

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DAA

Department of the Treasury Internal Revenue Service

Short Form
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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

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

OMB No 1545-1150

**Open to Public** Inspection

| Α          | For the  | e 2008 calend  | dar year  | or tax year beginning                               | 7/01/08                                 | , and ending           | 6/3         | 30/09             | ·   |           | · <del> · </del>               |                 |
|------------|----------|--|---|---|---|------------------------|-------------|-------------------|---|-----------|--------------------------------|-----------------|
| В          | Check r  | f applicable   | Please  | C Name of organization                              |   |                        |             |                   | 1   | D E       | mployer identification         | number          |
| Н          |          | lress change   use IRS   label or   concord school bible TEACHING ASSOC   23-714812  |   |   |   |                        |             |                   |   | 3-71/0123 |                                |                 |
| Н          |          | print of   |   |   |   |                        |             |                   |   |           |                                |                 |
| Н          |          | al return type. Number and street (or P O box, if mail is not delivered to street address) Room/suite    Room/suite   PO BOX 431   PO B |   |   |   |                        |             |                   |   |           | elephone number<br>'04-792-136 | 0               |
| Н          | Termina  |  | Specific  |   |   |                        |             |                   |   |           |                                | <u> </u>        |
| Н          |          | ed return  | Instruc-<br>tions.  | City or town, state or CONCORD                      | country, and ZIP + 4                    | NC 28026               | -04         | 31                |   |           | roup Exemption                 |                 |
| ш          |          | tion pending   |   | zations and 4947(a)(1) i                            | nonevemnt charita                       |                        |             |                   | G Accounting                                  |           |                                | crual           |
|            | • 360    |  | -   | npleted Schedule A (Fo                              |   |                        | attacii     |                   | Other (specify)                               | _         | d Es Casii M                   | XI uai          |
| _          | Wehsi    | te: N/   |   | inploted Collegate 77 (1 c                          | 000 01 000 <u>LL</u> j.                 |                        |             |                   | H Check ▶                                     | $\Box$    | the organization is not        |                 |
| J          |          |  |   | one)— <b>X</b> 501(c) (                             | 3 ) <b>◀</b> (insert no )               | 4947(a)(1) o           | or 🗌        | 527               | required to                                   | attach    | Schedule B (Form 990,          |                 |
| K          | Check    |  |   | zation is not a section 50                          |   |                        |             |                   |   |           |                                | return          |
|            |          | _  |   | anization chooses to file                           |   |                        |             |                   |   |           | ,,                             |                 |
| L          |          |  |   | to determine gross receipts                         |   |                        |             | orm 990-E         | Z   | <b>•</b>  | \$ 64                          | ,076            |
| F          | art I    |  |   | penses, and Chan                                    |   |                        |             |                   |   | uctio     |                                |                 |
|            | 1        |  |   | nts, and similal amounts ec                         |   |                        |             |                   |   | 1         |                                | ,773            |
|            | 2        | Program se   | rvice rev   | enue in luding governme                             | ent fees and contract                   | cts                    |             |                   |   | 2         | !                              |                 |
|            | 3        | Membership   | dues a  | nd assessments B I 6                                | 2010 8                                  |                        |             |                   |   | 3         |                                |                 |
|            | 4        | Investment   | ıncome  |   | 2010                                    |                        |             |                   |   | 4         |                                | 303             |
|            | 5a       | Gross amou   | unt from  | sale of assets other then<br>asis and sales expense | -inventory E                            |                        | 5a          |                   |   |           |                                |                 |
|            | ь        |  |   |   |   |                        | 5b          |                   |   | _         |                                |                 |
| •          | С        | Gain or (loss)   | from sale   | of assets other than invento                        | ry (Subtract line 5b fro                | m line 5a) (attach so  | ch)         |                   |   | 5         | С                              |                 |
| Revenue    | 6        | Special events   | s and acti  | vities (complete applicable pa                      | arts of Schedule G) If                  | any amount is from     | gamin       | <b>g,</b> check h | ere <b>▶</b>                                  |           |                                |                 |
| eve        | a        | Gross reven  | nue (not i  | ncluding \$   | of c                                    | contributions          |             | Ī                 |   |           |                                |                 |
| Ř          |          | reported on  | •   |   |   |                        | 6a          |                   |   | _         |                                |                 |
|            | b        | Less direct  | expense   | s other than fundraising                            | expenses                                |                        | 6b          |                   |   | _         |                                |                 |
|            | С        | Net income   | income or (loss) from special events and activities (Subtract line 6b from line 6a) |   |   |                        |             | 6                 | С   |           |                                |                 |
|            | 7a       |  |   |   |   | _                      |             |                   |   |           |                                |                 |
|            | b        | <u> </u>   |   |   |   |                        | _           |                   |   |           |                                |                 |
|            | C        |  |   | from sales of inventory                             | (Subtract line 7b fro                   | om line 7a)            |             |                   |   | 7         | _                              |                 |
|            | 8        | Other reven  | •   | •   |   |                        |             |                   |   | )   8     |                                | 076             |
| _          | 9        |  |   | lines 1, 2, 3, 4, 5c, 6c, 7                         |   |                        |             |                   |   | 9         |                                | <u>,076</u>     |
|            | 10       |  |   | mounts paid (attach scho                            | edule)                                  |                        |             |                   |   | 1         | <del></del>                    |                 |
|            | 11       | Benefits par   |   |   |   |                        |             |                   |   | 1         | <u> </u>                       |                 |
| es         | 12       | -  |   | ensation, and employee                              |   |                        |             |                   |   | 1:        |                                |                 |
| penses     | 13       | _  |   | d other payments to inde                            | ependent contractor                     | S                      |             |                   |   | 1:        | _                              |                 |
| Exp        | 14       |  |   | ities, and maintenance , postage, and shipping      |   |                        |             |                   |   | <u> </u>  | <del>`   `</del>               |                 |
|            | 16       | • • •  |   | s, postage, and snipping<br>scribe SEE STA          | งกะพะงาก 1                              |                        |             |                   |   | ) 1       | <del></del>                    | , 672           |
|            | 17       | -  |   | lines 10 through 16                                 | 112111111111111111111111111111111111111 |                        |             |                   |   | 1         |                                | ,672            |
| - S        |          |  |   | r the year (Subtract line                           | 17 from line 9)                         | <del></del>            |             |                   |   | 1:        |                                | ,404            |
| 55.6       | 19       |  |   | nces at beginning of year (fro                      |   | (must some with end-of | f.vear fini | ure renorted      | on onor vear's return                         |           |                                | , 662           |
| \$         | 20       |  |   | t assets or fund balances                           |   | -                      | -year nge   | ore reported      | on prior your stolum                          | 2         |                                | <del>/</del>    |
| NetrAssets | 21       | -  |   | alances at end of year C                            | •                                       |                        |             |                   | •   | 2         |                                | ,066            |
|            | art II   |  |   | ets. If Total assets on I                           |   |                        | r more.     | . file Forr       | n 990 instead                                 |           |                                |                 |
| -          | ,        | —  |   | the instructions for Part                           |   | 02,000,000             |             |                   | eginning of year                              | 1         | (B) End of year                |                 |
| 27         | Cash.    | savings, and   | -   |   | ,                                       |                        | Ī           |                   | 23,66   | 2 2       | 2 48                           | ,066            |
|            | -        | ind buildings  |   |   |   |                        | Ì           |                   | <u>,                                     </u> | 2         |                                |                 |
|            |          | assets (descri   | ibe 🕨   |   |   |                        | 1(          |                   | -   | 2         |                                |                 |
| _          | Total a  |  |   |   |   |                        |             |                   | 23,66   | 2 2       | 5 48                           | ,066            |
| 26         | Total li | iabilities (des  | scribe 🕨  |   |   |                        | )[          |                   |   | 0 2       | 6                              | 0               |
|            |          |  |   | s (line 27 of column (B) i                          | nust agree with line                    | 21)                    |             |                   | 23,66   | 2 2       | 7 48                           | ,066            |
|            | _        |  |   | Reduction Act Notice,                               |   |                        |             |                   |   |           | Form <b>990-E</b>              | <b>Z</b> (2008) |

DAA

| Form 990-E                                      | <del></del>                   | SCHOOL BIBLE 1                        |                    |                               |   |   |           |                          | Page 2           |
|---|-------------------------------|---------------------------------------|--------------------|-------------------------------|---|---|-----------|--------------------------|------------------|
| Part III  |                               | <u>am Service Accompli</u>            | <u>ishments (S</u> | See the instruc               | tions for Part                          | II.)  |           | Ex                       | penses           |
| What is the                                     | organization's primary exemp  | t purpose?                            |                    |                               |   |   | (1        | Required                 | for 501(c)(3)    |
| PROVIDE HISTORY OF BIBLE CLASSES IN HIGH SCHOOL |                               |                                       |                    |                               |   |   |           |                          | rganizations     |
|   | at was achieved in carrying o | •                                     | •                  |                               | ·                                       |   |           |                          | (a)(1) trusts,   |
|   | services provided, the number |                                       |                    | iformation for each           | program title                           |   | ٩         | ptional f                | or others)       |
|   | IDED FUNDING SO THAT H        | ISTORY OF BIBLE CLASS                 | SES COULD          |                               |   |   |           |                          |                  |
| BE T  | AUGHT IN HIGH SCHOOL          |                                       |                    |                               |   |   |           |                          |                  |
|   |                               |                                       |                    |                               | _                                       | _   |           |                          | 20 200           |
| (Grants   | \$                            | If this amount includes for           | eign grants, ch    | eck here                      |   | ᆚ   | 28a       |                          | 39,302           |
| 29  |                               |                                       |                    |                               |   |   |           |                          |                  |
|   |                               |                                       |                    |                               |   |   |           |                          |                  |
|   |                               |                                       |                    |                               | _                                       | $\overline{}$                                     |           |                          |                  |
| (Grants   | \$                            | If this amount includes fore          | eign grants, ch    | eck nere                      | <u>P</u>                                | Ш   | 29a       |                          |                  |
| 30  |                               |                                       |                    |                               |   |   |           |                          |                  |
|   |                               |                                       |                    |                               |   |   |           |                          |                  |
| (0 1-   | •                             | If the comment we dead on force       |                    |                               | •                                       | $\Box$  | امما      |                          |                  |
| (Grants   |                               | If this amount includes fore          | eign grants, chi   | еск пеге                      | <u></u>                                 |   | 30a       |                          |                  |
| · ·   | rogram services (attach sched | ·                                     | to -b              | nak hasa                      | _                                       | $\Box$  | 24.       |                          |                  |
| (Grants   | <del></del>                   | If this amount includes fore          | eign grants, chi   | еск пеге                      |   | ┰   | 31a<br>32 |                          | 39,302           |
| Part IV   | ogram service expenses (ad    | s, Trustees, and Key Empl             | ovoce Listori      | th one over if not o          | companyated (Sa                         | o tho   |           | otions fo                |                  |
| raitte  | List of Officers, Director    | s, musices, and Key Empi              | oyees. List eat    | (b) Title and average         | (c) Compensation                        | (d)   | Contrib   | utions to                | (e) Expense      |
|   | (a) Name                      | e and address                         |                    | hours per week                | (If not paid,                           | emplo   | yee bene  | efit plans &<br>ensation | account and      |
| PAM BEECH                                       |                               |                                       |                    | devoted to position PRESIDENT | enter -0)                               | deter   | rea com   | pensation                | other allowances |
| PAM BEECH                                       | EK                            |                                       |                    | PRESIDENT                     | ,                                       |   |           | ٥                        | •                |
| SCOTT SW  | DINCEN                        |                                       |                    | VICE PRES                     | C                                       | <del>' </del>                                     |           |                          | 0                |
| SCOTT SWA                                       | KINGEN                        |                                       |                    | VICE PRES                     | ,                                       |   |           | ار                       | •                |
| DODEN CER                                       | DTMCTM                        | <del></del>                           |                    | CECDEMARY                     | C                                       | <del>'                                     </del> |           |                          | 0                |
| ROBIN SWA                                       | KINGEN                        |                                       |                    | SECRETARY                     | c                                       |   |           | ٥                        | •                |
| FRANK IRV                                       |                               |                                       |                    | TRESURER                      |   | 1   |           |                          | 0                |
| FRANK IK  | IN                            |                                       |                    | IRESURER                      | C                                       | J   |           | ٥                        | 0                |
| KIRBY BUI                                       | TARD                          |                                       |                    | PAST PRESID                   |   | <del>' </del>                                     |           | - 4                      | 0                |
| KIKBI BUI                                       | LARD                          |                                       |                    | PAST PRESID                   | c                                       |   |           | 0                        | 0                |
| PHILLIP F                                       | TIPUT PN                      |                                       |                    | BOARD MEMBER                  |   | 1   |           | - 4                      | 0                |
| FILTIMITE F                                     | COETHER                       |                                       |                    | BOARD MEMBER                  | C                                       |   |           | اه                       | 0                |
| CHRIS COT                                       | ·····                         |                                       |                    | BOARD MEMBER                  |   | 1   |           |                          |                  |
| CIRCIS COI                                      |                               |                                       |                    | BOARD MEMBER                  | ,                                       | J   |           | ا                        | 0                |
| MARIE COF                                       | PCCPT                         |                                       |                    | BOARD MEMBER                  |   |   |           |                          |                  |
|   |                               |                                       |                    | DOING THE DER                 | c                                       |   |           | ٥                        | 0                |
| ROSE CULE                                       | REATH                         |                                       |                    | BOARD MEMBER                  |   |   |           |                          |                  |
|   |                               |                                       |                    |                               | c                                       | ,   |           | اه                       | 0                |
| SHALA HOI                                       | BROOKS                        | ·                                     |                    | BOARD MEMBER                  | -                                       |   |           |                          | <u>-</u>         |
|   |                               |                                       |                    |                               | C                                       | ,   |           | اه                       | 0                |
|   |                               | <del></del>                           |                    |                               | =                                       |   |           |                          | <u>-</u> -       |
|   |                               |                                       |                    |                               |   |   |           |                          |                  |
|   |                               |                                       |                    |                               |   | <u> </u>  |           |                          |                  |
|   |                               |                                       |                    |                               |   |   |           | - 1                      |                  |
|   | <del></del>                   | · · · · · · · · · · · · · · · · · · · |                    |                               |   |   |           |                          |                  |
|   |                               |                                       |                    |                               |   |   |           |                          |                  |
|   |                               |                                       |                    |                               |   |   |           |                          |                  |
|   |                               |                                       |                    |                               |   |   |           |                          |                  |
|   |                               |                                       |                    |                               | , |   |           |                          |                  |
|   |                               |                                       |                    |                               |   |   |           |                          |                  |
|   |                               | · · · · · · · · · · · · · · · · · · · |                    |                               |   |   |           |                          |                  |
|   |                               |                                       |                    |                               |   |   |           |                          |                  |
|   |                               |                                       | -                  |                               |   |   |           |                          |                  |
|   |                               | ·                                     |                    | <b> </b>                      |   | L   |           |                          |                  |
|   |                               |                                       |                    |                               |   |   |           |                          |                  |
|   |                               |                                       |                    |                               |   | ļ   |           |                          |                  |

Form 990-EZ (2008)

| Form | 990-EZ (2008) CONCORD SCHOOL BIBLE TEACHING ASSOC 23-7148123  |                  | F   | Page 3   |
|------|---|------------------|---|----------|
| Pa   | ort V Other Information (Note the statement requirements in the instructions for Part VI.)  |                  |   |          |
|      |   |                  | Yes   | No       |
| 33   | Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed   |                  |   |          |
|      | description of each activity  | 33               |   | X_       |
| 34   | Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes,"   |                  |   |          |
|      | attach a conformed copy of the changes  | 34               |   | X        |
| 35   | If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not  |                  |   |          |
|      | reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T  |                  |   |          |
| а    | Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting,  |                  |   |          |
|      | and proxy tax requirements?   | 35a              |   | X        |
| b    | If "Yes," has it filed a tax return on Form 990-T for this year?  | 35b              |   |          |
| 36   | Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes,"  |                  |   |          |
|      | complete applicable parts of Schedule N   | 36               |   | X        |
| 37a  | Enter amount of political expenditures, direct or indirect, as described in the instr   | )                |   |          |
| þ    | Did the organization file Form 1120-POL for this year?  | 37b              |   | X        |
| 38a  | Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were   |                  |   |          |
|      | any such loans made in a prior year and still unpaid at the start of the period covered by this return?   | 38a              |   | X        |
| b    | If "Yes," complete Schedule L, Part II and enter the total amount involved  38b   |                  |   | ĺ        |
| 39   | Section 501(c)(7) organizations Enter   |                  |   | •        |
| а    | Initiation fees and capital contributions included on line 9  |                  |   |          |
| b    | Gross receipts, included on line 9, for public use of club facilities   |                  |   |          |
| 40a  | Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under   |                  |   | ł        |
|      | section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶ 0  |                  |   |          |
| b    | Section 501(c)(3) and (4) organizations 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," complete Schedule  |                  |   |          |
|      | L, Part I   | 40b              |   | X        |
| С    | Enter amount of tax imposed on organization managers or disqualified persons during   |                  |   |          |
|      | the year under sections 4912, 4955, and 4958  |                  |   |          |
| d    | Enter amount of tax on line 40c reimbursed by the organization  |                  |   |          |
| е    | All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter   |                  |   |          |
|      | transaction? If "Yes," complete Form 8886-T   | 40e              |   | X        |
| 41   | List the states with which a copy of this return is filed NONE  |                  |   | 0.60     |
| 42a  | · · · · · · · · · · · · · · · · · · ·   | 1-79             | 2-1   | 360      |
|      | P O BOX 462   | 000              |   |          |
|      | ,   | 026              |   |          |
| 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   |                  | Yes   | No       |
|      | account)?   | 42b              |   | X        |
|      | 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 Bank   |                  |   |          |
|      | and Financial Accounts.   |                  |   | 37       |
| С    | At any time during the calendar year, did the organization maintain an office outside of the U S ?  | 42c              |   | <u> </u> |
| 40   | If "Yes," enter the name of the foreign country   |                  |   |          |
| 43   | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here   |                  |   | ▶ ⊔      |
|      | and enter the amount of tax-exempt interest received or accrued during the tax year   |                  |   |          |
|      |   | 1                | <u>,                                     </u> |          |
| 4.4  | Delate annual control and delated for death of the Control of the | [                | Yes   | No       |
| 44   | Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of  |                  |   | v        |
| 4-   | Form 990-EZ   | 44               |   | X        |
| 45   | Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If  |                  |   | х        |
|      | "Yes," Form 990 must be completed instead of Form 990-EZ  | 45 orm 99        |   |          |
|      | r   | JIIII <b>J</b> J | ~~L~  | (2000)   |

|     | Section 501(c)(3) organizations only. All section 5 and complete the tables for lines 50 and 51.  | 01(c)(3) organiz   | ations must ar       | swer question   | s 46–49                              |       |  |  |
|-----|---|--|----------------------|---|--------------------------------------|-------|--|--|
| 46  | Did the organization engage in direct or indirect political campaign activities   | on behalf of or in op                                    | position to          |   | Yes                                  | No    |  |  |
|     | candidates for public office? If "Yes," complete Schedule C, Part I   |  |                      |   | 46                                   | X     |  |  |
| 47  | 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II   |  |                      |   |                                      |       |  |  |
| 48  | Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  |  |                      |   |                                      |       |  |  |
| 49a | Oid the organization make any transfers to an exempt non-charitable related organization?   |  |                      |   |                                      |       |  |  |
| b   | If "Yes," was the related organization(s) a section 527 organization?   |  |                      |   | 49b                                  |       |  |  |
| 50  | Complete this table for the five highest compensated employees (other than  | officers, directors, tr                                  | ustees and key en    | nployees) who   |                                      |       |  |  |
|     | each received more than \$100,000 of compensation from the organization   | If there is none, enter                                  | "None"               |   |                                      |       |  |  |
|     | (a) Name and address of each employee paid more than \$100,000  | (b) Title and average hours per week devoted to position | (c) Compensation     | (d) Contributions to<br>employee benefit plans &<br>deferred compensation | (e) Experience account a other allow | and   |  |  |
| NON | E   |  |                      |   |                                      |       |  |  |
|     |   |  |                      |   | <del></del>                          |       |  |  |
|     |   |  | <u></u>              |   |                                      | ····· |  |  |
|     |   |  |                      |   |                                      |       |  |  |
|     | I number of other employees paid over \$100,000   | <u> </u>   |                      |   |                                      |       |  |  |
| 51  | Complete this table for the five highest compensated independent contractor compensation from the organization. If there is none, enter "None."   | ors who each received                                    | d more than \$100,0  | 000 of  |                                      |       |  |  |
|     | (a) Name and address of each independent contractor paid more than \$100,000  | /b\  | Type of service      | (c) C   | ompensation                          |       |  |  |
|     |   | (6)  | Type of service      |   |                                      |       |  |  |
| NC  | ONE   | (6)  | Type of service      |   |                                      |       |  |  |
| NC  |   | (8)  | Type or service      |   |                                      |       |  |  |
| NO  |   | (8)  | Type of service      |   |                                      |       |  |  |
| NO  |   |  | Type of service      |   |                                      |       |  |  |
| NC  |   |  | Type of service      |   |                                      |       |  |  |
|     |   | (b)  | Type or service      |   |                                      |       |  |  |
|     | I number of other independent contractors each receiving over \$100,000  Under penalties of penjury, I declare that I have examined this return, including and belief this true, correct, and complete. Declaration of preparer (other that | ▶ ng accompanying schedi                                 | ules and statements, |   |                                      |       |  |  |

Check if

EIN

Phone

no 🕨

self-

1/25/10 employed ▶

Date

NEWBERRY, GORDON & SHUFORD PA

28026

P.O. BOX 969

CONCORD, NC

May the IRS discuss this return with the preparer shown above? See instructions

Preparer's Identifying Number (See instr.)

704-786-0171

Yes No Form 990-EZ (2008)

**Paid** 

Preparer's

**Use Only** 

signature

Firm's name (or yours

address, and ZIP + 4

ıf self-employed),

## **SCHEDULE A** (Form 990 or 990'-EZ)

**Public Charity Status and Public Support** 

CONCORD SCHOOL BIBLE TEACHING ASSOC

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.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection

Employer identification number

23-7148123

|          |                                |                              | Status (All organization   |                    |                        | ie inis    | part.)              | (see i       | nstruct    | lions)        |  |      |
|----------|--------------------------------|------------------------------|--|--------------------|------------------------|------------|---------------------|--------------|------------|---------------|--|------|
| The      |                                |                              | use it is (Please check only one                                   | _                  |                        |            |                     |              |            |               |  |      |
| 1        | A church, co                   | onvention of churches, or as | sociation of churches described                                    | d ın <b>sectio</b> | n 170(b)(              | 1)(A)(i).  |                     |              |            |               |  |      |
| 2        |                                |                              | )(A)(ii). (Attach Schedule E)                                      |                    |                        |            |                     |              |            |               |  |      |
| 3        |                                |                              | vice organization described in s                                   |                    |                        |            |                     |              |            |               |  |      |
| 4        | A medical recity, and sta      |                              | ed in conjunction with a hospita                                   | l described        | l in sectio            | on 170(b   | )(1)(A)(            | iii). Ente   | er the ho  | spital's name | ·,   |      |
| 5        | An organiza                    |                              | of a college or university owne                                    | d or opera         | ted by a g             | overnm     | ental un            | ıt descr     | ibed in    |               |  |      |
| 6        |                                |                              | governmental unit described in                                     | section 1          | 70(6)/1)/8             | W)         |                     |              |            |               |  |      |
| 7        |                                |                              | a substantial part of its support                                  |                    |                        |            | from the            |              | مناطييم ام |               |  |      |
| ,        | _                              | section 170(b)(1)(A)(vi). (0 |  | nom a gov          | Спппспца               | i unit oi  | HOM LIN             | genera       | ai public  |               |  |      |
| 8        |                                |                              | 170(b)(1)(A)(vi). (Complete Pa                                     | <b>→</b> 11 \      |                        |            |                     |              |            |               |  |      |
| 9        |                                |                              | (1) more than 33 1/3 % of its su                                   |                    |                        |            |                     | <b>6</b>     |            |               |  |      |
| 9        |                                |                              |  |                    |                        |            |                     |              | _          | 155           |  |      |
|          |                                |                              | mpt functions—subject to certa                                     |                    |                        |            |                     |              |            |               |  |      |
|          |                                |                              | and unrelated business taxable                                     |                    |                        |            | x) from i           | busines      | ses        |               |  |      |
| 10       |                                | =                            | 30, 1975 See section 509(a)(2                                      |                    |                        | •          | <b>/</b>            | _4           |            |               |  |      |
| 10<br>11 | L-3                            |                              | l exclusively to test for public sa                                |                    |                        |            |                     |              | •          |               |  |      |
| " "      |                                | =                            | l exclusively for the benefit of, to                               | •                  |                        |            |                     | •            |            |               |  |      |
|          |                                |                              | rted organizations described in<br>the type of supporting organiza |                    |                        |            |                     |              | section    |               |  |      |
|          |                                |                              | c Type III–Functio   |                    | -                      |            |                     |              |            |               |  |      |
| •        |                                | ٠٠ لــا                      | ganization is not controlled dire                                  | , ,                |                        | d          |                     | e III–Ot     |            |               |  |      |
| е        |                                |                              | s and other than one or more p                                     |                    |                        |            |                     |              |            |               |  |      |
|          |                                | section 509(a)(2)            | s and other than one or more pr                                    | ubliciy sup        | ported org             | janizatio  | nis desc            | inbed in     | Section    |               |  |      |
|          |                                | , , , ,                      | termination from the IBS that it                                   | io o Tupo I        | Type II                | as Tuma    | III aumm            |              |            |               |  |      |
| f        |                                | , check this box             | termination from the IRS that it                                   | ısa iype i         | , Type II,             | or Type    | III supp            | orting       |            |               |  |      |
| _        | _                              |                              | ation accepted any gift or contri                                  | hutian fran        | a anu af ti            |            |                     |              |            |               |  | Ш    |
| g        | following pe                   | <del>_</del>                 | ation accepted any gift of contin                                  | Dution non         | ii aiiy oi u           | ie         |                     |              |            |               |  |      |
|          |                                |                              | controls, either alone or togethe                                  | r with norm        | ono dono               | ubad in (  | ·\                  |              |            |               | <u> </u>   |      |
|          |                                |                              |  | i willi persi      | ons descr              | ibea iii ( | (11)                |              |            | 44-0          | Yes  | No   |
|          |                                |                              | of the supported organization?                                     |                    |                        |            |                     |              |            | 11g(i)        | $\vdash$   |      |
|          | -                              | member of a person descr     | **   |                    |                        |            |                     |              |            | 11g(ii)       | <del>                                     </del> |      |
| h        |                                |                              | described in (i) or (ii) above?                                    |                    | 4                      |            |                     |              |            | 11g(:ii)      |  |      |
| <u>h</u> |                                | T                            | the organizations the organizat                                    |                    |                        |            |                     | <del>,</del> | —-г        |               |  |      |
| (i) N    | Name of supported organization | (ii) EIN                     | (iii) Type of organization<br>(described on lines 1–9              | 1 ' '              | organization           | , , ,      | ou notify           |              | s the      | (vii) Amo     |  |      |
|          | organization                   |                              | above or IRC section   | 1 ''               | sted in your document? |            | nization in of your | organizat    | zed in the | supp          | οπ   |      |
|          |                                |                              | (see instructions))  | 3                  |                        |            | port?               | 1            | S ?        |               |  |      |
|          |                                |                              |  | Yes                | No                     | Yes        | No                  | Yes          | No         |               |  |      |
|          |                                |                              |  |                    | İ .                    |            |                     |              |            |               |  |      |
|          |                                |                              |  |                    |                        |            |                     |              |            |               |  |      |
|          |                                |                              |  |                    |                        |            |                     |              |            |               |  |      |
|          |                                |                              |  |                    |                        |            |                     | ļ            |            |               |  |      |
|          |                                |                              |  |                    | <b>أ</b> إ             |            |                     |              |            |               |  |      |
|          |                                |                              |  |                    |                        |            |                     |              |            |               |  |      |
|          |                                |                              |  | 1                  |                        |            |                     |              |            |               |  |      |
|          |                                |                              | ļ  | <del> </del>       | <u> </u>               |            | <u></u>             |              |            |               |  |      |
|          |                                |                              |  |                    |                        |            |                     |              |            |               |  |      |
|          |                                |                              |  | <del> </del>       | <u> </u>               |            |                     |              |            |               |  |      |
|          |                                |                              |  |                    |                        |            |                     |              |            |               |  |      |
| Total    |                                |                              |  |                    |                        |            | <b>.</b>            |              |            |               |  |      |
| For Pr   | rivacy Act and Pap             | perwork Reduction Act Notice | e, see the Instructions for Form 9                                 | 90.                |                        |            |                     | Sch          | nedule A   | (Form 990 or  | 990-EZ   | 2008 |

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

| Sec      | tion A. Public Suppo <u>rt</u>  |                        |                      |                           |                      |                   |           |
|----------|---|------------------------|----------------------|---------------------------|----------------------|-------------------|-----------|
| Ca       | lendar year (or fiscal year beginning in) ▶   | (a) 2004               | (b) 2005             | (c) 2006                  | (d) 2007             | (e) 2008          | (f) Total |
| 1        | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")  | 39,690                 | 41,645               | 37,033                    | 34,595               | 63,773            | 216,736   |
| 2        | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf   |                        |                      |                           |                      |                   |           |
| 3        | The value of services or facilities furnished by a governmental unit to the organization without charge   |                        |                      |                           |                      |                   |           |
| 4        | Total. Add lines 1-3  | 39,690                 | 41,645               | 37,033                    | 34,595               | 63,773            | 216,736   |
| 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) |                        |                      |                           |                      |                   | 52,920    |
| 6        | Public support. Subtract line 5 from line 4   | , , ,                  |                      |                           |                      |                   | 163,816   |
|          | tion B. Total Support   |                        |                      |                           |                      |                   |           |
| Ca       | lendar year (or fiscal year beginning in) ▶   | (a) 2004               | (b) 2005             | (c) 2006                  | (d) 2007             | (e) 2008          | (f) Total |
| 7        | Amounts from line 4   | 39,690                 | 41,645               | 37,033                    | 34,595               | 63,773            | 216,736   |
| 8        | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  | 31                     | 129                  | 436                       | 341                  | 303               | 1,240     |
| 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 assets (Explain in Part IV)   |                        |                      |                           |                      |                   | 217.076   |
| 11<br>12 | Total support. Add lines 7 through 10 Gross receipts from related activities, etc.  | (coo instructions)     |                      |                           | L                    | 12                | 217,976   |
| 13       | First five years. If the Form 990 is for the  | •                      | second third for     | uth or fifth tay yea      | ras a section 501/   |                   |           |
| 13       | organization, check this box and stop here  | _                      | , second, tilia, loc | intii, or illiir tax yea  | r as a section son   | C)(3)             | ▶ □       |
| Sec      | tion C. Computation of Public Su  |                        | age                  |                           |                      |                   |           |
| 14       | Public support percentage for 2008 (line 6  | ··· -                  |                      | n (f))                    |                      | 14                | 75.1532 % |
| 15       | Public support percentage from 2007 Scho  |                        | -                    | (//                       |                      | 15                | %         |
| 16a      | 33 1/3 % support test—2008. If the organ  |                        |                      | 13, and line 14 is 3      | 3 1/3 % or more, o   | check this box    |           |
|          | and stop here. The organization qualifies   | as a publicly suppo    | rted organization    |                           |                      |                   | ▶ 🗓       |
| b        | 33 1/3 % support test-2007. If the organ  | ization did not che    | ck a box on line 13  | or 16a, and line 1        | 5 is 33 1/3 % or m   | ore, check this   |           |
|          | box and stop here. The organization quali   | fies as a publicly si  | upported organizat   | tion                      |                      |                   | ▶ 📙       |
| 17a      | 10%-facts-and-circumstances test-200  | 8. If the organization | on did not check a   | box on line 13, 16a       | a, or 16b, and line  | 14 is 10% or      |           |
|          | more, and if the organization meets the "fa   | acts-and-circumstai    | nces" test, check t  | his box and stop h        | ere. Explain in Pai  | rt IV how the     | _         |
|          | organization meets the "facts-and-circums   | tances" test. The o    | rganization qualifi  | es as a publicly su       | pported organization | on                | ▶ 🗌       |
| b        | 10%-facts-and-circumstances test—200  | 7. If the organization | on did not check a   | box on line 13, 16a       | a, 16b, or 17a, and  | line 15 is 10% or |           |
|          | more, and if the organization meets the "fa   | acts-and-circumstai    | nces" test, check t  | his box and <b>stop</b> h | iere. Explain in Pai | t IV how the      | _         |
|          | organization meets the "facts-and-circums   | tances" test. The o    | rganization qualifi  | es as a publicly su       | pported organization | on                | ▶∐        |
| 18       | Private foundation. If the organization did   | I not check a box o    | n line 13, 16a, 16b  | , 17a, or 17b, ched       | ck this box and see  | Instructions      | ▶□        |

30430 Schedule A (Form 990 or 990-EZ) 2008 CONCORD SCHOOL BIBLE TEACHING ASSOC 23-7148123 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar 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 ") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Add lines 7a and 7b Public support (Subtract line 7c from line 6)

| Sec | tion B. Total Support  |                     |                       |                       |                     |          |           |
|-----|--|---------------------|-----------------------|-----------------------|---------------------|----------|-----------|
| Ca  | llendar 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                        |                     |                       |                       |                     |          |           |
| С   | Add lines 10a and 10b  |                     |                       |                       |                     |          |           |
| 11  | 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)  |                     |                       |                       |                     |          |           |
| 14  | First five years. If the Form 990 is for the o   | organization's firs | t, second, third, for | urth, or fifth tax ve | ar as a section 501 | (c)(3)   | _         |

| Sec | tion C. Computation of Public Support Percentage                                       |    |   |
|-----|--|----|---|
| 15  | Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16  | Public support percentage from 2007 Schedule A, Part IV-A, line 27g                    | 16 | % |
| Sec | tion D. Computation of Investment Income Percentage                                    |    |   |

Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 19a 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line

17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and

line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

organization, check this box and stop here

Schedule A (Form 990 or 990-EZ) 2008 CONCORD SCHOOL BIBLE TEACHING ASSOC 23-7148123

Page 4

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information. (see instructions)

30430 Concord School Bible Teaching Assoc 23-7148123 **Federal Statements** 

23-7148123 FYE: 6/30/2009

Statement 1 - Form 990-EZ, Part I, Line 16 - Other Expenses

| Description               | Amount    |
|---------------------------|-----------|
| EXPENSES                  | \$        |
| REIMBURSE SCHOOL FOR TEAC | 38,845    |
| POSTAGE                   | 336       |
| PRINTING & REPRODUCTION   | 121       |
| MISCELLANEOUS             | 70        |
| ACCOUNTING FEES           | 300       |
| TOTAL                     | \$ 39,672 |