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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.

	FOI U	ne 2006 calendar year, or tax year beginning 0010 1, 2006 and	ending r	IAI 31, 2009	<u> </u>
В	Check if applicat	Please use IRS		D Employer identifi	ication number
Г	Addr	ess (label or mo TNTMV DIDIE COLLEGE			
Ē	Nam- chan	e hine -		45-0	306841
	Initia returi	See Number and street (or P.O. hox if mail is not delivered to street address)	Room/suite	E Telephone numbe	er
	Term	Instruc- 30 8 0111 AVE		(701)349-3621
	Amer	City or town, state or country, and ZIP + 4		G Gross receipts \$	5,306,538.
L	Appli tion pend	EDDENDADE, ND 30430		H(a) Is this a group re	
	polic	F Name and address of principal officer: JACK STROM		for affiliates?	Yes X No
_		SAME AS C ABOVE		H(b) Are all affiliates inc	
		tempt status: X 501(c) (3)			list. (see instructions)
		forganization X Corporation Trust Association Other	I Voor	of formation 1967	M State of legal domicile ND
	art 1	Summary	L Year	orionnation 1907	M State of legal domicile IND
<u></u>	1	Briefly describe the organization's mission or most significant activities: TRIN	ITY BI	BLE COLLEGE	IS A
Activities & Governance		BIBLICALLY BASED INSTITUTION OF HIGHER E			
rna	2	Check this box If the organization discontinued its operations or dispo	sed of more	than 25% of its asset	S.
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	23
ى ھ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	23
es	5	Total number of employees (Part V, line 2a)		5	475
Ĭ	6	Total number of volunteers (estimate if necessary)		6	273
Ac	7a	Total gross unrelated business revenue from Part VIII line 12 column 10)	7a	0.
	<u> </u>	Net unrelated business taxable income from Form 99b-T, line 34] S	7b	0.
_	8	Contributions and grants (Part VIII, line 1h) APR 2 1 2010		Prior Year 773,806.	Current Year 910, 414.
nue	9	Program service revenue (Part VIII, line 2g)	IOI	4,013,303.	4,375,167.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	구뜨	4,441.	20,957.
, œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and the		76,475.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,868,025.	5,306,538.
•	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		998,154.	1,043,322.
)	14	Benefits paid to or for members (Part IX, column (A), line 4)			
Se	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,507,505.	2,468,188.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 228, 59		 ,	
Exc	, , b			2,627,311.	2,520,946.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,132,970.	6,032,456.
	4	Revenue less expenses. Subtract line 18 from line 12		<1,264,945.	<725,918.>
Net Assets or	3	Trevented loop expenses respirate fine to frem line 12	· · · · · ·	Beginning of Year	End of Year
sets	20	Total assets (Part X, line 16)		6,881,262.	7,184,999.
ASS	21	Total liabilities (Part X, line 26)		4,137,896.	5,313,426.
		Net assets or fund balances. Subtract line 21 from line 20		2,743,366.	1,871,573.
P	art II	Signature Block			
		Under penalties of pen liry, I declare that I have examined this return, including accompanying schedules an and complete Declaration of preparer (other than officer) is based on all information of which preparer has a	d statements, a ny knowledge	and to the best of my knowledg	e and belief, it is true, correct,
۵.) Dansey		1 4/1	111/10
Sig		Signature of officer		Date //	14 / 10
He	re	JACK STROM, PRESIDENT		2010	,
		Type overint name and title		 ·	
		Preparer's Date			's identifying number
Pai			3/10 self	oloyed	tructions)
	parer's	Firm's name (or EIDE BAILLY LLP yours if		EIN ▶	
use	Only	self-employed), address and PO BOX 1914			
		ZIP+4 BISMARCK, ND 58502		Phone no ► 70	1-255-1091
Ma	y the If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

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

Form 990 (2008) TRINITY BIBLE COLLEGE Part IV Checklist of Required Schedules

			Yes	No.
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		v	
2	If "Yes," complete Schedule A	1	X	+
3	Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	2	^	+
3	public office? If "Yes," complete Schedule C, Part I			v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	├	$\frac{X}{X}$
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	—	┼	+ <u>^</u>
Ŭ	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice	-	+-	+-
•	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space.		-	 ^
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-	+	
•	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			 **
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	†
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	··•		<u> </u>
	If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			†
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	i
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity	,		•
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	<u> </u>
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.		17	
	If "No", go to question 25	24a	X	17
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	.		v
	any tax-exempt bonds?	24c		X
	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		<u>X</u>
258	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		v
h	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	<u>X</u>
Ų	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	OEL		X
26		25b		
LU	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	20		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial	26		
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	X	
		Form 9		20081
			14	

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		Х
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		Х
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			_
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		_X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			-
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

	to the second the second the second text of the sec					
				E	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		20			
	U.S. Information Returns. Enter -0- if not applicable	1a	28			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	ble gaming	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re (gambling) winnings to prize winners?	эропа	ble garning	1c	х	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	l i	•	1.5		
20	filed for the calendar year ending with or within the year covered by this return	2a	475			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2ь	Х	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see		ctions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covere		-	3a	1	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	•		3ь		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	author	rty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accou	nt)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign E	3ank a	nd			
	Financial Accounts.			ļ.,		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		_	5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	Regar	ding Prohibited		l	
6-	Tax Shelter Transaction?			5c		Х
	Did the organization solicit any contributions that were not tax deductible?		r cuffo	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contribution were not tax deductible?	ons o	girts	6ь	ļ	
7	Organizations that may receive deductible contributions under section 170(c).			OD		 , , ,
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than :	\$75?	7a	1	X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	.,,	V . •.	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as requ	ııred			
	to file Form 8282?	•	-	7c		X
đ	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a polynomial of the organization of the organ	ersona	al			
	benefit contract?			7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f_		X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C		•	7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sect					
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, or a fund maintained by a sponsoring organization.	janizai	ion, have		1	
9	excess business holdings at any time during the year? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			8		********
a	Did the organization make any taxable distributions under section 4966?			9a	1	
ь	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter: N/A				L	
а	1	10a				
ь		10b				
11	Section 501(c)(12) organizations. Enter: N/A					
а		11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b		,		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1	- 1		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b				
				Ca (200 /2	000

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	ction A. Governing Body and Management			
		·····	Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions			
1a	Enter the number of voting members of the governing body 1a 2.	3		
b	Enter the number of voting members that are independent 1b 2.	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	-	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
ь	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9ь		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII. Section A, who cannot be reached at the			[
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	1	X
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	ŀ	İ	
	to conflicts?	12b	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	X	<u></u>
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	<u></u>	X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		_	
а	The organization's CEO, Executive Director, or top management official?	15a	X	<u> </u>
Ь	Other officers or key employees of the organization?	15b	X	
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a	<u> </u>	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
<u>ec</u>	tion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filed ► NONE			
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
9	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, ar	nd fina	ancial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ion· 🕨	-	
	LARON WEGENER - BUSINESS OFFICE - 701-349-3621			
	50 6TH AVE S. ELLENDALE ND 58436			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not c	(B)	iy 0.	IICei		<u>601(</u> C)	<i>J</i> I, ((usie	(D)	(E)	(F)
Name and Title	Average			Pos		1		Reportable	Reportable	Estimated
	hours	(0	hec	k all	that	арр	oly)_	compensation	compensation	amount of
	per week	actor	Ì					from the	from related organizations	other compensation
	WOOK	, E	88			afed		organization	(W-2/1099-MISC)	from the
		Individual trustee or director	Institutional frustee	Ì	8	Highest compensated employee		(W-2/1099-MISC)		organization
		dCal	totto	1	Key employee	over co	ية		i	and related organizations
		Ē	重	Office	Ş	돌	Ē			organizations
SUPT. STEPHAN SCHAIBLE			İ							
CHAIRPERSON	1.50	Х		X				0.	0.	0.
REV. GARY WILEMAN		ĺ								
SECRETARY-TREASUER	1.00	X	<u> </u>	X		_		0.	0.	0.
SUPT. LEON FREITAG								_	_	
EXECUTIVE COMMITTEE MEMB	1.00	X		X		ļ		0.	0.	0.
SI LIECHTY	1 00	,		. I		ĺ		0		•
GARY RIFFE	1.00	X		X			-	0.	0.	0.
EXECUTIVE COMMITTEE MEMB	1.00	X		Х				0.	0.	0
HAROLD LARSON	1.00	^		Λ				0.	0.	0.
BOARD MEMBER	0.30	Х						0.	0.	0.
REV. RON BLAUVELT	0.00	-	\vdash					Ŭ.		
BOARD MEMBER	0.30	Х						0.	0.	0.
DR. RON ROCKWELL										
BOARD MEMBER	0.30	X						0.	0.	0.
REV. MARCUS BAKKE										
BOARD MEMBER	0.30	X						0.	0.	0.
REV. NATHAN JOHNSON										
BOARD MEMBER	0.30	X					_	0.	0.	0.
REV. SHAWN MADSEN	0 00			Ì			- 1			
BOARD MEMBER	0.30	X			_			0.	0.	0.
REV. NOLAN SANDERS BOARD MEMBER	0.30	x			ı		- 1	0.	0	0
REV. CLIFF SHELDON	0.30			\dashv				0.	0.	0.
BOARD MEMBER	0.30	X			ĺ		ı	0.	0.	0.
RANDY PADGETT	0.50		一		\dashv	\dashv				<u></u>
BOARD MEMBER	0.30	x						0.	0.	0.
REV. MARK ENTZMINGER			$\neg \uparrow$	\neg	$\neg \uparrow$	$\neg \dagger$	\neg			
BOARD MEMBER	0.30	X		ļ		- 1		0.	0.	0.
SONNY SCHRINER, JR							ヿ			
BOARD MEMBER	0.30	X						0.	0.	0.
DR. MARILYN KINGSRITER							T			
BOARD MEMBER	0.30	X			j			0.	0.	0.

Form **990** (2008)

Part VII Section A. Officers, Directors, Tre	ustees, Key E	mpl	oye	es, a	nd	High	est	Compensated Employ	rees (continued)	
(A)	(B)		(C)					(D)	(E)	(F)
Name and title	Average		Position (check all that apply)					Reportable	Reportable	Estimated
	hours	(0	hec	k all	that	app	oly)	compensation	compensation	amount of
	per week	director						from the	from related organizations	other
	Week	튬		l		Eg.	İ	organization	(W-2/1099-MISC)	compensation from the
		St.	ES .			Sas		(W-2/1099-MISC)	(** 2 1000 miles)	organization
		를	onalt	ĺ	a Sold	E 8		,		and related
		Individual trustee or	Institutional frustee	jā ij	Кеу ептрюуее	Highest compensated employee	ji ji			organizations
DEU MEGLEY WAGER	 	<u> </u>	-	<u> </u>	ľ	T 5	-			
REV. WESLEY VAGLE BOARD MEMBER	0.30	$ _{\mathbf{x}}$						0.	0	
REV. LARRY HALE	0.30	1	-	├	-	-	├			0.
BOARD MEMBER	0.30	Х			ŀ			0.	0	. 0.
REV. VERNAL DONNELL	0.30	1	+-	-	╁─			-		•
BOARD MEMBER	0.30	X			l			0.	0	. 0.
CONRAD TVEDT										
BOARD MEMBER	0.30	X						0.	0	. 0.
JOHN DYCK										
BOARD MEMBER	0.30	X					L	0.	0	. 0.
SUPT. LARRY H. GRISWOLD		١							_	
BOARD MEMBER	0.30	X	_	<u> </u>		ļ .		0.	0	. 0.
JACK STROM PRESIDENT	40.00	ĺ		X				62,154.	0	
WAYNE CLEMENS	40.00			Λ				02,134.		0.
BUSINESS MANAGER	40.00			х				19,540.	0	. 463.
										100
						Щ		01 604		163
1b Total					41	- 64		81,694.	0	. 463.
2 Total number of individuals (including those compensation from the organization	e in 1a) who re	ceiv	ea m	nore	tna	יול ח	UU,C	JUU in reportable		- 0
Compensation from the organization		·-								Yes No
3 Did the organization list any former officer,	director or tru	stee	, key	/ em	olar	yee,	or h	ighest compensated en	nployee on	
line 1a? If "Yes," complete Schedule J for s			•						. ,	3 X
4 For any individual listed on line 1a, is the su	m of reportable	le co	mpe	ensa	ition	and	oth	ner compensation from t	he organization	, ,
and related organizations greater than \$150			-							4 X
5 Did any person listed on line 1a receive or a				rom	any	unre	elate	ed organization for servi	ces rendered to	1 (
the organization? If "Yes," complete Schedu Section B. Independent Contractors	ule J for such p	oers	on					·		5 X
Complete this table for your five highest contractors	mnensated inc	tene	nde	nt c	ontr	acto	re ti	hat received more than 9	100 000 of compan	sation from
the organization. NONE	npensated inc	acpe	illuc	111 01	Oritio	acio	15 (1	nat received more than t	proofood or compen	Sation nom
(A)								(B)		(C)
Name and business	address					_	\perp	Description of se	ervices	Compensation
							+	<u> </u>		
							+			
							4			
									ļ	
2 Total number of independent contractors (in	ocludina these	ır. 4		<u> </u>		od -	1	than \$100 000 is see	eneation	······································
2 Total number of independent contractors (in from the organization	Ciuaing those	ut I	, wn	o re	celV	eu N	iore	; шан фтоо,ооо in comp	PENSAUUII	
									<u></u>	Form 990 (2008)

			(2008) IKIN.	TIT DIDT	r COTITEGE	<u> </u>		45-0306	O41 Page S
P	ırt	VII	II Statement of Reve	nue		·1			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts s		1 a	Federated campaigns	1a					
Fa S		b	Membership dues	1b					
s, g		c	Fundraising events	1c					
git ar		d	Related organizations	1d					
Ş.E		е	Government grants (contribut	tions) 1e					
ıtio er s		f	All other contributions, gifts, grar						
혈충			similar amounts not included abo	ove 1f	910,414.				
Contributions, gifts, grants and other similar amounts		9	Noncash contributions included in lines	s 1a-1f \$		0.10	ì		
<u>ပ </u>	ļ	<u>h</u>	Total. Add lines 1a-1f		<u> </u>	910,414.]		
	1		MULTITON C CHURT	nim annii	Business Code	1 452 475	la 450 475 l	1	
Program Service Revenue		2 a			611710	3,453,475.	3,453,475. 921,692.		
Ę Ś		þ		<u>1E</u>	611/10	921,692.	921,092.		
E E		C						-	
쨢		d							
<u> </u>		f	All other program service reve	anua .				_	
			Total. Add lines 2a-2f	51100		4,375,167.		<u></u>	
	3		Investment income (including	dividends, inter					·
			other similar amounts)	,	>	19,087.		1	19,087.
	4	1	Income from investment of ta	x-exempt bond	oroceeds >				,
	5	5	Royalties		<u> </u>		·		
				(i) Real	(ii) Personal				
	•	àa	Gross Rents						
		b	Less: rental expenses						
		С	Rental income or (loss)	L	<u> </u>		1 1	4	
					. •				······
	7	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory		1,870.				
		D	Less: cost or other basis						
		С	and sales expenses Gain or (loss)		1,870.				
			Net gain or (loss)		>	1,870.	1	1	1,870.
	8		Gross income from fundraising	a events (not		•		······································	
Š			including \$						
ě.			contributions reported on line						
<u> </u>			Part IV, line 18	а					
Other Revenue		b	Less: direct expenses	b			ı E		
			Net income or (loss) from fund						
	9	a	Gross income from gaming ac	tivities. See					
			Part IV, line 19	а					
			Less: direct expenses	b	L	ı	1	1	
	40		Net income or (loss) from gam	-	· •				······································
	10	a	Gross sales of inventory, less and allowances		}				
				a b					
			Less: cost of goods sold Net income or (loss) from sale	_	L	ı	1	1	
		-	Miscellaneous Revenue		Business Code	I		1	
Ì	11	а	TVIISCEIIAI ICOUS TTEVETU				1	1	
ļ	•	b							
		С							
		d	All other revenue	· · ·					
		e	Total. Add lines 11a-11d	-	•			·	
- 1	12		Total Revenue Addition to 35 2	4 6 64 74 84 64 6- 46		5.306.538.4	4.375.167.	0.	20.957.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp		not required to complete		(D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,043,322.	1,043,322.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16		Ī		
4	Benefits paid to or for members				-
5	Compensation of current officers, directors,				
	trustees, and key employees	37,307.		31,688.	5,619.
6	Compensation not included above, to disqualified	·			7,200
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,095,393.	1,651,247.	341,339.	102,807.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	74,975.	66,584.	4,622.	3,769. 17,163.
9	Other employee benefits	171,633.	122,641.	31,829.	17,163.
10	Payroll taxes	88,880.	77,099.	11,109.	672.
11	Fees for services (non-employees):				
a	Management				
b	<u> </u>	17,886.		17,886.	
ن م	Accounting Lobbying	17,000.		17,000.	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	72,196.	72,196.		
12	Advertising and promotion	45,236.	11,415.	7,754.	26,067.
13	Office expenses	166,792.	127,702.	24,924.	14,166.
14	Information technology	83,061.	36,714.	29,514.	16,833.
15	Royalties .				
16	Occupancy	681,607.	497,583.	180,492.	3,532.
17	Travel	166,856.	85,272.	53,141.	28,443.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0 620	402	0 155	
19	Conferences, conventions, and meetings	9,638. 59,035.	483.	9,155. 14,759.	
20	Interest .	39,033.	44,2/0.	14,759.	
21 22	Payments to affiliates Depreciation, depletion, and amortization	369,194.	258,436.	107,066.	3,692.
23	Insurance	60,462.	58,103.	2,359.	3,092.
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	00,1023	30,1031	27337.	
а	AUXILIARY EXPENSES	464,237.	464,237.		
b	STUDENT PROGRAMS	93,270.	46,932.	45,338.	1,000.
С	BAD DEBT EXPENSE	62,050.	62,050.		
d	DUES & SUBSCRIPTIONS	57,916.	7,215.	50,411.	290.
е	EQUIPMENT & REPAIRS	57,169.	54,149.	2,913.	107.
f	All other expenses	54,341.	33,414.	16,489.	4,438.
<u>25</u>	Total functional expenses. Add lines 1 through 24f	6,032,456.	4,821,070.	982,788.	228,598.
26	Joint Costs. Check here Lift following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				5 000 (500)

							
					(A)		(B)
	г				Beginning of year	 	End of year
	1	Cash - non-interest-bearing			64,980.		4,584
	2	Savings and temporary cash investments		}	29,948.		136,265.
	3	Pledges and grants receivable, net			48,340.	3	100 102
	4	Accounts receivable, net	4	4	40,340.	4	198,103.
	5	Receivables from current and former officers, dir		• •		_	
	6	employees, or other related parties. Complete Pa		Ē		5	<u> </u>
		Receivables from other disqualified persons (as 4958(f)(1)) and persons described in section 495 Part II of Schedule L		Į.		١	I
(A	7	Notes and loans receivable, net			936,513.	7	944,358.
Assets	8	Inventories for sale or use		-	82,296.		83,655.
As	9	Prepaid expenses and deferred charges	• • •	1	12,795.		15,975.
	10a	· · · · · · · · · · · · · · · · · · ·	10a	9,857,401.	12,175.	<u> </u>	13,313.
	i .	Less: accumulated depreciation. Complete	100	3,03,,101.			
		Part VI of Schedule D	10ь	5,122,367.	4,592,536.	100	4,735,034.
	11	Investments - publicly traded securities	100	3/122/33/3	974,869.		834,660.
	12	Investments - other securities. See Part IV, line 1	1		3.170030	12	031,000.
	13	investments - program-related. See Part IV, line 1		ļ		13	
	14	Intangible assets	•	ļ		14	
	15	Other assets. See Part IV, line 11		·	138,985.		232,365.
	16	Total assets. Add lines 1 through 15 (must equa	l line 34	4)	6,881,262.		7,184,999.
	17	Accounts payable and accrued expenses			455,462.	17	543,396.
	18	Grants payable		Ī	· ·	18	
	19	Deferred revenue			. 	19	
Se	20	Tax-exempt bond liabilities			1,545,167.	20	1,520,213.
	21	Escrow account liability. Complete Part IV of Sch	edule [o "'' [9,915.	21	11,431.
≝	22	Payables to current and former officers, directors	, truste	ees, key employees,			
Liabilities		highest compensated employees, and disqualifie	d perso	ons. Complete Part II			
		of Schedule L				22	
	23	Secured mortgages and notes payable to unrelat	d parties	1,215,792.	23	2,256,020.	
	24	Unsecured notes and loans payable		<u></u>		24	
	25	Other liabilities. Complete Part X of Schedule D		Ĺ	911,560.	25	982,366.
	26	Total liabilities. Add lines 17 through 25			4,137,896.	26	5,313,426.
		Organizations that follow SFAS 117, check her	e 🕨	X and complete			
es		lines 27 through 29, and lines 33 and 34.					
anc	27	Unrestricted net assets		L	1,268,297.	27	605,800.
Ba	28	Temporanly restricted net assets			1,084,212.	28	874,916.
פ	29	Permanently restricted net assets		ļ.,	390,857.	29	390,857.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, ch	eck he	re 🕨 🔛 and			
, O		complete lines 30 through 34.			1	1	
sets	30	Capital stock or trust principal, or current funds		-		30	
As	31	Paid in or capital surplus, or land, building, or equ		-		31	
Vet	32	Retained earnings, endowment, accumulated inc	ome, o	r other funds	2 742 266	32	1 071 572
-	33	Total net assets or fund balances		.	2,743,366.	_33	1,871,573.
D	34	Total liabilities and net assets/fund balances		<u></u>	6,881,262.	34	7,184,999.
Pai	t XI	Financial Statements and Reporting					Yes No
			٦.	. .			Tes No
1		unting method used to prepare the Form 990:	_ Cas		Other		
2a		the organization's financial statements compiled of		•	ccountant7		2a X
b		the organization's financial statements audited by		· ·	duda é se és		2b X
С		s' to lines 2a or 2b, does the organization have a			•	audit,	1 1 1
2-		w, or compilation of its financial statements and se		•	-		2c X
зa		result of a federal award, was the organization requ nd OMB Circular A-133?	urea to	undergo an audit or audi	is as set forth in the Singl	e Aud	
				Heno			3a X 3b X
		s," did the organization undergo the required audi	or auc	JI(S f			
32011	12-18-	us					Form 990 (2008)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

2008
Open to Public Inspection

Name of the organization

TRINITY BIBLE COLLEGE Employer identification number 45-0306841

Part I	Reason	for Public Cha	rity Status (All organi	zations m	ust comple	ete this pa	rt.) (see in	structions)			
The organ	ization is not	a private foundation	because it is: (Please cl	heck only	one organ	ızatıon.)		-				
1 📋			es, or association of chui	_	_	-	O(b)(1)(A)(i).				
2 X			70(b)(1)(A)(ii). (Attach So				- 1-71-71-71					
3			ital service organization		•	n 170/h\/1	ΛΑ Μίίὶ (Δ	ttach Sch	adula H)			
4			operated in conjunction						•	he hospite	d'o nom	
	city, and sta		oporación in conjunction		opital door),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0(0)(1)(~)(my. Eriter t	ne nospite	u S IIaiii	€,
5			benefit of a college or u	nwarety c	wood or o	porated b			ut dooomb			
J		0(b)(1)(A)(iv). (Compl		illiversity C	Wiled Of O	perated b	y a goven	imental ul	iit describe	ao in		
• [47001	41/41/					
7			nent or governmental un									
′ ⊔			ceives a substantial part	of its sup	port from a	a governm	ental unit	or from th	e general p	oublic desc	onbed in	ገ
•		(b)(1)(A)(vi). (Comple		6								
8 📙			section 170(b)(1)(A)(vi).									
9			ceives: (1) more than 33							-	•	
			nctions - subject to certa							-		
	income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.											
40	See section 509(a)(2). (Complete the Part III.)											
10	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)											
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that											
							2). See se	ction 509	(a)(3). Che	ck the box	(that	
			organization and compl		_				_	ı		
	a Type				e III - Fund		-			Type III - 0		
e			at the organization is not									1
_			han one or more publich						9(a)(1) or s	ection 509	}(a)(2).	
f			tten determination from	the IRS th	at it is a Ty	/pe I, Type	II, or Typ	e III				_
		rganization, check th										
9			organization accepted ar			_						
	(i) A perso	n who directly or ind	lirectly controls, either al	lone or tog	jether with	persons of	described	ın (ii) and	(iii) below,		Yes	No
	-		upported organization?							11g(i)		
	(ii) A family	member of a persor	n described in (i) above?	•						11g(ii)		
	(iii) A 35%	controlled entity of a	person described in (i) o	or (ii) abov	e? .					11g(iii)	\perp	
h	Provide the f	ollowing information	about the organizations	the organ	ization su	oports.						
			·····			· · · · · ·			···			
(i) Name (of supported	(ii) EIN	(iii) Type of organization		organization				the	(vii) An	nount of	
orgai	nization		(described on lines 1-9		sted in your		ion in col.	organizati (i) organiz U S	ed in the		port	
			above or IRC section		document?		support?					
			(see instructions))	Yes	No	Yes	No	Yes	No			
]	1			
				İ]	1 1			
												
									1 1			
								_				
									1			
								İ				
			······································	······································	·····	777		•				
Fotal									1			

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

	edule A (Form 990 or 990-EZ) 2008						Page 2
Pa	Support Schedule for				0(b)(1)(A)(iv) ar	id 170(b)(1)(A)(vi)
<u></u>	(Complete only if you checke	ed the box on line :	o, /, or 8 of Part I.				
	ction A. Public Support	(-) 0004	410005	4-1-0000	4.0.0007	(10000	1 42 7
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
•	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-					<u> </u>	
2	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities			<u> </u>		 	
•	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 · 3					_	
5	The portion of total contributions		·····				
_	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public Support. Subtract line 5 from line 4						
Sec	tion B. Total Support	•					
Cale	endar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties					[[
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on				- 		
10	Other income. Do not include gain						
	or loss from the sale of capital	i					
	assets (Explain in Part IV.)			l			
	Total support. Add lines 7 through 10					<u></u>	
	Gross receipts from related activities,					[12]	
13	First five years. If the Form 990 is for	•	tirst, secona, thi	a, tourth, or titth to	ax year as a sectio	n 501(c)(3)	_
Sec	organization, check this box and store ition C. Computation of Publ		rcentage				
	Public support percentage for 2008 (column (fl)		14	
	Public support percentage from 2007			Column (1))		15	
	33 1/3% support test - 2008. If the c			 n line 13 and line	14 is 33 1/3% or a		
	stop here. The organization qualifies				141500 17070 0111	iore, ericek triis be.	▶ □
	33 1/3% support test - 2007. If the c		•		Lline 15 is 33 1/3%	or more check th	e box
	and stop here. The organization qual					or more, encer an	▶ □
	10% -facts-and-circumstances tes		• • •		e 13, 16a, or 16b a	 and line 14 is 10% (or more.
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					non me organi	▶
	10% -facts-and-circumstances test				-	7a, and line 15 is 1	0% or
	more, and if the organization meets the						
	organization meets the "facts-and-circ				· ·		▶□
	Private foundation. If the organization		-	•			. →
						dule A (Form 990)	

20	art III Support Schedule for (ction A. Public Support						OX OII IIIIO 3 OI I BIL I
		(-) 0004	(h) 0005	(-) 0000	1 4 0 0007	1 1 1 2 2 2 2	T
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
'	Gifts, grants, contributions, and						
	membership fees received. (Do not						
_	include any "unusual grants.")		 	ļ			·
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						ľ
	iness under section 513						1.
4	Tax revenues levied for the organ-				ľ		
	ızation's benefit and either paid to						
	or expended on its behalf	L					
5	The value of services or facilities						
	furnished by a governmental unit to					İ	
	the organization without charge			i		1	
6	Total. Add lines 1 · 5	1					· -
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons			1			
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	Add lines 7a and 7b				-		
8	Public support (Subtract line 7c from line 6)						
Se	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12)						
	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3) organiz	ation,
	check this box and stop here						_ ▶□
Sec	tion C. Computation of Publi	c Support Pe	rcentage				
15	Public support percentage for 2008 (I	ne 8, column (f) d	vided by line 13, c	olumn (f))		15	%
	Public support percentage from 2007			• • • • • • • • • • • • • • • • • • • •		16	%
	tion D. Computation of Inves						
	Investment income percentage for 20			e 13, column (fl)		17	%
	Investment income percentage from 2			1.,,	· F	18	
	33 1/3% support tests - 2008. If the						
	more than 33 1/3%, check this box ar						/ is not ▶□
.	33 1/3% support tests - 2007. If the						- —
	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization						
	ste roundation. Il tile organization	i did not check a l		i, or 190, check th			or 990-EZ) 2008

Schedule D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008 Open to Public Inspection

Name of the organization

TRINITY BIBLE COLLEGE

Employer identification number 45-0306841

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year -Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures. or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Sche	edule D (Form 990) 2008 TRINITY	BIBLE COLLEGE	E		45-0306841 Page:
Pa	rt III Organizations Maintaining Co	ollections of Art, Hi	storical Treasures,		
3	Using the organization's accession and other	records, check any of the	following that are a signi	ficant use of its col	lection items (check all
	that apply):		_		
а	Public exhibition	d	Loan or exchange progr	rams	
b	Scholarly research	е 🗀	Other	<u> </u>	
c	Preservation for future generations				
4	Provide a description of the organization's coll	lections and explain how	they further the organizat	ion's exempt purpo	ose in Part XIV.
5	During the year, did the organization solicit or	receive donations of art,	historical treasures, or oth	ner sımılar assets	
	to be sold to raise funds rather than to be main				Yes No
Pa	rt IV Trust, Escrow and Custodial		plete if organization answ	ered "Yes" to Form	n 990, Part IV, line 9, or
	reported an amount on Form 990, Part				
1a	Is the organization an agent, trustee, custodia	n or other intermediary fo	r contributions or other a	ssets not included	
	on Form 990, Part X?				Yes X No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the following	ı table:		
				 	Amount
C	Beginning balance			1c	
d	Additions during the year			1d	
e	Distributions during the year	-		1e	
1	Ending balance				[v].
2a	Did the organization include an amount on For	m 990, Part X, line 21?			X Yes No
Pa	If "Yes," explain the arrangement in Part XIV.		I A- F 000 P+ IV		
F F 481	· · · · · · · · · · · · · · · · · · ·			<u> </u>	
4.		(a) Current year (b) 203,826.	Prior year (c) Two yea	rs dack (d) Inree y	ears back (e) Four years back
1a	Beginning of year balance	203,020.			
D -	Contributions	688.			
C L	Investment earnings or losses				
a	Grants or scholarships				
е	Other expenditures for facilities	693.			
	and programs Administrative expenses	0,53.			
'	End of year balance	203,821.			
9 2	Provide the estimated percentage of the year				
٠,	Board designated or quasi-endowment	%			
- A	Permanent endowment ► 100.00				
•	Term endowment ▶ %				
3a	Are there endowment funds not in the possess		at are held and administe	ared for the organiz	ation
oa	by:	sion of the organization th	at are field and administe	sted for the organiza	
	(i) unrelated organizations				Yes No 3a(i) X
	(ii) related organizations				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
h	if "Yes" to 3a(ii), are the related organizations li	isted as required on Scho	dula R2	•	3a(ii) X
4	Describe in Part XIV the intended uses of the o				30
	t VI Investments - Land, Buildings			10	
	Description of investment	(a) Cost or other	(b) Cost or other	(c) Depreciation	n (d) Book value
	Description of investment	basis (investment)	basis (other)	(c) Depreciation	(d) book value
12	Land		380,536.		380,536.
	Buildings		7,409,952.	3,468,38	
	Leasehold improvements		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3/100/30	710 3171177110
	Equipment		2,066,913.	1,653,98	36. 412,927.
	Other		2,000,013.	1,000,00	**********
	Add lines 1a-1e (Column (d) should equal Form	n 990 Part Y column /Pl	line 10(c))		► 4.735.034.

Schedule D (Form 990) 2008

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

ightharpoonup

Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)

982,366.

Sche	dule D (Form 990) 2008 TRINITY BIBLE COLLEGE			45-	0306841	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Financi	al Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		5,306	,538.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		6,032	,456.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		<725	
4	Net unrealized gains (losses) on investments		4		<145	,875.
5	Donated services and use of facilities		5			
6	Investment expenses		6			-
7	Prior period adjustments		7	_		
8	Other (Describe in Part XIV)		8			
9	Total adjustments (net). Add lines 4-8		9		<145	875.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10		<871,	793.
Par	XII Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per	Retur		
1	Total revenue, gains, and other support per audited financial statements	-	•	1	5,160,	,663.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a	<145,875	·>		
b	Donated services and use of facilities	2b		_		
C	Recoveries of prior year grants	2c		_		
d	Other (Describe in Part XIV)	2d		_		
е	Add lines 2a through 2d			2e	<145,	
3	Subtract line 2e from line 1			3	5,306,	538.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_		
b	Other (Describe in Part XIV)	4b		_		
C	Add lines 4a and 4b			4c		0.
_ 5_	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)			5	5,306,	538.
Par	t XIII Reconciliation of Expenses per Audited Financial Statem	ents Wit	<u>h Expenses pe</u>	r Retu		
1	Total expenses and losses per audited financial statements			1	<u>6,032,</u>	456.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	_2a		4 1		
Ь	Prior year adjustments	2b		4 1		
C	Losses reported on Form 990, Part IX, line 25	2c		_		
d	Other (Describe in Part XIV)	2d		_		_
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1	•		3	6,032,	<u>456.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		4 1		
Ь	Other (Describe in Part XIV)	4b	··· ·	4 1		_
	Add lines 4a and 4b	•		4c		0.
	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)			5	6,032,	<u>456.</u>
•	t XIV Supplemental Information		-			
	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	l, lines 1a a	and 4; Part IV, lines	1b and 2	2b; Part V, line 4	l; Part
	t XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	TEDED	OT UDG OF			
PAR	T IV, LINE 2B: TRINITY BIBLE COLLEGE CHAR	TERED	CLUBS, ST	ODEN.	<u>1' </u>	
ACA	DEMIC ASSOCIATIONS, AND APPROVED FACULTY	AND SI	AFF ASSOC	IATIO	ONS HAVE	
EST	ABLISHED AGENCY ACCOUNTS.					
PAR	T V, LINE 4: ACCUMULATIONS TO THE PERMANEN	NT END	OWMENT AR	E ADI	DED TO	
THE	FUND. THE REMAINING PORTION OF THE ENDOWN	MENT F	UND THAT	IS NO	OT	
CLA	SSIFIED AS PERMANENTLY RESTRICTED NET ASSE	ETS AR	E APPROPR	IATEI	FOR	
EXP	ENDITURE BY THE COLLEGE.					
				0	. 5 =	01 0000

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

► To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2008 Open to Public Inspection

Name of the organization Employer identification number TRINITY BIBLE COLLEGE 45-0306841 YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws. X other governing instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? X 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? If "Yes," please describe. If "No," please explain SEE STATEMENT 1 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? X 4b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? Х 4c X d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? X 5h c Employment of faculty or administrative staff? X d Scholarships or other financial assistance? X 5d X e Educational policies? Use of facilities? X 5f X g Athletic programs? 5a h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? STATEMENT 2 If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of

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Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

Schedule E (Form 990 or 990-EZ) 2008

SCHEDULE I			to a to a to	Strains Assistant				OMB No 1545-0047	5-0047
			Governn	Governments, and Individuals in the U.S.	tuals in the U.S.	ń		2008	•
Department of the Treasury Internal Revenue Service		▼ Comp	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.	on answered "Yes," on F ► Attach to Form 990.	," on Form 990, P. m 990.	art IV, lines 21 or 22.		Open to Public Inspection	ublic
Name of the organization	TRINITY	BIBLE COLLEGE	EGE.				Em	Employer identification number	number 6841
Part General In	General Information on Grants and Assistance	nd Assistance						200	
1 Does the organiz	zation maintain records to	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection		
criteria used to a	criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	stance?	torro to sell set point.	Stall odt a stant	,			X Yes	%
돌	Grants and Other Assistance to Governments and Organization	Governments and	d Organizations in the	9 United States. C	omplete if the organic	V" berewered "V	s in the United States. Complete if the organization answered "Yes" on Form 000 Bort IV line 21 for any	log 21 for only	
,	hat received more than \$	55,000. Check this	s box if no one recipien	it received more th	<u>ıan</u> \$5,000. Use Pa	art IV and Schedule I-	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	space is needed	×
1 (a) Name and ad or gov	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	ţ
2 Enter total number 3 Enter total number	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	nd government or	ganizations						
LHA For Privacy Act	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notice,	see the Instructions 1	for Form 990.				Schedule I (Form 990) 2008	90) 2008

Page 2

45-0306841 Schedule I (Form 990) 2008 TRINITY BIBLE COLLEGE

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
PRIVATE SCHOLARSHIPS	81	130,012.	o		
TRINITY SPOUSE WAIVER	2	1,875.	.0		
MEET THE NEED SCHOLARSHIP	2	2,000	.0		
DEPENDENT OF A/G MISSIONARY		8,864.	0.		
PRESIDENT'S POCKET SCHOLARSHIP	24	21,000.	.0		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	de the informatic	in required in Part I,	line 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: THE MAJORI	TY	OF GRANTS A	AND ASSISTANCE	NCE IS	
ADMINISTERED ACCORDING TO THE POLI	POLICIES IN	PLACE FROM THE	THE FUNDING	NG SOURCE.	
TYPICALLY, THE GRANT MONEY IS RECE	RECEIVED BY	THE COLLEG	COLLEGE AND IS APPLIED	PPLIED	
DIRECTLY TO THE STUDENT'S ACCOUNT.	THE	FEDERAL WORK-STUDY		PROGRAM DOES	
ALLOW MONEY TO BE DISTRIBUTED DIRECTLY	TO T	THE STUDENT.	Ţ.		

Schedule I-1 (Form 990) 2008 TRINITY BIBLE COLLEGE Part III Continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule I (Form 990)) Part III)	COLLEGE	(Schedule I (Form 90	OO) Dart III.)		45-0306841 Page 2
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
FEDERAL WORKSTUDY MATCH	143	38F A0 L	c		
BOARD OF REGENTS SERVICE	6	47,358,	0		
DIST ED SCHOLARSHIPS COMBINED	53.	112,353.	°,		
RELATIONAL BUILD SCHOLARSHIP	68.	59,125.	.0		
PRESIDENT'S SCHOLARSHIP	6.	67,375.	0		
EXTRA-CURRICULAR BUILD SCHOLARSHIP	211.	236,428.	0		
ACADEMIC BASE SCHOLARSHIP	213.	383,380.	0		
EMPLOYEE SERVICE WAIVER	7.	45,048.	.0		
					Schedule I-1 (Form 990) 2008

SCHEDULE J (Form 990)

Compensation Information

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

Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23. OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

TRINITY BIBLE COLLEGE

Employer identification number 45-0306841

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
ь	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision			
	of all of the expenses described above? If "No," complete Part III to explain	16	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X	<u> </u>
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a:			
а	Description of the second of control payment?	4a		<u>X</u> _
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	2	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:		ı	ı
а	The organization?	_5a		X_
b	Any related organization?	5b	<u> </u>	X
	If "Yes," to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			1
а	The organization?	<u>6</u> a		X
	Any related organization?	6b	<u></u>	X
	If "Yes" to line 6a or 6b, describe in Part III.		l	ı
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		<u> </u>

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2008

45-0306841

Schedule J (Form 990) 2008

Part If Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii).

Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(l)-(D)	reported in prior Form 990 or Form 990-EZ
	8	62,15	0	0	0	0	62,154.	0
JACK STROM	⊜	0	0	0	0	0	0	0
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Schedule J (Form 990) 2008

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PART I, LINE 1A: PRESIDENT STROM IS PROVIDED HOUSING BY THE COLLEGE. THIS
IS PART OF HIS EMPLOYMENT POLICY AND IS APPROVED BY THE BOARD EACH YEAR.
COMPENSATION FOR JACK STROM IS RECEIVED FROM HERITAGE
MINISTRIES, INC, AN UNRELATED ORGANIZATION.
COMPENSATION RECEIVED FROM UNRELATED ORGANIZATION:
JACK STROM
NONEMPLOYEE COMPENSATION: \$62,154

Department of the Treasury Internal Revenue Service SCHEDULE K Form 990)

Name of the organization

Supplemental Information on Tax-Exempt Bonds

Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a
 Provide descriptions, explanations, and any additional information on Schedule O (Form 990)

OMB No. 1545-0047 Open to Public Inspection

Schedule K (Form 990) 2008 (h) On behalf **Employer identification number** ŝ × of Issuer ŝ ŝ Yes ш 45-0306841 Yes (g) Defeased Yes Š × Yes ž ş 1,600,000.EQUIPPING OF STUDEN AND (f) Description of purpose ۵ Ω Yes Yes CONSTRUCTION S ŝ ပ O FOR COLUMN (F) CONTINUATIONS Yes Yes (e) Issue price 2 윈 45-6002064|000000000| 03/16/06 | 8 (d) Date issued 82721 12-19-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Foरेनी 990. Kes Yes 2 ş (c) CUSIP # Yes Yes SEE SCHEDULE TRINITY BIBLE COLLEGE (b) Issuer EIN Are there any lease arrangements with respect to the financed Does the organization maintain adequate books and records Was the organization a partner in a partnership, or a member Were the bonds issued as part of a current refunding issue? of an LLC, which owned property financed by tax-exempt Were the bonds issued as part of an advance refunding property which may result in private business use? Has the final allocation of proceeds been made? Part III Private Business Use (Optional for 2008) NORTH Proceeds in refunding or defeasance escrows Working capital expenditures from proceeds to support the final allocation of proceeds? Bond Issues (Required for 2008) Capital expenditures from proceeds ELLENDALE, Proceeds (Optional for 2008) Gross proceeds in reserve funds Issuance costs from proceeds Year of substantial completion (a) Issuer name Other unspent proceeds Total proceeds of issue CITY OF A DAKOTA Parti 6 9 뒤 N N 2 ш æ 얼 8 ပ ۵

SCHEDULE L

Department of the Treasury

(Form 990 or 990-EZ)

Transactions with Interested Persons Attach to Form 990 or Form 990-EZ.

To be completed by organizations that answered

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Internal Revenue Service

"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, lines 38a or 40b.

Name of the organization Employer identification number 45-0306841 TRINITY BIBLE COLLEGE Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. 1 (c) Corrected? (a) Name of disqualified person (b) Description of transaction Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. (f) Approved by board or (g) Written (a) Name of interested (b) Loan to or from (e) In (c) Original principal (d) Balance due the organization? default? person and purpose amount agreement? committee? To From Yes No Yes No Yes No Total Part III **Grants or Assistance Benefiting Interested Persons.** To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (c) Amount of grant or type (b) Relationship between interested person and the organization of assistance BARBARA STROM FAMILY RELATIONSHIP: WIFE OF P TUITION WAIVER **Business Transactions Involving Interested Persons.** To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 28a, 28b, or 28c (e) Sharing of (a) Name of interested person (b) Relationship between interested (c) Amount of (d) Description of organization's person and the organization transaction transaction revenues? Yes No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule L (Form 990 or 990-EZ) 2008

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

NonCash Contributions

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

TRINITY BIBLE COLLEGE

Employer identification number 45-0306841

Pa	rt I Types of Property									
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported Form 990, Part VIII, I			(d) Method of de reven	eterminı	ng	
1	Art · Works of art		-							
2	Art · Historical treasures								_	
3	Art · Fractional Interests									
4	Books and publications						 -		<u> </u>	
5	Clothing and household goods									
6	Cars and other vehicles									
7	Boats and planes						·			
8	Intellectual property					-				
9	Securities - Publicly traded									
10	Securities - Closely held stock									
11	Securities - Closely field stock Securities - Partnership, LLC, or									
••	trust interests									
12	Securities · Miscellaneous					-				
13	Qualified conservation contribution		_				••	_		
	(historic structures)									
14	Qualified conservation contribution (other)									
15	Real estate · Residential	Х	1	45,0	00.	FAIR	MARKET	VALU	JE	
16	Real estate - Commercial								=	
17	7 Real estate · Other									-
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies									
21	Taxidermy								-	
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other • ()									
26	Other									
27	Other • ()	-								
28	Other (
29	Number of Forms 8283 received by the organiz	zation during	the tax year f	or contributions						
	for which the organization completed Form 828	33, Part IV, [Oonee Acknow	ledgment	29				0	
									Yes	No
30a	During the year, did the organization receive by	contributio	n any property	reported in Part I, lin-	es 1-28	that it m	ust hold for			
	at least three years from the date of the initial of	contribution,	and which is r	not required to be use	d for ex	empt pu	rposes for			
	the entire holding period?						-	30a		X
b	If "Yes," describe the arrangement in Part II.									
31	Does the organization have a gift acceptance p	colicy that re	quires the revi	ew of any non-standa	rd cont	nbutions	?	31		X
32a	Does the organization hire or use third parties of	or related or	ganizations to	solicit, process, or sel	li nonca	sh				
	contributions?			-				32a		X
b	If "Yes," describe in Part II.									
33	If the organization did not report revenues in co	olumn (c) for	a type of prop	erty for which column	n (a) is c	hecked,				
	describe in Part II.									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2008

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

832211 12-18-08

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

TRINITY BIBLE COLLEGE

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

Employer identification number 45-0306841

OTHER	PROGRAMS	RELATED	то	RELIGIOUS	HIGHER	EDUCATION		
						· -· -	-	

FORM 990, PART VI, SECTION A, LINE 1: THERE SHALL BE AN EXECUTIVE COMMITTEE COMPRISED OF THE OFFICERS OF THE BOARD OF REGENTS, THE PRESIDENT OF THE COLLEGE, AND THE SUPERINTENDENTS OF THE SPONSORING DISTRICTS AND ANY OTHERS AS APPROVED BY THE BOARD OF REGENTS. THE EXECUTIVE COMMITTEE SHALL HAVE POWER TO TRANSACT THE NECESSARY BUSINESS OF THE BOARD OF REGENTS BETWEEN REGULAR MEETINGS. A FULL REPORT OF ALL SUCH TRANSACTIONS SHALL BE MADE TO THE BOARD AT THE NEXT REGULAR MEETING. THE EXECUTIVE COMMITTEE SHALL MEET EACH YEAR IN THE FALL AND SPRING AS NEEDED.

FORM 990, PART VI, SECTION A, LINE 10: UPON RECEIPT OF THE DRAFT 990. ORGANIZATION WILL PROVIDE A COPY TO THE BOARD OF REGENTS FOR THEIR REVIEW AND COMMENT.

FORM 990, PART VI, SECTION B, LINE 12C: ANY DIRECTOR, PRINCIPAL OFFICER, OF MEMBER OF BOARD OF REGENTS WITH GOVERNING BOARD DELEGATED POWERS, WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST, AS DEFINED BELOW, IS AN INTERESTED PERSON. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS. AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Name of the organization

TRINITY BIBLE COLLEGE

Employer identification number 45-0306841

MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST. THE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT. IF THE GOVERNING BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING THE MEMBERS RESPONSE AND AFTER MAKING FURTHER INVESTIGATION AS WARRANTED BY THE CIRCUMSTANCES, THE GOVERNING BOARD OR COMMITTEE DETERMINES THE MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Name of the organization

TRINITY BIBLE COLLEGE

Employer identification number 45-0306841

DETERMINED USING COMPARABLE DATA FROM SIMILAR COLLEGES. THE INDEPENDENT
BOARD OF REGENTS REVIEWS AND APPROVES OF THE SALARY AND THE APPROVAL IS
NOTED IN THE BOARD MEETING MINUTES.
THE SALARY OF THE BUSINESS MANAGER IS DETERMINED BY THE INDEPENDENT
EXECUTIVE COMMITTEE WHO HAS THE ABILITY TO ACT ON BEHALF OF THE BOARD OR
REGENTS. THE DISCUSSION AND APPROVAL IS DOCUMENTED IN THE BOARD MEETING
MINUTES.
FORM 990, PART VI, SECTION C, LINE 19: UPON SPECIFIC REQUEST BY THE
PUBLIC, THESE DOCUMENTS WOULD BE AVAILABLE.
SCHEDULE K, PART I, BOND ISSUES:
(A) ISSUER NAME: CITY OF ELLENDALE, NORTH DAKOTA
(F) DESCRIPTION OF PURPOSE:
CONSTRUCTION AND EQUIPPING OF STUDENT LIFE CENTER
SCH L, PART III, GRANTS OR ASSISTANCE BENEFITTING INTERESTED PERSONS:
(A) NAME OF PERSON: BARBARA STROM
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
FAMILY RELATIONSHIP: WIFE OF PRESIDENT STROM
(C) TYPE OF ASSISTANCE: TUITION WAIVER

SCHEDULE E

SCHOOLS - LINE 3

STATEMENT

1

WE DO NOT USE BROADCAST MEDIA TO SOLICIT; HOWEVER, ALL INCOMING STUDENTS ARE GIVEN COPIES OF THE CATALOG AND STUDENT HANDBOOK, BOTH OF WHICH HAVE STATEMENTS REGARDING THE NONDISCRIMINATORY POLICY REGARDING RACE, GENDER OR DISABILITY. ALL STUDENTS GO THROUGH AN ORIENTATION PROCESS, IN WHICH THESE DOCUMENTS ARE REVIEWED, AND WITH WHICH STUDENTS ARE EXPECTED TO BECOME FAMILIAR. LIKEWISE, THE FACULTY HANDBOOK AND STAFF HANDBOOK CONTAIN THESE NON-DISCRIMINATORY POLICIES, AND FACULTY AND STAFF MEMBERS ARE EXPECTED TO READ AND BE FAMILIAR WITH THESE GUIDELINES.

SCHEDULE E

GOVERNMENT FINANCIAL ASSISTANCE STATEMENT LINE 6

STATEMENT

2

TRINITY BIBLE COLLEGE STUDENTS ARE ELIGIBLE TO PARTICIPATE IN THE GOVERNMENTAL FINANCIAL AID PROGRAM, AS WELL AS STAFFORD LOANS, PELL GRANTS, ETC. THE STUDENTS CAN ALSO PARTICIPATE IN THE FEDERAL WORK STUDY PROGRAM, BASED ON THEIR ELIGIBILTY.

Form 8	868 (Rev 4-2009)			Page	2		
• If yo	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this be			▶ X	_		
•	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		8868.	. •			
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).						
Part		opies	needed)		_		
Туре	Name of Exempt Organization	Emp	loyer iden	tification numbe	r r		
print	TRINITY BIBLE COLLEGE	45-0306841					
File by the extended due date filing the	Number, street, and room or suite no. If a P.O box, see instructions.	For I	RS use onl	у			
return S	City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
X I	type of return to be filed (File a separate application for each return): Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	==	orm 5227 orm 6069	Form 887	0		
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	ed Form 88	168.	_		
	LARON WEGENER — BUSINESS OFFICE books are in the care of ► 50 6TH AVE S — ELLENDALE, ND 58436 sphone No. ► 701-349-3621 FAX No. ►				_		
	•			▶ □			
	If the organization does not have an office or place of business in the United States, check this box						
● If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for.							
	77777 15 0010						
	For calendar year or other tax year beginning JUN 1, 2008 and ending MAY 31, 2009						
	f this tax year is for less than 12 months, check reason: Initial return						
	f this tax year is for less than 12 months, check reason: L Initial return L Final return L Change in accounting period.						
	ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NE	CES	SARY :	O FILE A			
(COMPLETE AND ACCURATE RETURN				_		
8a	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	, i			_		
<u>r</u>	nonrefundable credits. See instructions.	8a	\$				
b i	f this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated				_		
t	ax payments made. Include any prior year overpayment allowed as a credit and any amount paid						
_	previously with Form 8868.	8b	\$				
c E	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit				_		
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	N/A	_		
	Signature and Verification						
	enalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the e, correct, and complete, and that I am authorized to prepare this form	best o	f my knowled	dge and belief,			
Signatu	re ► Title ► CPA	Date	<u> </u>				
					_		

Form 8868 (Rev 4-2009)