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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)

OMB No 1545-0047 2008

Department of the Treasury

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

Open to Public Inspection

			 _		s a copy or this return to							
	For the	2008 calendar year,	or tax year begin	ning 7/0	1 ,2	2008, and endi			, 2009	_ <u></u>		
В	Check if	applicable	_					nployer Identi	fication Numbe	r		
	Add	ress change Please use IRS label	JORDAN EVA	NGELICAL	THEOLOGICAL	SEMINARY	' 3	2-0164	159			
	Nan	ne change or type	P. O. BOX	33042			E Te	lephone numb	oer			
	\vdash	See al return specific	TULSA, OK	74153-10	42		۰	18-355	-0173			
	\vdash	Instruc-					<u> </u>	10-333	-91/3			
	Terr	mination tions.										
	Ame	ended return	<u> </u>				G Gr	oss receipts \$	<u>1,47</u>	<u>7,</u> 940.		
	App	lication pending F Name	and address of principa	al officer JOI	IN BARNETT		H(a) Is this a group	return for affi	liates?	es X No		
	_	SAME	AS C ABOVE				H(b) Are all affiliate	s included?	Πv	es No		
ī	Tay.	exempt status X 50		(insert no)	4947(a)(1) (or 527	If 'No,' attach a	a list (see ins	tructions)			
			<u>1(c) (3) 1</u>	(IIISEIT IIO)	434/(a)(1) (01 1327	1	_				
<u>J</u>		site: ► N/A		· · · · · · · · · · · · · · · · · · ·	1	т	H(c) Group exempt	on number	·			
K		of organization Corpor	ration Trust	Association	Other ►	L Year of Forma	ation	M State of I	egal domicile			
Pa		Summary		_								
	1 E	Briefly describe the or	ganization's miss	ion or most s	ignificant activities	JORDAN E	VANGELICAI	THEOL	OGICAL			
a	:	<u>SEMINARY WORKS</u>	S TO (I) SP	READ THE	GOSPEL OF J	ESUS CHRTS	ST THROUGH	PREACE	ITNG			
n L		FEACHING, MUS								T.T.		
L.		OTHER ACTIVIT										
Š		Check this box ►	of the organization	TER TATEIT	d its operations or	disposed of m	ore than 25% of	STITION F		- -		
ğ		lumber of voting men	nhers of the gove	rning body (P	ent VI line 1a)	disposed of file	ore man 25% or	3		3		
ಳ		lumber of independer				lino 1h)		4		3		
ies					ining body (Fart Vi	, little 10)						
Ξ		otal number of emplo						5		3		
Activities & Governance		otal number of volun			10	(0)		6		0		
`		otal gross unrelated				(C)		_ 7a		0.		
_	D I	let unrelated busines	s taxable income	from Form 99	30-1, line 34			7b		0.		
							Prior Y	ear	Current	Year		
	8 (Contributions and grai	nts (Part VIII, line	: 1h)			1,44	2,619.	1,47	77,940.		
Revenue		Program service revenue (Part VIII, line 2g)										
ě		nvestment income (P			and 7d)		· · · ·			-257.		
æ		Other revenue (Part V										
	12 T	otal revenue – add l	RECEIV	ED, ou, u,	Part VIII. column (A) line 12)	1 44	2,619.	1 47	77,683.		
_						A), fille 12)						
	13 (Grants and similar am	ounts paid (Part	IX, colling (A	i), lines 1-3)		1,10	3,313.	1,34	13,739.		
	14 E	Benefits paid to or	members & art	X) 10 luhum (A)), line 4)							
ø	15 S	Salaries, other compe	nsation, employe	e benefit (Pa	art IX, column (A),	lınes 5-10)	12:	1,497.	5	4,866.		
3e	16a F	rofessional fundraisir	ng fees Pet N.	cblរំរាកា (A).lı	ne 11e)							
Expenses		otal fundraising expe				17 720				1		
ă						17,728.				'		
		Other expenses (Part						2,130.		<u>80,167.</u>		
	18 T	otal expenses Add I	ines 13-17 (must	equal Part IX	, column (A), line 2	25)	1,42	1,940.	1,47	78,772.		
	19 F	Revenue less expense	es Subtract line 1	8 from line 12	2		20	0,679.	-	1,089.		
88		<u> </u>				.,	Beginning		End of			
Net Assets or Fund Balancos	20 T	otal assets (Part X, I	ıno 16\					1,584.				
Bol			•							20,497.		
i E	21 T	otal liabilities (Part X	., ime ∠6)					1.		0.		
		let assets or fund bal		ine 21 from lii	ne 20		2:	1,583.	2	20,497.		
Pa	rt II	Signature Blo	ck									
		Under penalties of perjun- true, correct, and complete	: I declare that I have e	amined this return	n, including accompanyin	g schedules and sta	tements, and to the t	est of my kno	wledge and beli	ef. it is		
		true, correct, and complete	Declaration of prepar	er (objer than offic	cer) is based on all inform	lation of which prep	arer has any knowled	ge	_			
Sig	ın	1 March	- HA	lan-	_		15/	12/10				
He	re	Signature of officer	- 1 -			-	Daye	1/12				
		CHARLES AD	AMC				CECY (MDE	,				
		Type or print name an				.	SECY/TRE	ASUKER				
		Type or print name an	tu tuto									
						Date	Check if self-	Pro	eparer's identifyi ee instructions)	ng number		
Pai		Preparer's					employed	▶				
Pre		signature SAN	IDRA SIEGFRI	ŒD		5/17/1	.0	— N.	/A			
	er's		NFIELD & O'					1 = 12				
Us			.1 S LAKEWOO		•		FIN ►	N/A				
On	ıy	address and) C20 0	<u> </u>		
			SA, OK 7413				Phone no	► (918		$\overline{}$		
May	the IR	S discuss this return	with the preparer	shown above	e7 (see instructions	5).			X Yes	No		

	n 990 (2008)	JORDAN EVANGELICAL THEOLOGICAL SEMINARY		32-0164	159		Page 2
Par	t III Sta	atement of Program Service Accomplishments (see instruction	is)				
1	•	ribe the organization's mission					
	SEE SCHE	<u> </u>					
	5.111						
2		inization undertake any significant program services during the year which were	e not listed on the	prior	٦ ,,	T.	
	Form 990 or	cribe these new services on Schedule O		L	Yes	X	No
3	•	cribe triese new services on Schedule O inization cease conducting, or make significant changes in how it conducts, an	program con	.2 F	7 v	ſ⊽ì	Ma
3		cribe these changes on Schedule O	y program service	s: L	Yes	X	No
4	•	•	aram services by	AVDADERE	Section	501/6\	(3)
•	and 501(c)(4	e exempt purpose achievements for each of the organization's three largest pro 4) organizations and section 4947(a)(1) trusts are required to report the amoun	it of grants and all	ocations to	others,	the tot	al
	expenses, a	nd revenue, if any, for each program service reported					
4 a	(Code	(Expenses \$ 1,441,565. including grants of \$ 1,3	43,739.) (Rev	enue \$)
	SEE SCHE	CDULE O					
					_ _		
			-				
4 t	(Code 🔽) (Expenses \$ including grants of \$) (Rev	enue \$_)
					-		
40	: (Code) (Expenses \$ including grants of \$) (Rev	enue \$)
					- - -		
		~					
	1.045	(P. 1. 0.1.1.1.0.)					
40		am services (Describe in Schedule O)					
	(Expenses	\$ including grants of \$	(Revenue \$	_)	
4e	rotal progra	am service expenses ► \$ 1,441,565. (Must equal Part IX, Line	∠ɔ, column (B))				

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		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 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		Х
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		х
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		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
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		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	X	
ı	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	Х	
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	, , , , , , , , , , , , , , , , , , ,	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
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 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		Х
24	a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25	24a		х
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
•	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 8	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
I	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	25b		Х
26	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	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
ВАА		Form	990	(2008)

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
	a 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		X
	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		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		Х
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	_	Х
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	_	Х
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		Х
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		Х
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
BA	1	Form	990 (2008)

TEEA0104L 12/18/08

Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter -0- if not applicable 1 a b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Ō 1 b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c Х 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 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 instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 32 Х b 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 authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a **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 Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a X X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c Х 6a Did the organization solicit any contributions that were not tax deductible? 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). 7 a a Did the organization provide goods or services in exchange for any guid pro quo contribution of more than \$75? Х b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827 7с Х d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Х X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. 7 f g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? Х 7g X h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Х 8 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? X 9a b Did the organization make any distribution to a donor, donor advisor, or related person? X 9h 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10a **b** Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders 11 a 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 1041?

BAA

12a

12b

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

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

Se	ction A.	Governing Body and Management							
	For each processes	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, on the contractions 'Yes' response to lines 8 or 9b below, on the contractions' in the contractions 'Yes' response to lines 8 or 9b below, or changes in Schedule O. See instructions	describe the circumstances,		Yes	No			
		number of voting members of the governing body	1a 3						
		number of voting members that are independent	1b 3						
2	Did any o officer, di	fficer, director, trustee, or key employee have a family relationship or a business rel rector, trustee or key employee?	lationship with any other	2		X			
3	Did the or of officers	ganization delegate control over management duties customarily performed by or u s, directors or trustees, or key employees to a management company or other perso	nder the direct supervision	3		X			
4		ganization make any significant changes to its organizational documents prior Form 990 was filed?		4		X			
5		ganization become aware during the year of a material diversion of the organization	n's assets?	5		х			
		organization have members or stockholders?	. 5 4555.5	6		X			
7	a Does the governing	organization have members, stockholders, or other persons who may elect one or n body?	nore members of the	7a		Х			
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?									
8	Did the oi the follow	ganization contemporaneously document the meetings held or written actions under ing	rtaken during the year by						
	a The gove	rning body?		8a	X				
	b Each com	mittee with authority to act on behalf of the governing body?		8ь	Х				
9	a Does the	organization have local chapters, branches, or affiliates?		9a		X			
	b If 'Yes,' d and brand	oes the organization have written policies and procedures governing the activities of thes to ensure their operations are consistent with those of the organization?	f such chapters, affiliates,	9b					
10	Was a co describe i	by of the Form 990 provided to the organization's governing body before it was filed in Schedule O the process, if any, the organization uses to review the Form 990 SI	² All organizations must EE SCHEDULE O	10		Х			
11	ls there a organizat	ny officer, director or trustee, or key employee listed in Part VII, Section A, who car on's mailing address? If 'Yes,' provide the names and addresses in Schedule O	nnot be reached at the	11		х			
Se	ction B.	Policies							
			r		Yes	No			
		organization have a written conflict of interest policy? If 'No,' go to line 13	ļ	12 a	Х				
	b Are office to conflict	rs, directors or trustees, and key employees required to disclose annually interests is \mathfrak{s}^2	that could give rise	12b	х				
		organization regularly and consistently monitor and enforce compliance with the pol O how this is done	icy? If 'Yes,' describe in	12 c		X			
		organization have a written whistleblower policy?		13		<u>X</u>			
		organization have a written document retention and destruction policy?	,	14		<u>X</u>			
		rocess for determining compensation of the following persons include a review and a comparability data, and contemporaneous substantiation of the deliberation and dec	approval by independent ision						
	_	nization's CEO, Executive Director, or top management official?		15 a		<u>X</u>			
		cers of key employees of the organization?		15 b		<u>X</u>			
		the process in Schedule O (see instructions)							
	entity dur	ganization invest in, contribute assets to, or participate in a joint venture or similar ing the year?	_	16a		<u>X</u>			
	b If 'Yes,' h in joint ve status wit	as the organization adopted a written policy or procedure requiring the organization inture arrangements under applicable federal tax law, and taken steps to safeguard high respect to such arrangements?	to evaluate its participation the organization's exempt	16b					
Se		Disclosures		100					
		ates with which a copy of this Form 990 is required to be filed VOK							
18	Section 6 inspection	104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and Indicate how you make these available. Check all that apply	nd 990-T (501(c)(3)s only) av	aılabl	e for p	oublic			
	Own	website Another's website X Upon request							
19	Describe statement	in Schedule O whether (and if so, how) the organization makes its governing documes available to the public SEE SCHEDULE O	ents, conflict of interest poli	cy, ar	nd fina	incial			
		name, physical address, and telephone number of the person who possesses the book KELLY 5838 S. SHERIDAN TULSA OK 74145 918-355-917		ınızatı	on:				
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Form 990 (2008)

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) or 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

X Check this box if the organization did not compensate any officer, director, trustee, or key employee.										
(A)	(B)	(c)						(D)	(E)	(F)
Name and Title	Average hours		Position (check			hat appl		Reportable	Reportable	Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099 MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
		recto	utior	<u> </u>	emp	est c loyee	<u>e</u>	(· · = · · · · · · · · · · · · · · · ·	(organization and related
		trus	nal tr		oyee	omp				organizations
		tee	ustee			ensat				
TVAD CHEHADEH	ļ					e e				
IMAD SHEHADEH PRESIDENT	1	Х		Х			ļ	0.	0.	0
CHARLES ADAMS		^	-	_		<u> </u>	_	0.	0.	0.
SECY/TREASURER	1	х		х				0.	0.	0.
JOHN BARNETT							-			<u></u>
DIRECTOR	1	Х						0.	0.	0.
DAVID NIEDNAGLE										
DIRECTOR	1	Х					<u> </u>	0.	0.	0.
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(A)	(B)	\ey			<u>.уус</u> с)	C 3,	aiii	(D)	(E)		<u>(COIII.)</u> (F)	
Name and Title	Average	Posi	tion (checl)	•	that a	pply)	Reportable	Reportable	Estimated		
	hours per week	or director	Institutional trustee	Officer	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amoun comp fro orga and	t of other ensation m the nization related nizations	
			-									
									_			
	<u> </u>				_							
											_	
						ļ						
1 b Total							>	0.			(
2 Total number of individuals (including those in 1a) organization ► 0	who rec	eive	d m	ore	thar	า \$1	00,0	00 in reportable o	compensation from	the		
3 Did the organization list any former officer, director	or trust	ee, l	key	emp	oloy	ee,	or hi	ghest compensat	ed employee		Yes N	
on line 1a ⁹ If 'Yes,' complete Schedule J for such i For any individual listed on line 1a, is the sum of re the organization and related organizations greater t			mpe	nsa If 'Y	tıon 'es'	and	d oth	er compensation e Schedule J for	from such	3		
individual5 Did any person listed on line 1a receive or accrue or	compens	satio	n fr	om a	any	unre	elate	ed organization fo	r services	4	_	
rendered to the organization? If 'Yes,' complete Sc Section B. Independent Contractors	hedule .	tor	suc	h pe	erso	n				_ 5		
1 Complete this table for your five highest compensa compensation from the organization	ted inde	pen	deni	t cor	ntra	ctors	s tha	t received more t	han \$100,000 of			
(A) Name and business addres	ss							(B Description	of Services	(C Comper) isation	
			_									
											_	
2 Total number of independent contractors (including compensation from the organization ► 0	those I	n 1)	who	rec	ceiv	ed n	nore	than \$100,000 in				

EK KEVENUE	of contributions reported on line 1c) See Part IV, line 18	a				
Ē	b Less direct expenses	b				
2	c Net income or (loss) from fundraising of	events >				
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activ	vities 🕨	-			
	10a Gross sales of inventory, less returns and allowances	a				
	b Less cost of goods sold	b[
	c Net income or (loss) from sales of inve	entory				
	Miscellaneous Revenue	Rusiness Code		-	- "	

-257.

-257.

11 a

12

c Gain or (loss)

d Net gain or (loss)

d All other revenue.e Total. Add lines 11a-11d

10c, and 11e

Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c,

0

0

-257.

Part IX Statement of Functional Expenses												
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.												
	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).											
	not include amounts reported on lines 7b, 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											
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	1,343,739.	1,343,739.									
4	Benefits paid to or for members		, ,									
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.							
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.							
7	Other salaries and wages	53,402.	28,259.	13,719.	11,424.							
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	33,402.	20,237.	13,713.	11,424.							
9	Other employee benefits											
10	Payroll taxes	1,464.	1,288.	176.								
	Fees for services (non-employees)											
	a Management											
	Legal	40.	35.	5.								
•	C Accounting	6,210.	5,465.	745.								
	i Lobbying											
•	Prof fundraising svcs See Part IV, In 17											
f	Investment management fees											
ç	g Other											
12	Advertising and promotion											
13	Office expenses											
14	Information technology											
15	Royalties	-			· · · · · · · · · · · · · · · · · · ·							
16	Occupancy		7									
17	Travel	5,466.	1,822.	1,822.	1,822.							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	37 100.	1,022.	1,022.	1,022.							
19	Conferences, conventions, and meetings	1,125.	562.		563.							
20	Interest											
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	1,379.		689.	690.							
23 24	Insurance 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)											
a	MERISTEM CONTRACT	39,000.	39,000.									
	SEGRAVES SUPPORT	15,275.	15,275.	-								
	PRINTING & PUBLICATION	3,841.	1,921.		1,920.							
	BANK FEES	2,438.	1,219.	1,219.	1,940.							
	POSTAGE	1,838.	612.	613.	613.							
	All other expenses.	3,555.	2,368.	491.	696.							
	Total functional expenses Add lines 1 through 24f	1,478,772.	1,441,565.	19,479.	17,728.							
26	Joint Costs. Check here ▶ ☐ If 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	1,410,112.	1,441,303.	15,415.								
BAA	L				Form 990 (2008)							

Form **990** (2008)

Pa	<u>irt X·</u>	Balance Sheet				_			
					(A) Beginning of year		(B End of) f year	
	1	Cash - non-interest-bearing			18,049.	1		18,3	33.
	2	Savings and temporary cash investments		[2			
	3	Pledges and grants receivable, net		[3			 ,
	4	Accounts receivable, net				4	_		
	5	Receivables from current and former officers, director or other related parties. Complete Part II of Schedule	s, trus L	tees, key employees,		5			
	6	Receivables from other disqualified persons (as define	ed und	ler section 4958(f)(1))					
		and persons described in section 4958(c)(3)(B). Comp	olete F	Part II of Schedule L		6			
S	7	Notes and loans receivable, net				7			
A S S E T S	8	Inventories for sale or use				8			
Ś	9	Prepaid expenses and deferred charges				9			
	10 a	Land, buildings, and equipment cost basis	10 a	4,318.					
	b	Less accumulated depreciation Complete Part VI of							
		Schedule D	10Ь	2,154.	3,535.	10 c		2,1	64.
	11	Investments — publicly-traded securities		[11			
	12	Investments – other securities. See Part IV, line 11				12			
	13	Investments – program-related See Part IV, line 11		1		13			_
	14	Intangible assets				14			
	15	Other assets See Part IV, line 11				15			
	16	Total assets Add lines 1 through 15 (must equal line	34)		21,584.	16		20,4	97.
	17	Accounts payable and accrued expenses				17			
	18	Grants payable		18					
	19	Deferred revenue		_		19			
Ĭ	20	Tax-exempt bond liabilities				20			
Ê	21	Escrow account liability Complete Part IV of Schedule				21			
LIABILITIES	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per	stees, sons.	key employees, Complete Part II					
Ę		of Schedule L				22			
S	23	Secured mortgages and notes payable to unrelated the	ırd pa	rties	***	23			
	24	Unsecured notes and loans payable				24			
	25	Other liabilities. Complete Part X of Schedule D		_	<u>1.</u>	25			
	26	Total liabilities. Add lines 17 through 25	ভো		1.	26			0.
Ē		Organizations that follow SFAS 117, check here	X ar	nd complete lines					
	27	27 through 29 and lines 33 and 34.			01 500		· -		
Ą	27	Unrestricted net assets Temporarily restricted net assets			21,583.	27		20,4	97.
Š	29	Permanently restricted net assets				28			
O R	23	Organizations that do not follow SFAS 117, check he	ro >	and complete		29			
		lines 30 through 34.	16 -	and complete					
FUZD	30	Capital stock or trust principal, or current funds		-		30			
	31	Paid-in or capital surplus, or land, building, and equip	ment	fund		31			
Ļ	32	Retained earnings, endowment, accumulated income,				32			
BALAZCES	33	Total net assets or fund balances.	0, 0.,	ior rando	21,583.	33		20,4	97
Ē	34	Total liabilities and net assets/fund balances.			21,584.	34		$\frac{20,1}{20,4}$	
Pa	rt XI						<u>-</u>	<u>.,, ,</u>	
								Yes	No
1	Acc	counting method used to prepare the Form 990 $[X]$ C	ash	Accrual	Other				
2	a We	re the organization's financial statements compiled or	review	ed by an independent a	accountant?		2a		X
		re the organization's financial statements audited by a					2b		X
	c If '\ rev	Yes' to 2a or 2b, does the organization have a committ iew, or compilation of its financial statements and sele	ee tha	t assumes responsibility of an independent accou	y for oversight of the a untant?	iudit,	2c		
3	a As	a result of a federal award, was the organization requil dit Act and OMB Circular A-133?	red to	undergo an audit or aud	dits as set forth in the	Single			v
		ont Act and OMB Circular A-1337 Yes,' did the organization undergo the required audit or	المناطبة	c?			3a	\longrightarrow	<u> </u>
RΔ		res, and the organization undergo the required audit of	audit	o:	<u></u>		3b	990 (2008)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2008

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

JORI)AN	EVA	NGE	LICA	L TI	HEOLO	GICAL	SE	MINA	ARY						32-03	164159)		
Part		Reas	on f	or Pu	ablic	Chari	ity Statu	us (All o	rganız	ations	must d	comple	te this	part.)	(see	nstruct	ions)_		
The o	rgar	ıızatıoı	ıs n	ot a pr	rıvate	founda	tion beca	use	ıt ıs: (Please	check o	nly one	organız	ation)						
1		A chur	ch, c	onvent	tion of	church	nes or ass	socia	ation o	of churcl	hes desc	cribed in	section	n 170(b)	(1)(A)(i)).				
2		A scho	ol de	scribe	d in s	ection	1 70(b) (1)((A)(i	i). (At	tach Sc	hedule f	Ξ)								
3		A hosp	oital c	r coop	perativ	e hosp	ıtal servic	ce or	rganıza	ation de	escribed	ın secti	on 170(b)(1)(A)	(iii). (At	tach Scl	nedule H)		
4		A med	ical r	eseard	ch orga	anızatıc	on operate	ed ır	n conju	unction	with a h	ospital (describe	d in se	ction 17	'0(b)(1)(A	A)(iii) . Er	nter the h	ospital's	S
_				and st				- -					- - -							
5		170(b)	(1)(A)	(iv). ((Comp	lete Pa	art II)									rnmenta	l unit de:	scribed in	section	n
6 7	⊽ 1.	An ord	ianiza	ation th	nat no	rmally	nment or receives a omplete F	a su	bstant							it or fron	n the ger	neral publ	ıc desc	rıbed
8	In section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)																			
9		An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)																		
10	\Box	An org	anıza	ation o	rganız	ed and	operated	d exc	clusive	ly to te	st for pu	ıblıc saf	ety See	sectio	n 509(a)	(4). (se	e instruc	tions)		
11	Π.	An ord	ianiza	ation o	rganız	ed and	operated	d exc	clusive	elv for th	he benet	fit of to	nerform	the fur	nctions (of orca	rry out th	ne nurnos	es of or the box	ne or x that
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III – Functionally integrated d Type III – Other																			
е	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)																			
f	f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box																			
g		Since	Augu	st 17,	2006,	has the	e organiz	atıor	n acce	pted an	ny gift o	r contrib	oution fr	om any	of the f	ollowing	persons	;7		
	,	(i) á	pers	son wh . the a	no dire	ctly or	indirectly by of the s	con	ntrols,	either a organiz	lone or	togethe	r with pe	ersons c	lescribe	d ın (ıı)	and (III)	11 g (i)	Yes	No
		(ii) a	a fam	ily mei	mber	of a pe	erson des	crib	ed ın ((i) above	e?							11 g (ii		
				-			f a perso					bove?						11 g (ii		
h						-	on about						n suppo	rts						
	(i)	Name o Orgar	f Suppo nization	orted		(ii) E	EIN		(descril above	e of organ bed on line or IRC se instructio	es 1-9 ection	organiza (i) liste	Is the tion in cold in your erning ment?	the orga	you notify nization in (i) of upport?	lorganizat	s the ion in col zed in the S ?	(vii) Amo	unt of Sup	port
									<u>-</u>			Yes	No	Yes	No	Yes	No			
												ļ								
						,	-			_	-	1								
															-					
					-				_	_			-		-	-				
					 										_		_			
Total																				

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)

	(Complete only if you checke	ed the box on line	5, 7, or 8 of Part	1)						
<u>Sec</u>	tion A. Public Support					······				
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')			293,896.	1,442,619.	1,477,940.	3,214,455.			
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.			
3	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge						0.			
4	Total. Add lines 1-3	_0.	0.	293,896.	1,442,619.	1,477,940.	3,214,455.			
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)						721,422.			
6	Public support. Subtract line 5 from line 4						2,493,033.			
Sec	tion B. Total Support									
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
7	Amounts from line 4 0. 0. 293, 896. 1, 442, 619. 1, 477, 940.						3,214,455.			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						0.			
9	Net income form unrelated business activities, whether or not the business is regularly carried on						0.			
10	Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV)						0.			
11	Total support. Add lines 7 through 10						3,214,455.			
12	Gross receipts from related activ	rities, etc (see ins	tructions)			12	0.			
13	First five years. If the Form 990 organization, check this box and		ition's first, secon	d, third, fourth,	or fifth tax year a	s a section 501(c)	(3) ► X			
Sec	tion C. Computation of Pul	blic Support P	ercentage							
14	Public support percentage for 20	008 (line 6, column	(f) divided by lin	e 11, column (f)		14	%			
15	Public support percentage for 20	007 Schedule A, Pa	art IV-A, line 26f			15	%			
16 a	a 33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a pub	not check the boolicly supported or	x on line 13, and ganization.	d the line 14 is 33	-1/3 % or more, c	heck this box			
k	b 33-1/3 support test — 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization									
17 a	17a 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.									
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	nd-circumstances test. The organiz	t test, check this ation qualifies a	box and stop he s a publicly suppo	re. Explain in Part orted organization	IV how the ►			
18	Private foundation. If the organi	zation did not che	ck a box on line,	13, 16a, 16b, 17a	a, or 17b, check t	his box and see in	structions			
RΔΔ					9.0	hadula A (Earm O	90 or 990-F7) 2008			

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

<u>Sec</u>	tion A. Public Support										
Caler	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8	(f) Total			
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants ')										
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose										
3	Gross receipts from activities that are not an unrelated trade or business under section 513										
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf										
5	The value of services or facilities furnished by a governmental unit to the organization without charge										
	Total. Add lines 1-5 Amounts included on lines 1, 2, 3 received from disqualified persons				-						
b	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.)										
Sec	tion B. Total Support					<u> </u>					
	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8	(f) Total			
	Amounts from line 6	3.27 = 3.27	(5) 2000	(0,200	(2) 2007	(0) 200					
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.										
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				,			, ···			
	Add lines 10a and 10b Net income from unrelated business activities not included inline 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)										
	Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	is for the organiza	ation's first, secor	nd, third, fourth,	or fifth tax year a	s a section !	501(c)(3)) <u> </u>			
	tion C. Computation of Pul										
	Public support percentage for 20			na 13 natuma (6)	`		15	0/			
	Public support percentage from a	15	<u>%</u>								
_	tion D. Computation of Inv						16				
					.mn (f)		17	0/			
	7 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)										
18					: 10 mars th 22 1/2	االدسيم /00	712 - 14	%			
	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 b 33-1/3 support tests – 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18										
O	is not more than 33-1/3%, check	this box and sto	o not check a box o here. The organ	con line 14 or 19 ization qualifies	a, and line 16 is r as a publicly supp	nore than 3 orted organ	ວ-⊺/ວ%, ≀zation	and line 18			
20	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										

Schedule A	(Form	990 or 9	90-EZ) 2	UU8 J	UKDAN	EVANG	FLICAL	- THEOT	OGTU	HT SEMI	NARY	32-016	4159	Page	4
Part IV	Suppl Part	lement I, line	al Info i 17a or	r matior 17b; or	n. Comp Part II	olete the 1	s part t 2. Prov	o provid ide any	e the other	explanatı addıtıona	on requi	red by F ation. (se	Part II, III ee instru	ne 10; ictions)	
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TEEA0404L 10/07/08

Schedule A (Form 990 or 990-EZ) 2008

BAA

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name	of the organization			[]	Employer Identification	number
JOF	RDAN EVANGELICAL THEOLOGICAL S	EMINARY		[3	32-0164159	
Par	t I Organizations Maintaining Dono the organization answered 'Yes' t	r Advised Funds or Othe o Form 990, Part IV, line	r Similar Funds 6.	or Acco	unts Complete	ıf
		(a) Donor advised fu	unds	(b) Fur	nds and other acc	ounts
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			-		
-		and advisors in writing that the				
	Did the organization inform all donors and dor funds are the organization's property, subject	to the organization's exclusive	legal control?		Yes	☐ No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for impermissible private benefit??	ors, and donor advisors in writing the benefit of the donor or donor the donor or donor	g that grant funds r or advisor or other	nay be	Yes	No
Par	t II Conservation Easements Comple	ete if the organization ans	swered 'Yes' to	Form 990		7.
	Purpose(s) of conservation easements held by					
	Preservation of land for public use (e.g., r		Preservation of a	n historical	ly important land	area
	Protection of natural habitat	,	Preservation of c		•	
	Preservation of open space					
2	Complete lines 2a-2d if the organization held	a qualified conservation contrib	ution in the form of	a conserva	ation easement or	the last day
_	of the tax year					
					Held at the End of	the Year
a	Total number of conservation easements			2a		
t	Total acreage restricted by conservation ease	ments		2 b		
c	: Number of conservation easements on a certi	fied historic structure included i	ın (a)	2 c		
C	Number of conservation easements included i	n (c) acquired after 8/17/06		2 d		
3	Number of conservation easements modified,	transferred, released, extinguis	shed, or terminated	by the orga	anization during th	ne taxable
	year ▶					
4	Number of states where property subject to co					
5	Does the organization have a written policy re enforcement of the conservation easement it	holds?			Yes	No No
6	Staff or volunteer hours devoted to monitoring					
7	Amount of expenses incurred in monitoring, in	nspecting, and enforcing easem	nents during the yea	ar►\$		
8	Does each conservation easement reported of 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the rec	quirements of section	on	Yes	No
9	In Part XIV, describe how the organization report include, if applicable, the text of the footnote conservation easements	s conservation easements in its re to the organization's financial s	evenue and expense tatements that desc	statement, a cribes the o	and balance sheet, organization's acco	and ounting for
Par	Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical 7 wered 'Yes' to Form 990,	Freasures, or O Part IV, line 8.	ther Simi	lar Assets	
1 a	If the organization elected, as permitted unde treasures, or other similar assets held for pub the text of the footnote to its financial statemen	lic exhibition, education, or res	earch in furtherance	and baland of public s	ce sheet works of service, provide, ii	art, historical n Part XIV,
t	of the organization elected, as permitted unde treasures, or other similar assets held for pub amounts relating to these items:	lic exhibition, education, or res	revenue statement earch in furtherance	and baland of public s	service, provide th	ne following
	(i) Revenues included in Form 990, Part VIII	, line 1			> \$	
	(ii) Assets included in Form 990, Part X				\	_
2	If the organization received or held works of a amounts required to be reported under SFAS	art, historical treasures, or other 116 relating to these items	r sımılar assets for	financial ga	iin, provide the fol	llowing
ā	Revenues included in Form 990, Part VIII, line	e 1			► \$	
t	Assets included in Form 990, Part X.				▶ \$	

Schedule D (Form 990) 2008 JORDA				32-016							
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)											
3 Using the organization's accessio that apply)	n and other records,	check any of the	e following that are a si	ignificant use of its colle	ection items (check all						
a Public exhibition		d Loan o	r exchange programs								
b Scholarly research		e U Other									
c Preservation for future generations											
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV											
5 During the year, did the organizat assets to be sold to raise funds ra	ion solicit or receive ather than to be mai	donations of art ntained as part o	, historical treasures, o f the organization's col	or other similar llection?	Yes No						
Part IV Trust, Escrow and Cus	stodial Arranger	nents Comple	ete if organization a		orm 990, Part						
IV, line 9, or reported an amount on Form 990, Part X, line 21.											
1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?											
b If 'Yes,' explain the arrangement	in Part XIV and com	plete the following	ng table [.]								
					Amount						
c Beginning balance				1c							
d Additions during the year				1d							
e Distributions during the year				1 e							
f Ending balance				1f	<u> </u>						
2a Did the organization include an ai		Part X, line 21?			YesNo						
	b If 'Yes,' explain the arrangement in Part XIV Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Part IV, line 10.										
Part V Endowment Funds Cor					T 435						
1 - Decrease of wear halones	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back						
1 a Beginning of year balance					 						
b Contributions	· · · · · · · · · · · · · · · · · · ·				 						
c Investment earnings or losses d Grants or scholarships					 						
e Other expenditures for facilities		 			 						
and programs											
f Administrative expenses					 						
g End of year balance		L									
2 Provide the estimated percentage	-	ance held as:									
a Board designated or quasi-endow		*									
b Permanent endowment ►											
c Term endowment ►	*										
3a Are there endowment funds not in	n the possession of	the organization	that are held and admi	nistered for the	Yes No						
organization by: (i) unrelated organizations					3a(i)						
(ii) related organizations					3a(ii)						
b If 'Yes' to 3a(ıı), are the related o	roanizations listed a	s required on Sc	hedule R?		3b						
4 Describe in Part XIV the intended	•	· · ·			<u> </u>						
Part VI Investments-Land, Bu				. line 10.							
Description of investment	(a) Cos	t or other basis evestment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value						
1a Land											
b Buildings											
c Leasehold improvements											
d Equipment			4,318.	2,154.	2,164.						
e Other											
Total. Add lines 1a-1e (Column (d) sho	ould equal Form 990	Part X, column	(B), line 10(c))	•	2,164.						
BAA				Sched	ule D (Form 990) 2008						

Schedule D (Form 990) 2008 JORDAN EVANGELICAL			32-016	4159 Page 3
Part VII Investments—Other Securities See Fo			N/A	
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua Cost or end-of-year mar	tion ket value
Financial derivatives and other financial products				
Closely-held equity interests				
Other				
				
		_		
		-		
	-			
Total. (Column (b) should equal Form 990 Part X, col (B) line 12.)				
Part VIII Investments-Program Related (See I	Form 990, Part X.	line 13)	N/A	<u></u> -
(a) Description of investment type	(b) Book value		(c) Method of valua	tion
			Cost or end-of-year mar	ket value
		ļ		
	ļ	ļ <u></u> -	· · · · · · · · · · · · · · · · · · ·	
		 		
		 		
				
	 	 		
	-			
		 		
				
Total Column (b)(should equal Form 990, Part X, Col (B) line 13.)				
Part IX Other Assets (See Form 990, Part X,	line 15) N/A	7		
(a) De	scription			(b) Book value
	·			
			 	
				,
	 .			
			· · · · · · · · · · · · · · · · · · ·	
				
Total. Column (b) Total (should equal Form 990, Part X, co	ol (B), line 15)	-	•	
Part X Other Liabilities (See Form 990, Part				
(a) Description of Liability	(b) Amount			
Federal Income Taxes				
	-			
	- 			
	·			
Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25)	•	$\overline{}$		
In Part XIV, provide the text of the footnote to the organiza		ents that ren	orts the organization's liabi	lity for uncertain tax
positions under FIN 48			one and organization of habi	,

Sche 5	dule D (Form 990) 2008 JORDAN EVANGELICAL THEOLOGICAL SEMINARY	2-016	4159	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		N/A	
1	Total revenue (Form 990, Part VIII,column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25)			
3	Excess or (deficit) for the year Subtract line 2 from line 1			
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4-8			
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per F	<u>Return</u>	N/A	
	Total revenue, gains, and other support per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments 2a			
b	Donated services and use of facilities 2b	_		
c	Recoveries of prior year grants.			
c	Other (Describe in Part XIV)			
e	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			
a	Investments expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV)			
C	: Add lines 4a and 4b	4c		
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12).	5		
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses pe	er Retu	ırn N/A	
1	Total expenses and losses per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities 2a	_		
t	Prior year adjustments 2b			
C	: Losses reported on Form 990, Part IX, line 25			
c	Other (Describe in Part XIV)			
ε	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
ā	Investments expenses not included on Form 990, Part VIII, line 7b	_]		
t	Other (Describe in Part XIV)]		
(: Add lines 4a and 4b	4c	_	
5	Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)	5		
Par	t XIV Supplemental Information			
Com line	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part I 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b.	V, lines	1b and 2b, Pa	art V,
- - .				

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Schedule **D** (Form 990) 2008

Schedule D	(Form 990) 2008 Supplemental Information (continued)	age 5
Part XIV	Supplemental Information (continued)	
		- - -

Schedule F . (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, line 15, or line 16.

Name of the organization

Employer identification number

JORDAN EVANGELICAL THEOLOGICAL SEMINARY 32-0164159 General Information on Activities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b. 1 For grantmakers. 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 award the grants or assistance? X Yes No 2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States 3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (f) Total offices in the employees or region (by type) (i e, (d) is a program expenditures in fundraising, program services, grants to recipients region agents in service, describe region region specific type of located in the region) service(s) in region MIDDLE EAST & NORTH AFRICA 0 1 PROGRAM SERVICES SCHOLARSHIPS & CONSTRUCTION 1,343,739.

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

Schedule F (Form 990) (2008)

1,343,739.

Schedule F (Form 990) 2008

32-0164159

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use Schedule F-1 (Form 990) if additional space is needed.

(i) Method of valuation (book, FMV, appraisal, other)										
(h) Description of non-cash assistance										
(g) Amount of non-cash assistance										
(f) Manner of cash disbursement		\$	1,270,366. WIRE TRANSFER							
(e) Amount of cash grant	A	CONSTRUCTION & SCHOLARSHIP\$	1,270,366.							
(d) Purpose of grant	D NORTH AFRIC	CONSTRUCTION						-		
(c) Region	MIDDLE EAST AND NORTH AFRIÇA				-					
(b) IRS code section and EIN (if applicable)										
1 (a) Name of organization										

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2008

3 Enter total number of other organizations or entities BAA

TEEA3502L 07/30/08

Page 3

JORDAN EVANGELICAL THEOLOGICAL SEMINARY

Schedule **F** (Form 990) 2008

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2008 (g) Description of non-cash assistance (f) Amount of non-cash assistance CHECKS 73,373. WIRE TRANSFER & (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients MIDDLE EAST AND NORTH AFRICA (b) Region SCHOLARSHIPS, FOOD, CLOTHING, & SHELTER (a) Type of grant or assistance BAA

Schedule F	(Form 990) 2008	JORDAN	<u>EVANGELICAL</u>	THEOLOGICAL	SEMINARY	32-0164159	Page 4
Part IV	Supplemental						
	Complete this par	t to provide t	the information req	uired in Part I, line	2, and any other a	dditional information.	
	- 						
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Schedule **F** (Form 990) 2008

SCHEDULE © (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► 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.

Open to Public Inspection

Employer identification number

JORDAN EVANGELICAL THEOLOGICAL SEMINARY	32-0164159
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION	
JORDAN EVANGELICAL THEOLOGICAL SEMINARY WORKS TO (I) SE	PREAD THE GOSPEL OF JESUS
CHRIST_THROUGH_PREACHING,_TEACHING,_MUSIC,_PRAISE,_WORS	SHIP, PERSONAL TESTIMONIES,
CHURCH_SERVICES_AND_ALL_OTHER_ACTIVITIES_ASSOCIATED_WIT	IH AND COMMONLY PERFORMED BY
CHRISTIAN_CHURCHES_& SEMINARIES_AND_(II) PROVIDE RELIEF	F OF POVERTY & CHARITABLE AID
THROUGHOUT THE WORLD THROUGH ECONOMIC & AGRICULTURE DEV	VELOPMENT PROGRAMS, HEALTH
EDUCATION, ENVIRONMENTAL PROJECTS, ORPHAN CARE, EDUCATI	ION, THE PRODUCTION AND
BROADCAST OF EDUCATIONAL PROGRAMS AND THE PROMOTION OF	CHRISTIAN ETHICS, MORALITY &
PRINCIPLES.	
FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHME	:NTS
JETS_USA - STATEMENT OF PROGRAM SERVICE_ACCOMPLISHMENTS	5 (7/1/08 - 6/30/09)
JORDAN_EVANGELICAL_THEOLOGICAL_SEMINARY, INC. WORKS_TO	RELIEVE THE BURDENS OF ALL
PEOPLE, AS WELL AS BRING THEM TO A SAVING KNOWLEDGE OF	FAITH IN JESUS CHRIST. TO
PROMOTE THE IMPORTANCE OF THEOLOGICAL EDUCATION AND TRA	AINING OF LEADERSHIP, JETS USA
HAS ACCOMPLISHED THE FOLLOWING:	
1.BOARD MEMBERS CONTINUE TO CONDUCT MEETINGS AT UNIVERS	SITIES, CHURCHES, AND RELIGIOUS
CONFERENCES TO PROMOTE THE MINISTRY AND NEEDS OF JETS.	
2.CONDUCTED FUNDRAISING TRIPS AND SMALL GROUP MEETINGS	TO TARGET USA CHURCHES,
FOUNDATIONS, COMPANIES, AND INDIVIDUALS FOR THE BENEFIT	OF THE MINISTRIES OF JETS.
3.BOARD MEMBERS CONTINUE TO CONDUCT MEETINGS WITH KEY E	BUSINESS LEADERS TO SHARE HOW
THEY CAN BE INVOLVED WITH THE MINISTRY OF JETS AND THE	TRAINING OF LEADERS AT JETS
AND IN THE MIDDLE EAST.	
4.TOOK PART IN AN INTERNATIONAL SUMMIT FOCUSING ON THEO	DLOGICAL EDUCATION.
5.CONTINUE TO DEVELOP THE INFRASTRUCTURE OF THE UNITED	STATES OFFICE, WHICH INCLUDES:
A.ESTABLISHING OPERATING PROCEDURES AND PRACTICES.	
B.MAILING INFORMATIONAL AND PROMOTIONAL BROCHURES TO IN	NDIVIDUALS, BUSINESSES,

Schedule O (Form 990) 2008 Name of the organization	Page 2								
JORDAN EVANGELICAL THEOLOGICAL SEMINARY	32-0164159								
FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS (COMPLISHMENTS)	ITINUED)								
CHURCHES, AND FOUNDATIONS WHO ARE INTERESTED IN THE MINISTRY O	CHURCHES, AND FOUNDATIONS WHO ARE INTERESTED IN THE MINISTRY OF JETS.								
C.PROCESS AND DEPOSIT DONATIONS TO THE JORDAN EVANGELICAL THEOLOGICAL SEMINARY, INC.									
AND MAIL RECEIPTS TO DONORS.									
6.CREATE AND UPDATE BROCHURES AND PROMOTIONAL MATERIALS.									
7.PROMOTED THE TRANSLATION AND PUBLISHING OF RELEVANT BOOKS, I	NCLUDING A DOCTRINAL								
BOOK WRITTEN BY DR. IMAD SHEHADEH ON THE TRINITY AND SEVERAL A	RTICLES IN CHRISTIAN								
MAGAZINES.									
8.SEMINARY PRESIDENT WROTE ARTICLES FOR CHRISTIANITY TODAY AND	THE WASHINGTON TIMES.								
HE HAS ALSO BEEN INTERVIEWED BY THE ASSOCIATED PRESS AND DAY OF DISCOVERY.									
9.SUPPORTED THE JORDANIAN EVANGELICAL THEOLOGICAL SEMINARY IN AMMAN, JORDAN AS IT									
SEEKS TO DEVELOP LEADERS IN THE MIDDLE EAST, EXPAND ITS STUDEN	T BASE, AND BUILD ITS								
NEW CAMPUS SITE.									
10.TRAVEL TO OVERSEE AND EVALUATE EDUCATIONAL PROGRAMS. MEETI	NGS WERE CONDUCTED WITH								
INSTITUTIONS SIMILAR TO JETS FOR THE PURPOSE OF TRAINING CONFE	RENCES.								
FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS									
NO REVIEW WAS OR WILL BE CONDUCTED.									
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY A	VAILABLE								
SENT ON REQUEST									

Form **4562**

6

separately, see instructions

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

Attachment Sequence No 67

Department of the Treasury Internal Revenue Service ► See separate instructions. ► Attach to your tax return. Name(s) shown on return JORDAN EVANGELICAL THEOLOGICAL SEMINARY Business or activity to which this form relates FORM 990/990-PF **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I 1 Maximum amount. See the instructions for a higher limit for certain businesses.

\$250,000 2

Identifying number

32-0164159

3 \$800,000. 4

Dollar limitation for tax year. Subtract line 4 from line 1 If zero or less, enter -0- If married filing 5 (b) Cost (business use only) (C) Elected cost

8

7	Listed property. Enter the amount from line 29	7	

8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7

9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10

11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11

12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 13

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

2 Total cost of section 179 property placed in service (see instructions).

(a) Description of property

3 Threshold cost of section 179 property before reduction in limitation (see instructions)

Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-

Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 15

16 Other depreciation (including ACRS) 1,378 16

MACRS Depreciation (Do not include listed property) (See instructions) Part III

Section A

MACRS deductions for assets placed in service in tax years beginning before 2008 17

18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here

Section B — Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (C) Basis for depreciation (a) (b) Month and (f) Method (d) (e) (g) Depreciation Classification of property year placed in service (business/investment use only - see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L 27.5 yrs h Residential rental MM S/L property 27.5 yrs MM S/L i Nonresidential real 39 yrs MM S/L property MM S/L Section C — Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

20 a Class life S/L b 12-year 12 yrs S/L c 40-year 40 yrs MM S/L

Part IV | Summary (See instructions.)

21 Listed property. Enter amount from line 28 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions

For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

FDIZ0812L 06/12/08

Form 4562 (2008)

1,378.

21

22

Form **8868** (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

If you are	filing for an Automatic 3-Month I	Extension, complete only Part I and check this box	. × X
		omatic) 3-Month Extension, complete only Part II (on page 2 of th	
		dy been granted an automatic 3-month extension on a previously	filed Form 8868.
Part A	utomatic 3-Month Extensi	on of Time. Only submit original (no copies needed).	
A corporation	required to file Form 990-T and i	requesting an automatic 6-month extension — check this box and	complete Part I only
All other corpuncome tax re	orations (including 1120-C filers), turns	partnerships, REMICS, and trusts must use Form 7004 to reques	t an extension of time to file
Electronic Fil returns noted the additional Form 990-T I this form, visi	ing (e-file). Generally, you can el- below (6 months for a corporatio (not automalic) 3-month extensi- nstead, you must submit the fully t www.irs gov/efile and click on e	ectronically file Form 8868 if you want a 3-month automatic extension required to file Form 990-T). However, you cannot file Form 886 on or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a completed and signed page 2 (Part II) of Form 8868. For more defined for Charities & Nonprofits	sion of time to file one of the 58 electronically if (1) you want a composite or consolidated letails on the electronic filing of
	Name of Exempt Organization		Employer identification number
Type or			
print	JORDAN EVANGELICAL T	HEOLOGICAL SEMINARY	32-0164159
File by the due date for	Number, sireet, and room or suite number. If a P.O. box, see instructions		
filing your return See	P. O. BOX 33042		
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions		
	TULSA, OK 74153-1042		
Check type of return to be filed (file a separate application for each return)			
X Form 990	<u>}</u> -	Form 990-T (corporation)	
		Form 990-T (section 401(a) or 408(a) trust) Form 52	
Form 990		Form 990-T (trust other than above)	
Form 990)-Pr	Form 1041-A Form 88	370
Telephone If the org	anization does not have an office for a Group Return, enter the org	FAX No. Fax No	
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 will cover			
		hs for a corporation required to file Form 990-T) extension of time	
	tension is for the organization's re	the exempt organization return for the organization named above	
calendar year 20 or			
► X tax year beginning 7/01 , 20 08 , and ending 6/30 , 20 09 .			
2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period			
			T T T T T T T T T T T T T T T T T T T
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.			
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.			. зы\$ 0.
c Balance Due. Subtract line 3b from line 3a. 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. 3c \$			
Caution. If y payment inst		nic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8453-EO	orm 8879-EO for
BAA For Pri	Form 8868 (Rev. 4-2009)		