

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

▶ **Do not enter social security numbers on this form as it may be made public.**
 ▶ **Go to www.irs.gov/Form990PF for instructions and the latest information.**

OMB No 1545-0052
2018
Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation THE NATIONAL COALITION OF HEALTH CARE SHARING MINISTRIES INC		A Employer identification number 34-1939326
Number and street (or P O box number if mail is not delivered to street address) 4845 FULTON DRIVE NW	Room/suite	B Telephone number (see instructions) (855) 585-4237
City or town, state or province, country, and ZIP or foreign postal code CANTON, OH 44718		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>10,133,825</u>	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)				
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	1	1	1	
4 Dividends and interest from securities				
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	847			
b Gross sales price for all assets on line 6a				46,787
7 Capital gain net income (from Part IV, line 2)		847		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)	61,612,111			
12 Total. Add lines 1 through 11	61,612,959	848	1	
13 Compensation of officers, directors, trustees, etc	807,823			646,258
14 Other employee salaries and wages	11,027,663			8,822,130
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule)				
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see instructions)	1,027,603			822,083
19 Depreciation (attach schedule) and depletion	350,215			
20 Occupancy	187,018			
21 Travel, conferences, and meetings	163,948			147,553
22 Printing and publications	210,957			168,766
23 Other expenses (attach schedule)	47,453,980			33,448,786
24 Total operating and administrative expenses. Add lines 13 through 23	61,229,207	0		44,055,576
25 Contributions, gifts, grants paid	0			0
26 Total expenses and disbursements. Add lines 24 and 25	61,229,207	0		44,055,576
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	383,752			
b Net investment income (if negative, enter -0-)		848		
c Adjusted net income (if negative, enter -0-)			1	

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	3,079,631	290,105	290,105
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ <u>1,574,421</u>			
	Less allowance for doubtful accounts ▶ _____	183,360	1,574,421	1,574,421
	4 Pledges receivable ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ <u>116,482</u>			
	Less allowance for doubtful accounts ▶ _____	139,432	116,482	116,482
	8 Inventories for sale or use		28,973	28,973
	9 Prepaid expenses and deferred charges	323,044	2,274,870	2,274,870
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____			
Less accumulated depreciation (attach schedule) ▶ _____				
12 Investments—mortgage loans				
13 Investments—other (attach schedule)				
14 Land, buildings, and equipment basis ▶ <u>6,002,401</u>				
Less accumulated depreciation (attach schedule) ▶ <u>620,663</u>	3,620,495	5,381,738	5,381,738	
15 Other assets (describe ▶ _____)	499,097	467,236	467,236	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	7,845,059	10,133,825	10,133,825	
Liabilities	17 Accounts payable and accrued expenses	764,603	2,669,617	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	764,603	2,669,617	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds	7,080,456	7,464,208		
30 Total net assets or fund balances (see instructions)	7,080,456	7,464,208		
31 Total liabilities and net assets/fund balances (see instructions) .	7,845,059	10,133,825		

Part III Analysis of Changes in Net Assets or Fund Balances			
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)		1	7,080,456
2 Enter amount from Part I, line 27a		2	383,752
3 Other increases not included in line 2 (itemize) ▶ _____		3	
4 Add lines 1, 2, and 3		4	7,464,208
5 Decreases not included in line 2 (itemize) ▶ _____		5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .		6	7,464,208

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1 a REAL ESTATE PURCH OPTION	P	2014-12-24	2018-02-28
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 46,787	4,060	50,000	847
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			847
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	847
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017			
2016			
2015			
2014			
2013			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions	8	

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculations. Includes questions about exempt foundations, tax under section 511, and tax due. Columns for line numbers and amounts.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, expenditures, and state reporting. Columns for question numbers and Yes/No responses.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distributions, public inspection requirements, and books in care.

Located at 4845 FULTON DRIVE NW CANTON OH ZIP+4 44718

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here and enter the amount of tax-exempt interest received or accrued during the year.

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>		
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.	<input type="checkbox"/>				
Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>					No
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>		
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?					No
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "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 and deferred compensation	(e) Expense account, other allowances
TIMOTHY DEWEES 2837 MYERSVILLE RD UNIONTOWN, OH 44685	IT DIRECTOR 40 00	163,047		
MATTHEW BELLIS 245 ADA AVENUE STRASBURG, PA 17579	DIR OF COMMUNICAT 40 00	114,157		
JOHN ACKERMAN 1504 MAIN AVENUE W MASSILLON, OH 44647	MGR- QUALITY INSUR 40 00	109,100		
STEPHEN FURST 1433 BRENTFIELD DR WADSWORTH, OH 44281	CFO 40 00	167,242		
MARK COVERT 8431 W WADORA CIRCLE NW NORTH CANTON, OH 44720	APPLIC DEVELOP MGR 40 00	112,414		
Total number of other employees paid over \$50,000.				40

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
HEALTH SHARE PRO LLC 9915 NORTH 6630 WEST HIGHLAND, UT 84003	MARKETING	1,414,165
BOW TIE MEDICAL LLC 7750 TOWN CENTRE DRIVE 300 BROADVIEW HTS, OH 44147	PROVIDER SCREENER	612,220
RED CARD 744 OFFICE PARKWAY ST LOUIS, MO 63141	HEALTHCARE COMMUNIC	494,308
HEALTHSMART CARE MGT PO BOX 207106 DALLAS, TX 75320	HEALTHCARE MGT	309,935
COST SHARING SOLUTIONS LLC 2824 WOODLAWN AVE NW CANTON, OH 44708	MARKETING/REIMB	25,251,960
Total number of others receiving over \$50,000 for professional services.		19

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 ALL OF THE EXPENSES ARE USED TO PROVIDE THE ADMINISTRATION OF HEALTH CARE SHARING SERVICES TO GOSPEL LIGHT MENNONITE CHURCH MEDICAL AID PLAN, INC, A 501(c)(3) ORGANIZATION	61,229,207
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	0
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	0
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	0
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	0
6	Minimum investment return. Enter 5% of line 5.	6	0

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	44,055,576
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	44,055,576
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	44,055,576

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.				
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.				
e From 2017.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ _____				
a Applied to 2017, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2018 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2014.				
b Excess from 2015.				
c Excess from 2016.				
d Excess from 2017.				
e Excess from 2018.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
b 85% of line 2a	0				0
c Qualifying distributions from Part XII, line 4 for each year listed	44,055,576	43,561,635	35,195,475	9,693,712	132,506,398
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	44,055,576	43,561,635	35,195,475	9,693,712	132,506,398
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					0
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	848			3	851

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc to individuals or organizations under other conditions, complete items 2a, b, c, and d See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Total ▶ 3a				
b <i>Approved for future payment</i>				
Total ▶ 3b				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DALE E BELLIS 9688 HOCKINS ST NW MASSILLON, OH 44646	Board Chairman 40 00	226,395		
DRUZILLA J ABEL 8522 SAYBROOK AVENUE NORTH CANTON, OH 44720	COO/ Board Sec 40 00	187,089		
BRADLEY HAHN 2615 SOUTH EL MARINO MESA, AZ 85202	Director 0 00	0		
EVERETT YODER 144 HATHAWAY RD PARIS, TN 38242	Director 0 00	0		
LARRY FOSTER 6490 SPRING MILL RD INDIANAPOLIS, IN 46260	CEO/Director 40 00	394,339		

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2018 Amortization Schedule

Name: THE NATIONAL COALITION OF HEALTH CARE
SHARING MINISTRIES INC

EIN: 34-1939326

Software ID: 18007218

Software Version: 2018v3.1

Description of Amortized Expenses	Date Acquired, Completed, or Expended	Amount Amortized	Deduction for Prior Years	Amortization Method	Current Year Amortization	Net Investment Income	Adjusted Net Income	Total Amount of Amortization
SOFTWARE DEVELOPMENT	2013-12-31	60,000	53,520		3,456			56,976
SOFTWARE DEVELOPMENT	2014-07-01	140,780	116,454		16,218			132,672
SOFTWARE DEVELOPMENT	2015-07-01	108,744	77,426		12,527			89,953
SOFTWARE DEVELOPMENT	2017-07-01	421,677	42,168	5 0000	84,335			126,503
SOFTWARE DEVELOPMENT	2018-07-01	96,860		5 0000	9,686			9,686

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TY 2018 Depreciation Schedule

Name: THE NATIONAL COALITION OF HEALTH CARE
SHARING MINISTRIES INC

EIN: 34-1939326

Software ID: 18007218

Software Version: 2018v3.1

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
OFFICE EQUIPMENT	2013-10-01	5,657	5,116	200DB	9 58 %	541			
COMPUTER	2013-10-01	11,222	10,147	200DB	9 58 %	1,075			
FURNITURE	2013-10-01	6,985	5,231	200DB	8 73 %	610			
COMPUTER	2014-01-15	908	752	200DB	11 52 %	105			
COMPUTER	2014-01-16	2,366	1,957	200DB	11 52 %	273			
COMPUTER	2014-04-03	2,129	1,761	200DB	11 52 %	245			
REAL ESTATE PURCH OPTION	2014-12-24	50,000	3,900	SL	2 56 %	160			
LEASEHOLD IMPROVEMENTS	2015-07-01	149,269	9,411	SL	2 56 %	3,827			
COMPUTER	2015-07-01	114,031	81,190	200DB	11 52 %	13,136			
COMPUTER	2015-07-01	6,725	4,788	200DB	11 52 %	775			
FURNITURE	2015-07-01	17,188	9,671	200DB	12 49 %	2,147			
LENOVO THINKPAD & ACCESS	2016-01-26	2,153	826	SL	5 0000	431			
APPLE MACBOOK	2016-02-10	1,187	455	SL	5 0000	237			
COMPUTER HARDWARE	2016-02-12	2,973	1,140	SL	5 0000	595			
COMPUTER HARDWARE	2016-02-17	3,735	1,370	SL	5 0000	747			
COMPUTER HARDWARE	2016-02-19	8,073	2,961	SL	5 0000	1,615			
COMPUTER HARDWARE	2016-02-22	2,342	858	SL	5 0000	468			
COMPUTER HARDWARE	2016-03-31	1,721	602	SL	5 0000	344			
COMPUTER HARDWARE	2016-04-01	7,498	2,625	SL	5 0000	1,500			
COMPUTER HARDWARE	2016-04-19	2,851	950	SL	5 0000	570			

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COMPUTER HARDWARE	2016-07-22	1,954	554	SL	5 0000	391			
COMPUTER HARDWARE	2016-07-22	2,920	827	SL	5 0000	584			
COMPUTER HARDWARE	2016-08-23	1,411	376	SL	5 0000	282			
COMPUTER HARDWARE	2016-08-24	1,411	376	SL	5 0000	282			
COMPUTER HARDWARE	2016-09-01	1,422	379	SL	5 0000	284			
COMPUTER HARDWARE	2016-09-08	13,003	3,468	SL	5 0000	2,601			
COMPUTER HARDWARE	2016-09-16	1,422	355	SL	5 0000	284			
LENOVO THINKPAD	2016-10-06	1,199	300	SL	5 0000	240			
COMPUTER HARDWARE	2016-11-29	4,113	892	SL	5 0000	823			
COMPUTER HARDWARE	2016-11-10	2,440	569	SL	5 0000	488			
COMPUTER HARDWARE	2016-12-16	1,899	380	SL	5 0000	380			
COMPUTER HARDWARE	2016-01-08	9,036	3,614	SL	5 0000	1,807			
COMPUTER HARDWARE	2016-06-14	1,984	628	SL	5 0000	397			
COMPUTER HARDWARE	2016-08-02	7,157	2,027	SL	5 0000	1,431			
PHONE SYSTEM	2016-01-31	36,524	14,001	SL	5 0000	7,305			
1999 BOX TRUCK	2016-08-31	5,000	1,333	SL	5 0000	1,000			
VIDEO EQUIPMENT	2016-05-27	2,417	383	SL	10 0000	242			
INSTALL OF COMPUTER LINE	2016-01-15	6,544	328	SL	40 0000	164			
ARCHITECTURAL DRAWING	2016-02-29	2,720	125	SL	40 0000	68			
ARCHITECTURAL DRAWING	2016-03-09	357	16	SL	40 0000	9			

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
BACK & SIDE RAILING	2016-03-16	14,351	628	SL	40 0000	359			
BACK PORCH	2016-04-11	14,155	619	SL	40 0000	354			
ARCHITECTURAL DRAWINGS	2016-04-28	3,366	140	SL	40 0000	84			
CARPET	2016-05-08	1,514	63	SL	40 0000	38			
BUILDING SECURITY LOCKS	2016-05-11	16,140	673	SL	40 0000	404			
CUBICLES	2016-05-19	49,795	1,971	SL	40 0000	1,245			
INSTALL OF COMP LINES	2016-05-31	2,100	84	SL	40 0000	53			
ARCHITECTURAL DRAWINGS	2016-06-22	1,200	45	SL	40 0000	30			
FRONT RAILING	2016-08-23	1,446	48	SL	40 0000	36			
DEMO ACTIVITY NEW OFFICES	2016-08-26	3,226	108	SL	40 0000	81			
LOWER LEVEL OFFICE RENOV	2016-08-26	10,620	355	SL	40 0000	266			
EXTERIOR BRICK TUCKPOINT	2016-08-26	7,718	257	SL	40 0000	193			
ARCHITECT DRAWINGS	2016-09-26	1,610	50	SL	40 0000	40			
SECURITY DOORS	2016-11-28	5,250	142	SL	40 0000	131			
COMPUTER HARDWARE	2016-08-04	1,944	551	SL	5 0000	389			
SCANNER	2016-10-10	1,395	349	SL	5 0000	279			
COMPUTER HARDWARE	2016-11-23	4,759	1,031	SL	5 0000	952			
COMPUTER HARDWARE	2016-12-01	7,734	1,676	SL	5 0000	1,547			
BUILDING- 4455 HILLS	2017-10-24	1,706,001	7,108	SL	40 0000	42,650			
FURNITURE- CUBICLES, ETC	2017-11-13	208,849	3,481	SL	10 0000	20,885			

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
VIDEO EQUIP- TRI CASTER	2017-02-10	13,862	1,271	SL	10 0000	1,386			
LEASEHOLD IMPROVEMENTS	2017-11-01	131,548	548	SL	40 0000	3,289			
COMPUTER HARDWARE	2017-07-01	720,477	72,068	SL	5 0000	144,095			
SHUTTLE BUS	2017-01-16	6,000	1,100	SL	5 0000	1,200			
BUILDING- 4845 FULTON DR	2018-02-28	866,776		SL	40 0000	18,058			
FURNITURE & FIXTURES	2018-07-01	141,620		SL	7 0000	10,116			
LAND IMPROV- FULTON LOT	2018-10-31	56,354		SL	15 0000	626			
LEASEHOLD IMPROV	2018-07-01	68,364		SL	40 0000	855			
COMPUTER HARDWARE	2018-07-01	457,937		SL	5 0000	45,794			
LAND IMPROVEMENTS- HD LOT	2018-11-30	157,842		SL	15 0000	877			
LEASEHOLD IMPROVEMENTS HD	2018-07-01	29,199		SL	40 0000	365			
VEHICLE- 2018 YUKON	2018-05-22	43,499		SL	5 0000	5,075			

**TY 2018 Land, Etc.
Schedule**

Name: THE NATIONAL COALITION OF HEALTH CARE
SHARING MINISTRIES INC

EIN: 34-1939326

Software ID: 18007218

Software Version: 2018v3.1

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Auto./Transportation Equip.	57,999	13,208	44,791	44,791
Furniture and Fixtures	374,642	52,141	322,501	322,501
Machinery and Equipment	1,473,991	458,493	1,015,498	1,015,498
Buildings	2,572,777	67,816	2,504,961	2,504,961
Improvements	734,688	29,005	705,683	705,683
Land	788,304		788,304	788,304

TY 2018 Other Assets Schedule

Name: THE NATIONAL COALITION OF HEALTH CARE
SHARING MINISTRIES INC

EIN: 34-1939326

Software ID: 18007218

Software Version: 2018v3.1

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DEPOSIT	57,464	54,965	54,965
Net Intangible Assets	441,633	412,271	412,271

TY 2018 Other Expenses Schedule

Name: THE NATIONAL COALITION OF HEALTH CARE
SHARING MINISTRIES INC

EIN: 34-1939326

Software ID: 18007218

Software Version: 2018v3.1

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Advertising & Promotion	6,598,713			6,598,713
Amortization	126,222			
Automobile Expense	17,586			
Contract Services	1,339,189			937,432
Credit Card Fees	7,944,339			
Employee Benefits	227,291			180,168
Information Technology	1,755,889			1,489,487
Insurance	64,090			
Meals	111,980			11,198
Member Development Fees	20,848,054			20,848,054

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Member Programs	1,353,729			1,353,729
Office Expense	3,569,567			178,471
Postage & Shipping	706,311			70,631
Public Relations	309,317			309,317
Repairs & Maintenance	385,809			
Telephone Expense	256,412			
Temp/Seasonal Subcontractors	1,839,482			1,471,586

TY 2018 Other Income Schedule

Name: THE NATIONAL COALITION OF HEALTH CARE
SHARING MINISTRIES INC

EIN: 34-1939326

Software ID: 18007218

Software Version: 2018v3.1

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MEMBERSHIP FEES	61,612,111		

TY 2018 Taxes Schedule

Name: THE NATIONAL COALITION OF HEALTH CARE
SHARING MINISTRIES INC

EIN: 34-1939326

Software ID: 18007218

Software Version: 2018v3.1

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Other Taxes	61,587			49,270
Payroll Taxes	966,016			772,813