



Filed  
 Secretary of State  
 State of Washington  
 Date Filed: 10/12/2023  
 Effective Date: 10/12/2023  
 UBI #: 605 341 694

**ARTICLES OF INCORPORATION**

**UBI NUMBER**

UBI Number: **605 341 694**

**BUSINESS NAME**

Business Name: **SPOKANE ADVENTIST RADIO KINSHIP**

**NONPROFIT GROSS REVENUE CERTIFICATION**

Did the Nonprofit Corporation certify that the Gross Revenue is less than \$500,000? - **Yes**

**CHARITABLE NONPROFIT CORPORATION**

Is the Nonprofit Corporation a Charitable Nonprofit as defined by [RCW 24.03A.010\(6\)](#)? - **Yes**

**PURPOSE OF CORPORATION**

**SAID ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER THE SECTION 501 (C) (3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE. THE BUSINESS ACTIVITY FOR SAID ORGANIZATION IS AS FOLLOWS: RELIGIOUS RADIO AND OTHER RELIGIOUS MEDIA BROADCASTING TO MEET COMMUNITY NEEDS.**

**PURPOSE OF CORPORATION - STAFF CONSOLE CONFIRMATION**

Customer provided purpose of corporation? - **Yes**

**ANY OTHER PROVISIONS**

Required by IRS for Tax Exempt Status <https://www.irs.gov/>:

**NO PART OF THE NET EARNINGS OF THIS ORGANIZATION SHALL INURE TO THE BENEFIT OF, OR BE DISTRIBUTABLE TO, ITS MEMBERS, TRUSTEES, OFFICERS, OR OTHER PRIVATE PERSONS, EXCEPT THAT THE CORPORATION SHALL BE AUTHORIZED AND EMPOWERED TO PAY REASONABLE COMPENSATION FOR SERVICES RENDERED AND TO MAKE PAYMENTS AND DISTRIBUTIONS IN FURTHERANCE OF THE PURPOSES SET FORTH HEREIN. NO SUBSTANTIAL PART OF THE ACTIVITIES OF THIS CORPORATION SHALL BE THE CARRYING ON OF PROPAGANDA, OR OTHERWISE - FULL TEXT ON FILE**

REGISTERED AGENT [RCW 23.95.410](#)

Registered Agent Name	Street Address	Mailing Address
NORTHWEST REGISTERED AGENT, LLC	522 W RIVERSIDE AVE STE N, SPOKANE, WA, 99201-0580, UNITED STATES	522 W RIVERSIDE AVE STE N, SPOKANE, WA, 99201-0580, UNITED STATES

REGISTERED AGENT CONSENT

Customer provided Registered Agent consent? \* - Yes

DURATION

Duration: PERPETUAL

EFFECTIVE DATE

Effective Date: 10/12/2023

MEMBERS [RCW 24.03A.010\(45\)](#)

Does the Nonprofit Corporation have members? - No

INITIAL BOARD OF DIRECTOR

Title	Initial Board of Director Type	Entity Name	First Name	Last Name	Address
INITIAL BOARD OF DIRECTORS	INDIVIDUAL		CASEY RYAN	HARMS	5124 S BEST LN, SPOKANE, WA, 99206-9319, UNITED STATES
INITIAL BOARD OF DIRECTORS	INDIVIDUAL		JAMES RICHARD	JEFFERY	11602 S GARDNER RD, CHENEY, WA, 99004-5195, UNITED STATES
INITIAL BOARD OF DIRECTORS	INDIVIDUAL		ANDREW STEPHEN	BEERMAN	PO BOX 777, RATHDRUM, ID, 83858-0777, UNITED STATES

INCORPORATOR

Title	Incorporator Type	Entity Name	First Name	Last Name	Address
INCORPORATOR ENTITY		LEGALZOOM.COM, INC.	CHEYENNE	MOSELEY	101 N BRAND BLVD FL 11, GLENDALE, CA, 91203-2638, UNITED STATES

INCORPORATOR SIGNATURE - ATTESTATION

By adding each Incorporator, the business attests that the incorporator signature(s) have been obtained.

INCORPORATORS SIGNATURE CONFIRMATION

Signature of each incorporator has been provided? - Yes

DISTRIBUTION OF ASSETS

UPON THE DISSOLUTION OF THIS CORPORATION, ASSETS REMAINING SHALL BE DISTRIBUTED FOR ONE OR MORE EXEMPT PURPOSES WITHIN THE MEANING OF SECTION 501(C) (3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, OR SHALL BE DISTRIBUTED TO THE FEDERAL GOVERNMENT, OR TO A STATE OR LOCAL GOVERNMENT, FOR A PUBLIC PURPOSE. ANY SUCH ASSETS NOT SO DISPOSED OF SHALL BE DISPOSED BY A COURT OF COMPETENT JURISDICTION OF THE COUNTY IN WHICH THE PRINCIPAL - FULL TEXT ON FILE

DISTRIBUTION OF ASSETS PROVIDED

Customer provided information on distribution of assets? - Yes

RETURN ADDRESS FOR THIS FILING

Attention:  
CHEYENNE MOSELEY

Email:  
**ONLINEFILINGS@LEGALZOOM.COM**

Address:  
**101 N BRAND BLVD FL 11, GLENDALE, CA, 91203-2638, UNITED STATES**

UPLOAD ADDITIONAL DOCUMENTS

---

<b>Name</b>	<b>Document Type</b>
Attachment.pdf	UPLOADED DOCUMENT

UPLOADED DOCUMENTS

---

<b>Document Type</b>	<b>Source</b>	<b>Created By</b>	<b>Created Date</b>
No Value Found.			

AUTHORIZED PERSON - STAFF CONSOLE

---

Document is signed.

Person Type:  
**ENTITY**

First Name:  
**CHEYENNE**

Last Name:  
**MOSELEY**

Entity Name:  
**LEGALZOOM.COM, INC.**

Title: