Form **990**

Department of the Treasury
Internal Revenue Service

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)

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

OMB No. 1545-0047

2006

Open to Public Inspection

A For the 2006 calendar year, or tax year beginning OCTOBER 1 , 2006, and ending SEPTEMBER 30 , 2007

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: TEEN CHALLENGE OF ARKANSAS, INC.
Number and street (or P.O. box if mail is not delivered to street address): P.O. BOX 8177
Room/suite:
City or town, state or country, and ZIP + 4: HOT SPRINGS, AR 71909

D Employer identification number 71-0420376
E Telephone number (501)624-2446
F Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) ▶

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

***H** and **I** are not applicable to section 527 organizations.*
H(a) Is this a group return for affiliates? ☐ Yes ☒ No
H(b) If "Yes," enter number of affiliates ▶N/A
H(c) Are all affiliates included? ☐ Yes ☐ No
(If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No
I Group Exemption Number ▶
M Check ▶ ☐ if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: ▶

J Organization type (check only one) ▶ ☒ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than $25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances *(See the instructions.)*

Revenue	1	Contributions, gifts, grants, and similar amounts received:					
	a	Contributions to donor advised funds		1a			
	b	Direct public support (not included on line 1a)		1b	562,119		
	c	Indirect public support (not included on line 1a)		1c			
	d	Government contributions (grants) (not included on line 1a)		1d			
	e	Total (add lines 1a through 1d) (cash $ ______ noncash $ ______)				1e	562,119
	2	Program service revenue including government fees and contracts (from Part VII, line 93)				2	188,891
	3	Membership dues and assessments				3	
	4	Interest on savings and temporary cash investments				4	642
	5	Dividends and interest from securities				5	
	6a	Gross rents		6a			
	b	Less: rental expenses		6b			
	c	Net rental income or (loss). Subtract line 6b from line 6a				6c	0
	7	Other investment income (describe ▶)				7	
			(A) Securities		(B) Other		
	8a	Gross amount from sales of assets other than inventory		8a			
	b	Less: cost or other basis and sales expenses		8b			
	c	Gain or (loss) (attach schedule)	0	8c	0		
	d	Net gain or (loss). Combine line 8c, columns (A) and (B)				8d	0
	9	Special events and activities (attach schedule). If any amount is from gaming, check here ▶ ☐					
	a	Gross revenue (not including $ ______ of contributions reported on line 1b)		9a			
	b	Less: direct expenses other than fundraising expenses		9b			
	c	Net income or (loss) from special events. Subtract line 9b from line 9a				9c	0
	10a	Gross sales of inventory, less returns and allowances		10a			
	b	Less: cost of goods sold		10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a				10c	0
	11	Other revenue (from Part VII, line 103)				11	0
	12	**Total revenue.** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11				12	751,652
Expenses	13	Program services (from line 44, column (B))				13	617,425
	14	Management and general (from line 44, column (C))				14	65,853
	15	Fundraising (from line 44, column (D))				15	57,005
	16	Payments to affiliates (attach schedule)				16	
	17	**Total expenses.** Add lines 16 and 44, column (A)				17	740,283
Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 12				18	11,369
	19	Net assets or fund balances at beginning of year (from line 73, column (A))				19	368,611
	20	Other changes in net assets or fund balances (attach explanation)				20	
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20				21	379,980

TAXPAYER'S COPY
Prepared By
Taylor, Rodgers & Turner, PLLC
Certified Public Accountants
Arkadelphia, Arkansas

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. *(See the instructions.)*

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
22a Grants paid from donor advised funds (attach schedule) (cash $ ____ noncash $ ____) If this amount includes foreign grants, check here ▶ ☐	22a	0			
22b Other grants and allocations (attach schedule) (cash $ ____ noncash $ ____) If this amount includes foreign grants, check here ▶ ☐	22b	0			
23 Specific assistance to individuals (attach schedule)	23	0			
24 Benefits paid to or for members (attach schedule)	24	0			
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	25a	0			
b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	25b	0			
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c	0			
26 Salaries and wages of employees not included on lines 25a, b, and c	26	181,480	150,478	19,408	11,594
27 Pension plan contributions not included on lines 25a, b, and c	27	0			
28 Employee benefits not included on lines 25a – 27	28	12,748	11,581	640	527
29 Payroll taxes	29	16,511	14,035	1,651	825
30 Professional fundraising fees	30	0			
31 Accounting fees	31	0			
32 Legal fees / Professional Fees	32	7,617	5,332	2,285	0
33 Supplies	33	41,024	41,024	0	0
34 Telephone / Utilities	34	84,595	78,140	5,713	742
35 Postage and shipping	35	17,092	4,273	4,273	8,546
36 Occupancy	36	22,191	22,191	0	0
37 Equipment rental and maintenance	37	0			
38 Printing and publications	38	8,584	2,146	2,146	4,292
39 Travel	39	47,129	40,495	6,015	619
40 Conferences, conventions, and meetings	40	6,767	6,767	0	0
41 Interest	41	21,498	21,498	0	0
42 Depreciation, depletion, etc. (attach schedule)	42	32,484	22,739	9,745	0
43 Other expenses not covered above (itemize):					
a Miscellaneous	43a	9,439	9,060	379	0
b Pledge Campaign	43b	29,329	3,134	0	26,195
c Outreach & Renewal	43c	34,625	34,625	0	0
d Office	43d	29,851	17,911	8,955	2,985
e Food and Kitchen	43e	32,645	32,645	0	0
f Contract Services	43f	22,869	22,869	0	0
g See Attached	43g	81,805	76,482	4,643	680
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines 13–15)	44	740,283	617,425	65,853	57,005

Joint Costs. Check ▶ ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ▶ ☐ Yes ☒ No

If "Yes," enter **(i)** the aggregate amount of these joint costs $ ____; **(ii)** the amount allocated to Program services $ ____; **(iii)** the amount allocated to Management and general $ ____; and **(iv)** the amount allocated to Fundraising $

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.

		Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
	What is the organization's primary exempt purpose? ▶ ______ All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a	EVANGELIZE AND WIN YOUNG PEOPLE TO JESUS CHRIST ALONG WITH THE RELIGIOUS AND EDUCATIONAL REHABILITATION OF YOUNG PEOPLE WHO MAY BENEFIT FROM THE SPECIALIZED MINISTRY.	
	(Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	617,425
b		
	(Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
c		
	(Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
d		
	(Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
e	Other program services (attach schedule) (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
f	**Total of Program Service Expenses** (should equal line 44, column (B), Program services). . . . . ▶	617,425

Part IV Balance Sheets *(See the instructions.)*

					(A) Beginning of year		(B) End of year
	Note:	*Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*					
Assets	45	Cash—non-interest-bearing			506	45	506
	46	Savings and temporary cash investments			100,300	46	95,900
	47a	Accounts receivable	47a				
	b	Less: allowance for doubtful accounts	47b		0	47c	0
	48a	Pledges receivable	48a	19,785			
	b	Less: allowance for doubtful accounts	48b	7,840	19,970	48c	11,945
	49	Grants receivable				49	
	50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			2,550	50a	80
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)				50b	
	51a	Other notes and loans receivable (attach schedule)	51a				
	b	Less: allowance for doubtful accounts	51b		0	51c	0
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges				53	
	54a	Investments—publicly-traded securities ▶ ☐ Cost ☐ FMV				54a	
	b	Investments—other securities (attach schedule) ▶ ☐ Cost ☐ FMV				54b	
	55a	Investments—land, buildings, and equipment: basis	55a				
	b	Less: accumulated depreciation (attach schedule)	55b		21,411	55c	21,411
	56	Investments—other (attach schedule)				56	
	57a	Land, buildings, and equipment: basis	57a	965,103			
	b	Less: accumulated depreciation (attach schedule)	57b	(619,322)	361,740	57c	345,781
	58	Other assets, including program-related investments (describe ▶ * See Bottom of Page)			136,752	58	229,010
	59	**Total assets** (must equal line 74). Add lines 45 through 58			643,229	59	704,633
Liabilities	60	Accounts payable and accrued expenses			18,963	60	37,527
	61	Grants payable				61	
	62	Deferred revenue				62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a	Tax-exempt bond liabilities (attach schedule)				64a	
	b	Mortgages and other notes payable (attach schedule)			250,844	64b	284,471
	65	Other liabilities (describe ▶ Lease Payable)			4,811	65	2,655
	66	**Total liabilities.** Add lines 60 through 65			274,618	66	324,653
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 67 through 69 and lines 73 and 74.**					
	67	Unrestricted			368,611	67	379,980
	68	Temporarily restricted				68	
	69	Permanently restricted				69	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.					
	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds				72	
	73	**Total net assets or fund balances.** Add lines 67 through 69 **or** lines 70 through 72. (Column (A) **must** equal line 19 and column (B) **must** equal line 21)			368,611	73	379,980
	74	**Total liabilities and net assets/fund balances.** Add lines 66 and 73			643,229	74	704,633

* Prepaid Insurance	6,888	7,411
Utility Deposits	300	300
Construction in Progress	129,564	221,299

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return *(See the instructions.)*

a	Total revenue, gains, and other support per audited financial statements			a	751,652
b	Amounts included on line a but not on Part I, line 12:				
1	Net unrealized gains on investments	b1			
2	Donated services and use of facilities	b2			
3	Recoveries of prior year grants	b3			
4	Other (specify):	b4			
	Add lines b1 through b4			b	0
c	Subtract line b from line a			c	751,652
d	Amounts included on Part I, line 12, but not on line a:				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2			
	Add lines d1 and d2			d	0
e	**Total revenue** (Part I, line 12). Add lines c and d ▶			e	751,652

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements			a	740,283
b	Amounts included on line a but not on Part I, line 17:				
1	Donated services and use of facilities	b1			
2	Prior year adjustments reported on Part I, line 20	b2			
3	Losses reported on Part I, line 20	b3			
4	Other (specify):	b4			
	Add lines b1 through b4			b	0
c	Subtract line b from line a			c	740,283
d	Amounts included on Part I, line 17, but not on line a:				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify):	d2			
	Add lines d1 and d2			d	0
e	**Total expenses** (Part I, line 17). Add lines c and d ▶			e	740,283

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) *(See the 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 & deferred compensation plans	(E) Expense account and other allowances
SEE ATTACHED LIST				

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

		Yes	No
75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 17			
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b		X
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." ▶	75c		X
If "Yes," attach a statement that includes the information described in the instructions.			
d Does the organization have a written conflict of interest policy?	75d		X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
NONE				

Part VI Other Information *(See the instructions.)*

		Yes	No
76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78a Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b		N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b If "Yes," enter the name of the organization ▶ ______ and check whether it is ☐ exempt or ☐ nonexempt			
81a Enter direct and indirect political expenditures. (See line 81 instructions.) 81a			
b Did the organization file **Form 1120-POL** for this year?	81b		X

Part VI Other Information *(continued)*

			Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge 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 amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to *quid pro quo* contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		N/A
85	*501(c)(4), (5), or (6) organizations.* a Were substantially all dues nondeductible by members?	85a		N/A
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b		N/A
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members 85c N/A			
d	Section 162(e) lobbying and political expenditures 85d N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		N/A
86	*501(c)(7) orgs.* Enter: a Initiation fees and capital contributions included on line 12 86a N/A			
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A			
87	*501(c)(12) orgs.* Enter: a Gross income from members or shareholders 87a N/A			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI ▶	88b		X
89a	*501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ ______; section 4912 ▶ ______; section 4955 ▶ ______			
b	*501(c)(3) and 501(c)(4) orgs.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ ______			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ ______			
e	*All organizations.* At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		X
f	*All organizations.* Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		X
g	*For supporting organizations and sponsoring organizations maintaining donor advised funds.* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		X

90a List the states with which a copy of this return is filed ▶ NONE

b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.) 90b 25

91a The books are in care of ▶ TIM CULBRETH Telephone no. ▶ 501-624-2446

Located at ▶ HOT SPRINGS, AR ZIP + 4 ▶ 71909

			Yes	No
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b		X
	If "Yes," enter the name of the foreign country ▶ N/A			
	See the instructions for exceptions and filing requirements for **Form TD F 90-22.1**, Report of Foreign Bank and Financial Accounts.			

Part VI Other Information *(continued)*

		Yes	No
c At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶ N/A	91c		X

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041*—Check here . . . . ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year . . ▶ | 92 |

Part VII Analysis of Income-Producing Activities *(See the instructions.)*

Note: *Enter gross amounts unless otherwise indicated.*	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a WORK PROGRAM INCOME					64,462
b PROGRAM FEES					43,322
c MISCELLANEOUS					81,107
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments . . .					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities . .			14	642	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events .					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		642	188,891

105 **Total** (add line 104, columns (B), (D), and (E)) . . . . ▶ 189,533

Note: *Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes *(See the instructions.)*

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A	INCOME EARNED AS PART OF CLIENT REHABILITATION PROGRAM.
93B	INCOME EARNED AS PART OF CLIENT REHABILITATION PROGRAM.
93C	INCOME EARNED AS PART OF CLIENT REHABILITATION PROGRAM.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities *(See the instructions.)*

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts *(See the instructions.)*

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☐ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☐ No

Note: *If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).*

Part XI **Information Regarding Transfers To and From Controlled Entities.** *Complete only if the organization is a controlling organization as defined in section 512(b)(13).* N/A

		Yes	No
106	Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.		

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals		▨	▨	

		Yes	No
107	Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.		

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals		▨	▨	

		Yes	No
108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?		

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

▶ T. R. | 2-22-09

Signature of officer | Date

▶ Executive Director

Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶		Date	Check if self-employed ▶ ☐	Preparer's SSN or PTIN (See Gen. Inst. X) P00047389
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶	TAYLOR, RODGERS & TURNER, PLLC		EIN	▶ 71-0852459
	P.O. BOX 768, ARKADELPHIA, AR 71923		Phone no.	▶ (870)246-4563

TEEN CHALLENGE OF ARKANSAS, INC.
LIST OF OFFICERS, DIRECTORS, AND KEY EMPLOYEES
FORM 990, PART V
YEAR ENDING SEPTEMBER 30, 2007

Name	Address	Title	Compensation	Employee Benefit Plan	Expense Allowance
Rev. Tim Culbreth	Hot Springs, AR	Exec. Director	$ 25,200	$ 1,260	$ -
Dr. Don Robinson	Hot Springs, AR	President	-	-	-
Steve Spakes	Hot Springs, AR	Sec/Treas	-	-	-
James Boyd	Hot Springs, AR	Vice President	-	-	-
Darrel Teeter	Malvern, AR	2nd Vice Pres	-	-	-
Wanda Huie	Benton, AR	Director	-	-	-
Rev. Tommy Carpenter	Little Rock, AR	Director	-	-	-
Steve Trusty	Hot Springs, AR	Director	-	-	-
Mike Seitz	H.S. Village, AR	Director	-	-	-
Ray Baker	Russellville, AR	Director	-	-	-
Rev. Bob Fant	Springdale, AR	Director	-	-	-
David Gilliam	Hot Springs, AR	Director	-	-	-
Rev. Larry Moore	Little Rock, AR	Director	-	-	-
Rev. Royce Lowe	Jacksonville, AR	Director	-	-	-
Angelia Carpente	Hot Springs, AR	Director	-	-	-
Michael Holland	Hot Springs, AR	Director	-	-	-
Van Stueart	Hot Springs, AR	Director	-	-	-
Dale Burroughs	Hot Springs, AR	Director	-	-	-

TEEN CHALLENGE OF ARKANSAS, INC.
P.O. BOX 8177
HOT SPRINGS, AR 71909

71-0420376
Y/E 09/30/2007

FORM 990, PART II, 43 g

	(A)	(B)	(C)	(D)
EDUCATION	$ 3,063	$ 3,063	$ -	$ -
INSURANCE	36,400	33,117	3,283	-
STAFF DEVELOPMENT	13,601	11,561	1,360	680
RENT AND STORAGE	9,529	9,529	-	-
BAD DEBTS	13,291	13,291	-	-
DONATION - COMMITTED TO FREEDOM MINISTRIES, INC.	5,921	5,921	-	-
TOTAL	$ 81,805	$ 76,482	$ 4,643	$ 680

9/30/07

2006 Federal Summary Depreciation Schedule

Client 79142

TEEN CHALLENGE, INC.

2/19/08

09:28AM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct	Cur 179/ SDA	Prior 179/ SDA/ Depr.	Method	Life	Current Depr.
	Form 1041									
	132 JUNE LANE									
141	132 JUNE LANE LAND	8/31/00		10,000						0
142	132 JUNE LANE - HOUSE	8/31/00		75,000			11,538	S/L MM	39	1,923
	Total 132 JUNE LANE			85,000		0	11,538			1,923
	134 JUNE LANE									
3	134 JUNE LANE	12/06/02		4,000						0
4	134 JUNE LANE	7/11/03		69,000			5,676	S/L MM	39	1,769
	Total 134 JUNE LANE			73,000		0	5,676			1,769
	852 FOX PASS									
57	852 FOX PASS - LAND	12/01/86		3,500						0
58	HOUSE	12/31/86		36,892			36,892	S/L HY	15	0
59	WATER SYSTEM	2/01/90		250			250	S/L HY	3	0
60	HOUSE IMPROVEMENTS	9/30/94		11,624			9,300	S/L HY	15	775
61	DRIVEWAY PAVING	12/31/95		1,174			1,115	S/L HY	10	0
	Total 852 FOX PASS			53,440		0	47,557			775
	BUILDINGS, MOBILE HOMES, & IMPRO									
37	MOBILE HOME	10/01/79		29,469			29,469	S/L HY	10	0
38	MOBILE HOME	10/01/80		3,000			3,000	S/L HY	10	0
39	MOBILE HOME	10/01/85		14,000			14,000	S/L HY	10	0
40	LAUNDRY ROOM	10/01/88		6,210			6,210	S/L HY	10	0
41	AIR CONDITIONER	10/01/89		1,180			1,180	S/L HY	5	0
42	CHAPEL	7/01/92		2,341			2,341	S/L HY	10	0
43	STORAGE ROOM	7/01/92		750			750	S/L HY	5	0
44	CHAPEL	12/01/92		860			860	S/L HY	10	0
45	DRIVEWAY PAVING	12/31/95		7,000			6,050	S/L HY	10	0
46	GARAGE	1/01/00		3,027			2,121	S/L HY	10	303
47	SEPTIC SYSTEM	1/15/00		17,435			11,951	S/L HY	10	1,744
162	NEW A/C IN APT#1	5/18/06		2,660			266	S/L HY	5	532
163	3 GALLON FIRE SYSTEM	7/25/06		1,900			190	S/L HY	5	380
	Total BUILDINGS, MOBILE HOMES			89,832		0	78,388			2,959

2006 Federal Summary Depreciation Schedule

Client 79142

TEEN CHALLENGE, INC.

2/19/08 09:28AM

FURNITURE & EQUIPMENT - HOME

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179/ SDA	Prior 179/ SDA/ Depr.	Method	Life	Current Depr.
5	DRYER	10/01/75		300			300	S/L HY	10	0
6	WASHER & DRYER	10/01/75		580			580	S/L HY	10	0
7	FREEZER	12/01/75		382			382	S/L HY	10	0
8	FURNITURE & EQIPMENT	10/01/79		3,046			3,046	S/L HY	10	0
9	WATER FOUNTAIN	10/01/80		242			242	S/L HY	10	0
10	SEARS WATER HEATER	1/01/80		206			206	S/L HY	10	0
11	WASHING MACHINE	1/01/80		412			412	S/L HY	10	0
12	FREEZER	1/01/80		311			311	S/L HY	5	0
13	FIRE EXTINGUISHERS	1/01/80		263			263	S/L HY	5	0
14	SMOKE DETECTORS	5/01/80		120			120	S/L HY	10	0
15	FURNITURE	7/01/80		881			881	S/L HY	10	0
16	WASHER & DRYER	7/01/82		659			659	S/L HY	5	0
17	AIR CONDITIONER	11/01/83		205			205	S/L HY	5	0
18	WALK-IN FREEZER	7/01/86		1,250			1,250	S/L HY	5	0
19	TV & FURNITURE	7/01/86		1,420			1,420	S/L HY	5	0
20	FURNITURE	7/01/86		576			576	S/L HY	5	0
21	DRYER	9/01/86		350			350	S/L HY	5	0
22	J49 REFRIGERATOR X2	12/01/86		1,621			1,621	S/L HY	5	0
23	MICROWAVE	12/01/86		205			205	S/L HY	5	0
24	SANDERS WATER HEATER	2/01/91		1,184			1,184	S/L HY	3	0
25	ICE MACHINE	12/01/91		1,591			1,591	S/L HY	3	0
26	MISCELLANEOUS EQUIPMENT	6/01/92		715			715	S/L HY	3	0
27	CABINET	8/01/92		443			443	S/L HY	3	0
28	DRYER - USED	3/01/93		159			159	S/L	1	0
29	WASHER & DRYER	5/01/93		721			721	S/L	2.5	0
30	WASHER & DRYER	9/01/94		1,129			1,129	S/L HY	5	0
31	TV CART	1/04/95		214			214	S/L HY	5	0
32	AIR CONDITIONER	12/31/95		345			345	S/L HY	5	0
33	FURNACE	9/30/98		1,250			1,250	S/L HY	5	0
34	TABLES	11/18/98		393			393	S/L HY	7	0
35	WOOD STOVE	12/27/99		875			875	S/L HY	5	0
36	HEAT PUMP - LOBBY	10/05/00		3,780			3,679	S/L HY	7	101
	Total FURNITURE & EQUIPMENT -			25,828		0	25,727			101

GLORY HALL

2006 Federal Summary Depreciation Schedule

Client 79142 **TEEN CHALLENGE, INC.**

2/19/08 09:28AM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179/ SDA	Prior 179/ SDA/ Depr.	Method	Life	Current Depr.
53	GLORY HALL - LAND	4/01/90		1,400						0
54	GLORY HALL	11/01/90		76,987			76,987	S/L HY	15	0
55	OFFICE BUILDING ADDITION	6/02/95		21,228			9,765	S/L HY	25	849
56	OFFICE ADDITION	10/01/99		15,400			4,312	S/L HY	25	616
167	A/C, HEAT & AIR	9/20/07		3,000				S/L MQ	10	38
	Total GLORY HALL			118,015		0	91,064			1,503
	LEGACY MOBILE HOME									
152	1999 LEGACY MBLE HOME-3/2	1/01/05		22,045			3,307	S/L HY	10	2,205
	Total LEGACY MOBILE HOME			22,045		0	3,307			2,205
	MANSION PROPERTY & BUILDING									
48	LAND - MANSION	1/01/82		38,000						0
49	BUILDING	1/01/82		114,000			114,000	S/L HY	25	0
50	MANSION FIXTURES	1/01/82		3,000			3,000	S/L HY	10	0
51	MANSION UPS IMPROVEMENT	9/01/92		23,904			23,904	S/L HY	10	0
52	MANSION UPS IMPROVEMENT	9/01/93		27,343			27,343	S/L HY	10	0
146	3 HEAT/AIR UNITS	3/12/04		7,068			1,767	S/L HY	10	707
147	NEW ROOF	5/10/04		12,000			1,500	S/L HY	20	600
	Total MANSION PROPERTY & BUIL			225,315		0	171,514			1,307
	MISCELLANEOUS EQUIPMENT									
124	CHAIN SAWS X2	9/01/88		980			980	S/L HY	5	0
125	STOVE	1/01/89		600			600	S/L HY	5	0
126	AIR CONDITIONER	6/01/91		294			294	S/L	2	0
127	VCR	11/01/92		264			264	S/L	2	0
128	P A EQUIPMENT	9/30/93		1,202			1,202	S/L HY	5	0
129	TAPE DECK	9/30/94		163			163	S/L HY	5	0
130	MISC. P A EQUIPMENT	9/30/94		336			336	200DB HY	3	0
131	VCR	4/03/95		556			556	S/L HY	5	0
132	PAGERS	4/11/95		151			151	S/L HY	5	0
133	AIR CONDITIONER	6/02/95		2,500			2,293	S/L HY	10	0
134	SNAKE P A SYSTEM	7/05/95		248			248	S/L HY	5	0
135	RANGE (HECKTHORN)	9/30/95		291			291	S/L HY	5	0
136	HEAD SET MICROPHONE	9/30/97		1,100			1,100	S/L HY	5	0
137	REFRIGERATOR	9/01/00		968			725	200DB HY	7	43
138	GENERATOR	6/15/01		2,390			2,070	200DB HY	7	213

2006 Federal Summary Depreciation Schedule

Client 79142

TEEN CHALLENGE, INC.

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179/ SDA	Prior 179/ SDA/ Depr.	Method	Life	Current Depr.
139	4 WALK BEHIND MOWERS	6/06/02		15,555			12,085	200DB HY	7	1,388
140	2 WEEDEATERS	8/13/02		4,842			3,762	200DB HY	7	432
143	ROPER WASHER	12/18/03		699			250	S/L HY	7	100
144	120 BLACK STACKABLE CHAIR	2/25/04		2,448			612	S/L HY	10	245
145	5 ALUMINUM TABLES	4/14/04		896			225	S/L HY	10	90
150	ROLAND FP-2 DIGITAL PIANO	8/25/05		1,342			577	200DB MQ	5	306
168	'04 FLEETWOOD CAMPER	7/15/07		8,000				S/L MQ	7	143
169	'95 COBRA CAMPER	8/28/07		4,500				S/L MQ	7	81
	Total MISCELLANEOUS EQUIPME			50,325		0	28,784			3,041
	OFFICE EQUIPMENT									
70	TABLE & CHAIRS	6/01/86		525			525	S/L HY	5	0
71	OFFICE DESK	9/01/86		75			75	S/L HY	5	0
72	SAFE	10/01/86		441			441	S/L HY	5	0
73	FILE CABINET	10/01/86		106			106	S/L HY	5	0
74	FOLDING CHAIRS X28	10/01/86		169			169	S/L HY	5	0
75	FILING CABINET	2/01/89		260			260	S/L	2	0
76	ARC LIST SOFTWARE	5/01/90		710			710	S/L HY	5	0
77	SHELBY SYSTEM	5/01/90		5,135			5,135	S/L HY	5	0
78	DESK	2/01/90		50			50	S/L HY	5	0
79	2 DRAWER FILE CABINET	7/01/91		190			190	200DB HY	3	0
80	PRINTER STAND	8/01/91		177			177	S/L	2	0
81	4 DRAWER FILE CABINET	8/01/91		186			186	S/L	2	0
82	FAX ON KY PR	10/01/91		250			250	S/L	2	0
83	EVEREX COMPUTER UPGRADE	2/01/92		3,000			3,000	S/L HY	5	0
84	FILING CABINETS	2/01/92		157			157	S/L	2	0
85	SHARP VISION VIDEO	9/01/92		2,000			2,000	S/L HY	5	0
86	SHARP 7370 COPIER	12/01/92		1,725			1,725	S/L HY	5	0
87	COMPUTER	2/01/93		832			832	S/L HY	5	0
88	CALCULATOR	3/01/93		84			84	S/L	2	0
89	VIDEO CASE	3/01/93		192			192	S/L HY	5	0
90	PRINTER	3/01/93		275			275	S/L HY	5	0
91	FILE CABINET	7/01/93		255			255	S/L	2	0
92	WORK STATION	7/01/93		234			234	S/L HY	5	0
93	2 OKIDATA PRINTERS	7/01/93		550			550	S/L HY	5	0
94	486 COMPUTER	8/01/93		1,903			1,903	S/L HY	5	0
95	WORK STATION	9/01/93		308			308	S/L HY	5	0
96	COMPUTER SOFTWARE	9/30/93		245			245	200DB HY	3	0

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179/ SDA	Prior 179/ SDA/ Depr.	Method	Life	Current Depr.
97	FAX MACHINE	4/01/94		379			379	S/L HY	5	0
98	486 COMPUTER	12/20/94		1,465			1,465	S/L HY	5	0
99	BINDER	3/01/95		230			230	S/L HY	5	0
100	BOOKCASE	3/31/95		444			444	S/L HY	5	0
101	BOOKCASE	4/14/95		122			122	S/L HY	5	0
102	486 COMPUTER	4/17/95		1,195			1,195	S/L HY	5	0
103	STORAGE UNIT	4/19/95		338			338	S/L HY	5	0
104	PRINTER TABLE	5/26/95		101			101	S/L HY	5	0
105	SWINTER TYPEWRITER	8/30/95		386			386	S/L HY	5	0
106	SAFE	12/31/95		319			319	S/L HY	5	0
107	COLORADO BACKUP SYSTEM	12/31/95		95			95	200DB HY	3	0
108	CREDENZA	12/31/95		318			318	S/L HY	5	0
109	NOTEBOOK COMPUTER	12/31/95		1,865			1,865	S/L HY	5	0
110	DICTAPHONE	12/31/95		292			292	S/L HY	5	0
111	DESK	12/31/95		327			327	S/L HY	5	0
112	PORTABLE COMPUTER	11/08/96		1,597			1,597	S/L HY	5	0
113	CD ROM	8/20/97		1,143			1,143	S/L HY	5	0
114	OKADA 391	9/30/98		591			591	S/L HY	5	0
115	TELEPHONE SYSTEM	11/05/98		6,595			6,595	S/L HY	7	0
116	PRINTER 4000	2/03/99		2,089			2,089	S/L HY	7	0
117	WORK STATION	2/03/99		550			550	S/L HY	7	0
118	COMPUTER NETWORK	2/03/99		7,179			7,179	S/L HY	7	0
119	SOFTWARE	2/01/00		601			601	200DB HY	3	0
120	REGISTER	2/01/00		1,173			820	S/L HY	10	117
121	COMPUTER	4/01/00		2,659			2,659	200DB HY	3	0
122	WORK STATION	7/01/00		1,399			1,399	200DB HY	3	0
123	SOUND SYSTEM	7/01/00		407			407	S/L	4	0
148	PROSTAR LAPTOP	3/05/04		1,590			795	S/L HY	5	318
149	WINDOWS 2000 UPDATE	3/05/04		920			767	S/L HY	3	153
151	DELL COMP/MONITOR/GEO VIS	9/30/05		1,605			690	200DB MQ	5	366
165	SHARP COPIER SYSTEM	10/05/05		6,570			1,314	200DB HY	5	2,102
166	LAPTOP	10/06/06		1,025				S/L MQ	5	179
	Total OFFICE EQUIPMENT			65,603		0	57,106			3,235
	SMEDLEY MOBILE HOME									
1	SMEDLEY LAND	12/06/02		2,000						0
2	SMEDLEY MOBILE HOME	12/06/02		18,000			1,751	S/L MM	39	462
	Total SMEDLEY MOBILE HOME			20,000		0	1,751			462

2006 Federal Summary Depreciation Schedule

Client 79142

TEEN CHALLENGE, INC.

2/19/08 09:28AM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179/ SDA	Prior 179/ SDA/ Depr.	Method	Life	Current Depr.
	VEHICLES									
62	1980 BLUE GM	12/14/94		1,800			1,800	200DB HY	3	0
63	FORD VAN - LIFT	2/01/95		1,500			1,500	200DB HY	3	0
64	TRAILER	6/21/95		2,400			2,400	S/L HY	5	0
65	1998 FORD WORK VAN	9/30/98		1,175			1,175	200DB HY	3	0
66	21 PASSENGER MINI BUS	6/01/01		1,000			1,000	200DB		0
67	1997 JEEP	2/15/02		6,000			5,564	200DB	5	58
68	2002 CHEVY VAN	5/22/02		23,400			20,974	200DB	5	647
69	2001 CHEVY 1 TON/DULY	5/23/02		25,300			22,677	200DB	5	699
153	'93 FORD VAN	9/30/99		1				200DB	5	0
154	'97 FORD EXPEDITION	10/01/00		1				200DB	5	0
155	'95 WELLS CARGO TRAILER	10/01/00		1				200DB	5	0
156	'91 FORD VAN	10/01/00		1				200DB	5	0
157	'78 CHEV TRUCK	9/30/01		1				200DB	5	0
158	'88 FORD BUS	9/30/05		1			1	200DB	3	0
159	'82 TOYOTA TRUCK	9/30/05		1				200DB	5	0
160	'99 FORD VAN	12/31/05		1,500			450	200DB	5	420
161	'06 CHEV VAN	2/21/06		29,380			6,855	200DB	5	9,010
164	'98 FORD WINDSTAR	9/30/06		6,000				200DB	5	2,400
	Total VEHICLES			99,462		0	64,396			13,234
	Total Depreciation			927,865		0	586,808			32,514
	Grand Total Depreciation			927,865		0	586,808			32,514

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.)

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

OMB No. 1545-0047

2006

Name of the organization	Employer identification number
TEEN CHALLENGE OF ARKANSAS, INC.	71-0420376

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 2 of the instructions. List each one. If there are 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 & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over $50,000 ▶				

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over $50,000 for professional services . . . . ▶		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over $50,000 for other services . . . . ▶		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Part III Statements About Activities (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ ______ (Must equal amounts on line 38, Part VI-A, or line of Part VI-B.)	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)*			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d		X
e	Transfer of any part of its income or assets?	2e		X
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a		X
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		X
b	Did the organization make any taxable distributions under section 4966?	4b		X
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		X

d Enter the total number of donor advised funds owned at the end of the tax year ▶ N/A

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ N/A

f 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 amounts in such funds or accounts ▶ N/A

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ N/A

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 ☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶ ______

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

11a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 ☒ An organization that normally receives: **(1) more than 33⅓%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and **(2) no more than 33⅓%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:

☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total . . . . ▶					

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Part IV-A 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.*

	Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	576,994	538,958	498,665	491,608	2,106,225
16	Membership fees received					0
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	189,098	133,005	150,084	111,584	583,771
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	863	695	610	1,294	3,462
19	Net income from unrelated business activities not included in line 18					0
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
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 public without charge					0
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					0
23	Total of lines 15 through 22	766,955	672,658	649,359	604,486	2,693,458
24	Line 23 minus line 17	577,857	539,653	499,275	492,902	2,109,687
25	Enter 1% of line 23	7,670	6,727	6,494	6,045	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶ **26a**

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 2002 through 2005 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ▶ **26b**

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ **26c**

d Add: Amounts from column (e) for lines: 18 ______ 19 ______ 22 ______ 26b ______ ▶ **26d**

e Public support (line 26c minus line 26d total) ▶ **26e**

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ **26f** %

27 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) 87,254 (2004) 69,655 (2003) 91,850 (2002) 53,000

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) ______ (2003) ______ (2002) ______

c Add: Amounts from column (e) for lines: 15 2,106,225 16 0 17 583,771 20 0 21 0 ▶ **27c** 2,689,996

d Add: Line 27a total 301,759 and line 27b total 0 ▶ **27d** 301,759

e Public support (line 27c total minus line 27d total) ▶ **27e** 2,388,237

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶ **27f** 2,693,458

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ **27g** 88.67 %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ **27h** 0.13 %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, 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)

N/A

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper 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 it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	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?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
	Use of facilities?	33f		
g	Athletic programs?	33g		
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.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
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.	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 10 of the instructions.) N/A
(To be completed ONLY by an eligible organization that filed Form 5768)

Check ▶ a ☐ if the organization belongs to an affiliated group. Check ▶ b ☐ if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table—	41		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

If the amount on line 40 is—	**The lobbying nontaxable amount is—**
Not over $500,000	20% of the amount on line 40
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B **Lobbying Activity by Nonelecting Public Charities** N/A
(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h.**)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

			Yes	No
a	Transfers from the reporting organization to a noncharitable exempt organization of:			
	(i) Cash	51a(i)		X
	(ii) Other assets	a(ii)		X
b	Other transactions:			
	(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
	(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
	(iii) Rental of facilities, equipment, or other assets	b(iii)		X
	(iv) Reimbursement arrangements	b(iv)		X
	(v) Loans or loan guarantees	b(v)		X
	(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☐ No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2006

Name of organization	**Employer identification number**
TEEN CHALLENGE OF ARKANSAS, INC.	71-0420376

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.** (**Note:** *Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule—see instructions.)*

General Rule—

☐ For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules—

☒ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33⅓% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of $5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than $1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year.) . . . . ► $ ____________

Caution: *Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they* **must** *check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).*

For Paperwork Reduction Act Notice, see the Instructions for Form 990, Form 990-EZ, and Form 990-PF.
ISA