29 Scholarships or other financial assistance?  29 Althetic programs?  29 Althetic programs?  29 Althetic programs?  29 Althetic programs?  29 Obes the organization receive any financial aid or assistance from a governmental agency?  29 Althetic programs?  29 Bess the organization receive any financial aid or assistance from a governmental agency?  29 Has the organization centry that it has compiled with the applicable requirements of sections 4.01 through 4.05			29		
the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?  If "Yes," please describe, if "No," please explain, (If you need more space, attach a separate statement.)  22	30	brochures, catalogues, and other written communications with the public dealing with student admissions,	30		، لــــ ـ
22 Does the organization maintain the following: 23 a Records indicating the racial composition of the student body, faculty, and administrative staff? 23 a Records indicating the racial composition of the student body, faculty, and administrative staff? 24 b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 25 c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 26 c Copies of all material used by the organization or on its behalf to solicit contributions? 27 d Copies of all material used by the organization or on its behalf to solicit contributions? 28 d Flyou answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) 29 d Students' rights or privileges? 30 d Scholarships or other financial assistance? 31 d Scholarships or other financial assistance? 32 d Scholarships or other financial assistance? 33 d Scholarships or other financial assistance? 34 d Scholarships or other financial assistance? 35 d Scholarships or other financial assistance? 36 d Scholarships or other financial assistance? 37 d Use of facilities? 38 d Scholarships or other financial assistance? 39 d Athleto programs? 30 d Scholarships or other financial assistance? 31 d Scholarships or other financial assistance? 32 d Scholarships or other financial assistance? 33 d Scholarships or other financial assistance? 33 d Scholarships or other financial assistance? 34 d Scholarships or other financial assistance? 35 d Scholarships or other financial assistance? 36 d Scholarships or other financial assistance? 37 d Scholarships or other financial assistance? 38 d Scholarships or other financial assistance? 39 d Scholarships or other financial assistance? 30 d Scholarships or other financial assistance? 31 d Scholarships or other financial assistance? 32 d Scholarships or other financial assistance? 33 d Scholarships or other fin	31	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that	31	1	
Does the organization maintain the following:  Records indicating the racial composition of the student body, faculty, and administrative staff?  Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?  Copies of all catalogues, brachures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?  Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)  Does the organization discriminate by race in any way with respect to:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?  Educational policies?  336  Athletic programs?  Athletic programs?  If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)  "To be the organization receive any financial and or assistance from a governmental agency?  34a  Does the organization receive any financial and or assistance from a governmental agency?  34b  Has the organization receive any financial and or assistance from a governmental agency?  34a  Does the organization's right to such aid ever been revoked or suspended?  If you answered "Yes" to either 34a or b, please explain using an attached statement.		If "Yes," please describe, if "No," please explain. (If you need more space, attach a separate statement.)			
Does the organization maintain the following a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?  Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32c d Copies of all material used by the organization or on its behalf to solicit contributions? 32d If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)  33 Does the organization discriminate by race in any way with respect to: a Students' rights or privileges? 33b Admissions policies?  c Employment of faculty or administrative staff? 33c d Scholarships or other financial assistance? 4 Educational policies? 5 Use of facilities? 5 Joes facilities? 5 Joes facilities? 5 Joes the organization receive any financial and or assistance from a governmental agency? 34a Does the organization's right to such aid ever been revoked or suspended? 1 If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)  34 Does the organization's right to such aid ever been revoked or suspended? 1 If you answered "Yes" to either 34a or b, please explain using an attached statement.					'
Does the organization maintain the following:  Records indicating the racial composition of the student body, faculty, and administrative staff?  Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?  C Opies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?  32b  C Opies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)  Does the organization discriminate by race in any way with respect to:  a Students' rights or privileges?  33a  Admissions policies?  53b  C Employment of faculty or administrative staff?  33c  Employment of faculty or administrative staff?  33c  Educational policies?  33d  Athletic programs?  Athletic programs?  33d  Nother extracumcular activities?  33d  Athletic programs?  34a  Does the organization receive any financial aid or assistance from a governmental agency?  34a  Does the organization receive any financial and or assistance from a governmental agency?  34b  Has the organization receive any financial and or assistance from a governmental agency?  34b  Has the organization receive any financial and or assistance from a governmental agency?  34b  If you answered "Yes" to either 34a or b, please explain using an attached statement.					
a Records indicating the racial composition of the student body, faculty, and administrative staff?  b Records documenting that scholariships and other financial assistance are awarded on a racialty nondiscriminatory basis?  c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholariships?  d Copies of all material used by the organization or on its behalf to solicit contributions?  32d  1f you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)  33 Does the organization discriminate by race in any way with respect to:  a Students' rights or privileges?  33a  b Admissions policies?  c Employment of faculty or administrative staff?  d Scholariships or other financial assistance?  e Educational policies?  f Use of facilities?  g Athletic programs?  h Other extracumcular activities?  if you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)  14 a Does the organization receive any financial and or assistance from a governmental agency?  34 a Does the organization is night to such aid ever been revoked or suspended?  If you answered "Yes" to either 34a or b, please explain using an attached statement.					
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?  c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?  d Copies of all material used by the organization or on its behalf to solicit contributions?  32d  if you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)  33 Does the organization discriminate by race in any way with respect to:  a Students' rights or privileges?  53a  b Admissions policies?  c Employment of faculty or administrative statif?  d Scholarships or other financial assistance?  e Educational policies?  f Use of facilities?  33f  Althetic programs?  h Other extracumcular activities?  If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)  34 a Does the organization receive any financial aid or assistance from a governmental agency?  34b  H has the organization's right to such aid ever been revoked or suspended?  If you answered "Yes" to either 34a or b, please explain using an attached statement.	32	· · · · · · · · · · · · · · · · · · ·			
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e Educational policies?  f Use of facilities?  g Athletic programs?  h Other extracurricular activities?  If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)  33 a Does the organization receive any financial aid or assistance from a governmental agency?  34 a Does the organization's right to such aid ever been revoked or suspended?  If you answered "Yes" to either 34a or b, please explain using an attached statement.	c	Employment of faculty or administrative staff?	33c		
f Use of facilities?	d	Scholarships or other financial assistance?	33d		
g Athletic programs?  h Other extracurricular activities?  33h  If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)  34 a Does the organization receive any financial aid or assistance from a governmental agency?  34 b Has the organization's right to such aid ever been revoked or suspended?  If you answered "Yes" to either 34a or b, please explain using an attached statement.	e	Educational policies?	33e		
h Other extracurricular activities?  If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)  34 a Does the organization receive any financial aid or assistance from a governmental agency?  34 b Has the organization's right to such aid ever been revoked or suspended?  If you answered "Yes" to either 34a or b, please explain using an attached statement.	f				
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)  34 a Does the organization receive any financial aid or assistance from a governmental agency?  45 b Has the organization's right to such aid ever been revoked or suspended?  46 lf you answered "Yes" to either 34a or b, please explain using an attached statement.	g	Athletic programs?	33g		
34 a Does the organization receive any financial aid or assistance from a governmental agency?	h	Other extracurricular activities?	33h		
34 a Does the organization receive any financial aid or assistance from a governmental agency?  b Has the organization's right to such aid ever been revoked or suspended?  If you answered "Yes" to either 34a or b, please explain using an attached statement.  35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4.05					
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b Has the organization's right to such aid ever been revoked or suspended?			_	-	
If you answered "Yes" to either 34a or b, please explain using an attached statement.  35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4.05	34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a_		
If you answered "Yes" to either 34a or b, please explain using an attached statement.  35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4.05	Ь	Has the organization's right to such aid ever been revoked or suspended?	34b		
	v		330		
	35		35		

Par	VI-A Lobbying Expenditures by Electin (To be completed ONLY by an eligi				uctions.)	
Check			b if you check		ed control" provisio	ons apply.
	Limits on Lobbying	Expenditures			(a) Affiliated group	(b) To be completed for all electing
	(The term "expenditures" means a	amounts paid or incui	red.)	<del></del>	totais	organizations
36	Total lobbying expenditures to influence public opinion (gra-			. 36		
37	Total lobbying expenditures to influence a legislative body (	direct lobbying) .		_37		
38	Total lobbying expenditures (add lines 36 and 37)			. 38	0	0
39				. 39		0
40	Total exempt purpose expenditures (add lines 38 and 39)		•	40	0	
41	Lobbying nontaxable amount Enter the amount from the fo	_				
		bying nontaxable a				
		the amount on line 40 10 plus 15% of the ex				
		•	cess over \$1,000,000	) 41	<del>-</del>	
		•	ess over \$1,500,000	′ <del>  ''</del>		
	Over \$1,500,000 but not over \$17,000,000 \$225,00 Over \$17,000,000 \$1,000,000	•	ess over \$1,000,000			
42				42	0	0
43	Subtract line 42 from line 36 Enter -0- if line 42 is more that			43	ō	0
44	Subtract line 41 from line 38 Enter -0- if line 41 is more that			. 44	0	
	Output Got Time of Lines of Time in the instance and			· <del>  · · ·</del>	L <del> </del>	
	Caution: If there is an amount on either line 43 or line 44,	you must file Form 4	720.	- 1		
	4-Year Avera	aina Period Ur	der Section 50	1(h)		
	(Some organizations that made a section See the instructions for	501(h) election do r	ot have to complete	all of the five colu	ımns below	
	See the mad doubles to					
		Lobby	ing Expenditure	s During 4-Ye	ear Averaging F	eriod
	Calendar year (or fiscal year beginning in)   ▶	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45	Lobbying nontaxable amount					0
46	Lobbying ceiling amount (150% of line 45(e))					0
47	Total lobbying expenditures					0
48	Grassroots nontaxable amount					0
49	Grassroots ceiling amount (150% of line 48(e))					0
50	Grassroots lobbying expenditures					o
Par	VI-B Lobbying Activity by Nonelecting	Public Charitie	es			
	(For reporting only by organizations	that did not con	plete Part VI-A	(See page 1	4 of the instru	ctions.)
	the year did the exercise terms to influence actional	etete er legel legele	ton including one			
	the year, did the organization attempt to influence national, to influence public opinion on a legislative matter or refere				Yes No	Amount
allein			SE 01		X	
b	Volunteers  Paid staff or management (Include compensation in expen		c through h \	• •		
C		ses reported on lines	c anough ii.)		$\frac{1}{x}$	
d	Mailings to members, legislators, or the public				$\frac{1}{x}$	
e	Publications, or published or broadcast statements	• •		•		
f	Grants to other organizations for lobbying purposes				. <del>                                    </del>	· · · · · ·
_	Direct contact with legislators, their staffs, government office	 ciale or a legielative l	nodv	•	·   <del>x</del>	<del></del>
g	Rallies, demonstrations, seminars, conventions, speeches	-	-		l $\hat{x}$	<del>-</del> -
h :					<del>                                     </del>	
1	Total lobbying expenditures (Add lines c through h.) . If "Yes" to any of the above, also attach a statement giving	a detailed description		ities.	L	<u> </u>

95-2509509

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions.)

51					vith any other organization described in section relating to political organizations?			
a				ncharitable exempt organization			Yes	No
a		Cash	organization to a ne	inoranable exempt organization		51a(i)		_
	• • •					a(ii)		
_	<b>1y</b>	Other assets .				4(11)		$\vdash$
b		ransactions.				L 433		
				haritable exempt organization	• • • • •	b(i)		├──
	(ii) f	Purchases of assets fro	om a nonchantable	exempt organization		b(ii)	ļ	
	(iii) l	Rental of facilities, equi	pment, or other as	s <b>ets</b>		b(iii)		<u> </u>
	(iv) i	Reimbursement arrang	ements			b(iv)		
	(v) l	Loans or loan guarante	<b>es</b>			b(v)		<u> </u>
	(vi) 1	Performance of service	s or membership o	r fundraising solicitations		b(vi)		<u> </u>
С	Sharin	g of facilities, equipmen	nt, mailing lists, oth	er assets, or paid employees		c		<u> </u>
đ					nn (b) should always show the fair market value	•		
	of the	goods, other assets, or	services given by	the reporting organization. If the o	organization received less than fair market value	•		
	in any	transaction or sharing	arrangement, show	in column (d) the value of the go	ods, other assets, or services received:			
	(a)	(b)		(c)	(d)			
	ne no.	Amount involved	Name of nonc	hantable exempt organization	Description of transfers, transactions, and sha	ring arran	gemen	ts
	_			* * * * * * * * * * * * * * * * * * * *				
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			· <del></del>					
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	descri		f the Code (other t	with, or related to, one or more ta han section 501(c)(3)) or in section		☐ Yes	X	] No
		(a) Name of organization	1	(b) Type of organization	(c) Description of relationship			
				-				
	<u> </u>							
			· · · · · · · · · · · · · · · · · · ·					
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Advertising	1,665	
Bad Debts	103,338	
Fees & Charges	86,082	
Insurance	51,292	
Lodging & Meals	273,356	
Miscellaneous	672	
Outfits, cleaning	16,459	
Professional Fees	74,765	
Supplies	21,193	
Utilities	8,068	
Production	16,201	
Small Equipment	9,242	
Contributions	20,387	
Royalties	21,626	
TOTAL	704,346	

Attachment	to Form	aan
Allacinnent	LO FOIIII	990

Part II
Page 4
Line 64B
Notes Payable

Continental Singers, Inc. 12/31/07 95-2509509

TOTAL	209,684
Bank of America Leasing	69,376
Carpenter Bus	1,320
Officer Loan	57,045
Ford Credit	6,890
Ford Credit	7,616
Christian Artists Records, Inc.	32,118
Al & Pat Ficker	35,319

Attachment to Form 990

**TOTAL** 

# Part I Page I Line 1a Gross Contributions

Continental Singers, Inc. 12/31/07 95-2509509

Compassion International	111,000.00
12290 Voyager Parkway	
Colorado Springs, CO 80921	
Direct Contributions Less Than \$5000	2,059,090.00

2,170,090.00

Attachment to Form 990

Part II
Page 4
Line 58
Other Assets

Continental Singers, Inc. 12/31/07 95-2509509

TOTAL	21,965
Security Deposits	8,402
CSV – Officers Life Insurance	13,563

Attachment to Form 990

Part II
Page 4
Line 53
Prepaid Expenses

Continental Singers, Inc. 12/31/07 95-2509509

TOTAL	16,500
Prepaid Special Event	5,000
Prepaid Insurance	11,500

Fixed Asset Schedule Part II Page 2 Line 42

Continental Singers, Inc. 12/31/07 95-2509509

	Beg Bal 1/1/2007	Additions 2007	Deletions 2007	Transfers 2007	Depr 2007	End Bal 12/31/2007
		,		<del> </del>		<del></del>
Buses	90,632		(1,600)			89,032
Audio Equipment	114,244		(4,200)			110,044
Lighting	43,935					43,935
Instruments	11,668	5,000				16,668
Vehicles	38,478	31,573				70,051
Office Equipment	154,246				· <u>·</u>	154,246
Leased Equipment	87,692					87,692
Other Equipment	77,130					77,130
TOTAL	618,025	36,573	(5,800)	-	-	648,798

**Accumulated Depreciation** 

Talatou Doproolation		<del></del>		
Buses	(90,632)	1,600	(3,331)	(92,363)
Audio Equipment	(105,587)	4,200	(3,155)	(104,542)
Lighting	(43,053)		(1,518)	(44,571)
Instruments	(9,664)		(661)	(10,325)
Vehicles	(18,548)		(12,582)	(31,130)
Office Equipment	(130,835)		(11,367)	(142,202)
Leased Equipment	(18,146)		(9,328)	- (27,474)
Other Equipment	(68,137)		(3,578)	(71,715)
TOTAL	(484,602)	- 5,800 -	(45,520)	(524,322)

# BOARD OF DIRECTORS 2008

#### CAM FLORIA Income \$100,001

2221 Kapili Road Unit 51 Koloa, HI 96756 808-742-9560 (office) 808-742-4354 (fax) 808-742-4354 (home) 805-218-9113 (cell) cam@hawaiian.net

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626-398-2397 (work)
626-398-2333
2880 Vision Court (work address)
Aurora, IL 60506
630-801-3681 (work)
630-801-3842 (fax)
rswanson@tln.com

#### **THURLOW SPURR**

Regal Marine Industries
2300 Jetport Drive
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#### **SCOTT RUMMELL**

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#### LEEN LA RIVIERE

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The Netherlands
Continental Art Centre
Robert Kochplaats 342
3068 JD Rotterdam
31-10-421-2592 (home)
31-65-138-4805 (cell)
31-10-455-9022 (fax)
31-10-456-8689 (office)
leen@continentalart.org

#### MARC WHITMORE

Stonegate Media Group 2600 W Olive Avenue 5<sup>th</sup> Floor Burbank, CA 91505 1330 E Cherry Street Springfield, MO 65802 800-785-7698 (work) 818-720-0861 (cell) marc@stonegatemediagroup.com marcwhitmore@aol.com

#### **BRENT LAUER**

3614 Shallow Brook Lane Orange, CA 92867 714-685-9898 (home) 714-612-9579 (cell) 909-355-5531 (work) 714-685-9998 (home fax) 909-357-7849 (work fax) blauer@dispatchtrans.com

#### **HOWARD PARKER**

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#### **DANETTE FERRO**

82-526 Alda Drive Indio, CA 92201 760-775-7321 (home) 760-880-6091 (cell) dferro@dc.rr.com