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Check if applicable

Address change

Name change

Initial return

Termination

Part I

Activities & Governance

**SCANNED MAR 3 0 2010** 

Amended return

Application pending

Please

use IRS

label or

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See

Specific

Instruc-

tions

Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Department of the Treasury

OMB No 1545-0047 **Return of Organization Exempt From Income Tax** 2008 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Open to Public The organization may have to use a copy of this return to satisfy state reporting requirements Inspection 01/08 6/30/09 For the 2008 calendar year, or tax year beginning and ending C Name of organization D Employer identification number WESLEY BIBLICAL SEMINARY 64-0579585 Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number O, BOX 9938 601-366-8880 3,487,081 City or town, state or country, and ZiP + 4 G Gross receipts \$ **JACKSON** MS 39286 F Name and address of principal officer H(a) is this a group return for affiliates? No Yes H(b) Are all affiliates included? If "No," attach a list (see instructions) X 501(c) ◀ (insert no ) 4947(a)(1) or website: ▶ WWW.WBS.EDU H(c) Group exemption number ▶ Type of organization X Corporation 1975 M State of legal domicile Year of formation Briefly describe the organization's mission or most significant activities GRADUATE LEVEL INSTRUCTION IN THEOLOGY FOR APPROXIMATELY 150 STUDENTS. Check this box If the organization discontinued its operations or disposed of more than 25% of its assets 19 Number of voting members of the governing body (Part VI, line 1a) 19 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 48 Total number of employees (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, line 12, column (C)

	b	Net unrelated business taxable income from Form 990-T, line 34		b	0
			Prior Year		Current Year
_	8	Contributions and grants (Part VIII, line 1h)	611,97	4	739,997
Revenue	9	Program service revenue (Part VIII, line 2g)	571,88	5	514,277
	10	Investment manne (Port) (III ordinar (A) lines 2 A and 74)	227,70	5	-189,363
	11	Other revenue (Part VIII column (A) lines 5 6d 8c 9c 100 land (10)	140,35	7	51,778
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, bolumn (A), line 12)	1,551,92	1	1,116,689
٦					
	14	Benefits paid to or for members (Part IX, column (A), line +)			
,	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,526,96	5	1,496,318
Expenses	168	Professional fundraising fees (Part IX, column (A), line 11e)			
ğ	t	Total fundraising expenses (Part IX, column (D), line 25)  135,343			
ű	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	796,54	9	1,024,571
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,323,51	.4	2,520,889
	19	Revenue less expenses Subtract line 18 from line 12	-771,59	3	-1,404,200
5 5			Beginning of Year		End of Year
	20	Total assets (Part X, line 16)	5,718,47	0	4,385,005

Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, copect, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Signature of officer OM Type or print name and title Preparer's identifying number Check if Preparer's (see instructions) Paid 26/10 signature employed P00001696 Preparer's BROWN & RUSS CO., 20-5630688 EIN Firm's name (or yours **Use Only** EAST CAPITOL STREET 415 if self-employed), Phone address, and ZIP + 4 601-354-4926 JACKSON, MS 39201 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

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

436,675

3,948,330

416,829

5,301,641

Part III Statement of Program Service Accomplishments (see instructions)		
Briefly describe the organization's mission	<del></del>	
GRADUATE LEVEL INSTRUCTION IN THEOLOGY FOR APPROXIMATEL	Y	
150 STUDENTS.	-	
130 BIODENIS.		•
2 Did the assessment and delayer and find an arrival and the second and the secon	· · · · · · · · · · · · · · · · · · ·	
2 Did the organization undertake any significant program services during the year which were not listed on		
the pnor Form 990 or 990-EZ?		Yes X No
If "Yes," describe these new services on Schedule O		
3 Did the organization cease conducting, or make significant changes in how it conducts, any program		
services?		∐ Yes X No
If "Yes," describe these changes on Schedule O		
4 Describe the exempt purpose achievements for each of the organization's three largest program services by exp	enses	
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of	grants and	
allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a (Code ) (Expenses \$ 650,540 including grants of \$	) (Revenue \$	403,191
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# Part IV Checklist of Required Schedules

	oneckilst of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		х	
•	complete Schedule A	1 2	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	<b> </b>		
,	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	х	
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		L
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
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	٦-	X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	├
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,	1	<sub>v</sub>	1
	Parts VI, VIII, IX, or X as applicable	11	X	-
12	Did the organization receive an audited financial statement for the year for which it is completing this return	1 42	x	
49	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the U.S?	14a		x
b		170	<del> </del>	<del> </del> -
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	1.13		
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	ļ	X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	<u> </u>	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	ļ	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	├	X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	-	X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			w
• -	Schedule J	23	<del>                                     </del>	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		1	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions	24a	1	x
<b>.</b>	24b–24d and complete Schedule K If "No," go to question 25.  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b	<del>                                     </del>	<del>  **</del>
b		1	1	<del>                                     </del>
٠	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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		X
b	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		X
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	<u> </u>	X
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	1	X
		E	~ aan	/2000

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			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		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	<u> </u>	X
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a		1	
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
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	1		
	conservation contributions? If "Yes," complete Schedule M	_30_		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		
	Schedule N, Part II	32	1	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,		ļ	<u> </u>
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete		1	İ
	Schedule R, Part V, line 2	35	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1	1	1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37	<u> </u>	<u> </u>

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance		<del></del>			
					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	1a	18			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able				
	gaming (gambling) winnings to prize winners?	. ,	ı	1c	X	
2a	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	48			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	)		2b		X
	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 b	y				
	this return?			_3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		<b> </b> -
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auti					
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	al				
	account)?			4a		X
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bal	1K				I
	and Financial Accounts.			5a	1	x
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b		X
þ	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			35	<del></del>	<del> </del> -
С	Regarding Prohibited Tax Shelter Transaction?			5c	ŀ	ŀ
6a	Did the organization solicit any contributions that were not tax deductible?			6a		x
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions	or				
_	gifts were not tax deductible?			6b		1
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more that	ın				
	\$75?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	required to file Form 8282?			7c	L	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	<u> </u>			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal content of the property of the property of the pay premiums on a personal content of the property of the pay premiums on a personal content of the pay premium of the p	onal				
	benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	?		7f	ļ	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g	├	X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C a	S				
	required?			7h	-	X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sect				1	
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponse	oring			1	x
	organization, have excess business holdings at any time during the year?			8	-	-
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			9a	Ì	x
a	Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a donor, donor advisor, or related person?			9b	<del> </del> -	X
b 10	Section 501(c)(7) organizations. Enter			35	<u> </u>	<del> </del> -
10 a	Initiation fees and capital contributions included on Part VIII, line 12	10a	1			1
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:		<del></del>		1	•
''a	Gross income from members or shareholders	11a	1			
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
_	amounts due or received from them )	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>			
				5	- 990	) (2000)

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

Sec	tion A. Governing Body and Management						
<u> </u>	aon A. Coverning Body and management					Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe	the					
	circumstances, processes, or changes in Schedule O See instructions	1	ì				
1a	Enter the number of voting members of the governing body	1a	19				
b	Enter the number of voting members that are independent	1b	19				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with					
	any other officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customanly performed by or under the	direct					
	supervision of officers, directors or trustees, or key employees to a management company or other pe				3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form		s filed?		4		$\overline{\mathbf{x}}$
5	Did the organization become aware during the year of a material diversion of the organization's assets				5		X
6	Does the organization have members or stockholders?				6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more mer	nbers					
	of the governing body?				7a	ļ	X
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other person	ns?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken du						
	the year by the following	J					
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9a	Does the organization have local chapters, branches, or affiliates?				9a		X
ь	If "Yes," does the organization have written policies and procedures governing the activities of such ch	apters.					
_	affiliates, and branches to ensure their operations are consistent with those of the organization?				9b		i
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization	ınızation	s				
. •	must describe in Schedule O the process, if any, the organization uses to review the Form 990				10	1	x
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be re-	ached at					
• •	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				11	i	Х
Sec	tion B. Policies						
		-				Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could	aive		•			
_	nse to conflicts?	Ū			12b	1	1
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es,"					
_	describe in Schedule O how this is done				12c	1	
13	Does the organization have a written whistleblower policy?				13		X
14	Does the organization have a written document retention and destruction policy?				14		X
15	Did the process for determining compensation of the following persons include a review and approval	by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and		n				Ī
а	The organization's CEO, Executive Director, or top management official?				15a	x	1
b	Other officers or key employees of the organization?				15b	X	
-	Describe the process in Schedule O. (see instructions)			•		1"	7
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent			1	1	1
	with a taxable entity during the year?				16a		x
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evalu	ate				Π.	Ī
~	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safe				Į.		
	the organization's exempt status with respect to such arrangements?				16Ь		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed MS						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T	501(c)(3	s)s only)				•
	available for public inspection Indicate how you make these available. Check all that apply	, ,-,,-					
	Own website Another's website X Upon request						
10	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	onflict of	interest				
19	policy, and financial statements available to the public						
20	State the name, physical address, and telephone number of the person who possesses the books an	d record	s of the				
20	organization TOM HALFORD 787 E. NOR						
.7	ACKSON		39286		601-36	56-8	8880
	RONDON		<u> </u>				

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees, and former such persons

Check this box if the organization did not compensate any officer, director, trustee, or key employee  (A) (B) (C) (D) (E) (F)											
Name and Title	and Title Average				all ti	hat apply	y)	Reportable	Reportable	Estimated	
	hours per week		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
BETH LUCE RE	ED	1									
CHAIRMAN	1	X		X				0	0	0	
CHARLIE ARTM	ANN										
VICE CHAIR.	1	X		X				0	0	0	
DOROTHY WITT	IG							-			
VICE SECR.	1	X		X				0	0	0	
DEA DEA BAKE	R	ŀ									
BD OF DIRECT	1	X						0	0	0	
ANNIE BINGHA	M										
BD OF DIRECT	1	X			l			0	0	0	
DERWOOD BOYL	ES							-			
BD OF DIRECT	1	X						0	_0	0	
A.D. BUFFING	TON										
BD OF DIRECT	1	X						0	0	0	
LEWIS BUNN											
BD OF DIRECT	1	X						0	0	0	
MARTIN CASE			l		ŀ						
BD OF DIRECT	1	X						0	0	. 0	
J. DAVID CHA	NDLER										
BD OF DIRECT	1	X	L		L			0	0	0	
JAMES HOWARD			l	İ							
BD OF DIRECT	1	X	<u>L</u>			$\sqcup$		0	0	0	
STUART KELLO	GG										
BD OF DIRECT	1	X		L	L	$oxed{oxed}$		0	0	0	
TOMMY MCKNIG			ļ	1							
BD OF DIRECT	1	X		<u> </u>	Ь.	$\perp \perp$		0	0	0	
JOHN MILNER			İ	1					_		
BD OF DIRECT	1	X		ļ	_			0	0	0	
KENTON RENFR	OE										
BD OF DIRECT	1	X	<u> </u>	<u> </u>		igspace		0	0	0	
DANIEL TIPTO	1		1	l							
BD OF DIRECT	1	X	<u> </u>			₩.		0	0	0	
MIKE WELDON	_	1	1						_	_	
BD OF DIRECT	11	X	<u>L_</u>	<u> </u>	<u> </u>		_	0	0	5 990 (2000)	

Part VII Section A	. Officers, Directors, Trus	stees	, Ke	y En	plo	/ees	and	Highest Compensated E	mployees (continued)	<del>,</del>		
(A)	(B)	L			C)			(D)	(E)		(F)	
Name and title	Average hours per week	or director	_	Officer	all Key employee	a Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	co	Estimated amount of other impensation from the rganization and related	
		"	8	ļ		sated				L .	ganizations	
ED WILLIAMSO	N	+-			-	<del>                                     </del>	-					
BD OF DIRECT	11	x						0	0			0
HARVEY WILL									• •		-	
BD OF DIRECT	1	X		<u> </u>				0	0	<del> </del>		0
RONALD E. SN PRESIDENT	1TH 40	1		x				94,017	0		٥	211
PRESIDENT	40	<del> </del>		^				94,017	<u> </u>			,311
			-		-							_
			-			ļ .	-			<u> </u>	<del></del>	
		-			-	-				-	-	
		-								-		
	:	<u> </u>	ļ	ļ		-	_			<u> </u>		
			<u> </u>			<u> </u>	<u> </u>			<u> </u>		
				<u> </u>		<u> </u>				ļ		
						ŀ			:			
1b Total	• • • • • • • • • • • • • • • • • • • •						<b></b>	94,017			9	,311
<ul><li>Total number of indicorganization ► 0</li></ul>	viduals (including those in	la) w	ho re	eceiv	ed n	nore	than	\$100,000 in reportable com	pensation from the			
										-	Yes	No
								ee, or highest compensated				x
	? If "Yes," complete Sched sted on line 1a, is the sum of							and other compensation from	m	•	3	1
the organization and								complete Schedule J for su				x
individual  5 Did any person lister	d on line 1a receive or accr	ue co	mpe	ensat	ion f	rom	any (	unrelated organization for	•	·	4	1
services rendered to	the organization? If "Yes,"										5	X
Section B. Independent  1 Complete this table		nsate	ed in	depe	ndei	nt co	ntrac	ctors that received more tha	n \$100,000 of	<del></del>	-	
compensation from	the organization (A) Name and business address						Т		(B) tion of services		(C) Compens	
	Name and business address						-	Descrip	ition of services		Compens	sation
							╁					
							$\vdash$	<del></del>				
							_					
							_					
											<del></del>	i
2 Total number of inde- compensation from	ependent contractors (incluit the organization	ding	those	e in 1	) wh	o red	eive	ed more than \$100,000 in			0	,
DAA	organical P						_	· · · · · · · · · · · · · · · · · · ·			Form 99	0 (2008)

FQ		3 Statement of Rev	renue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ম্ম	1a	Federated campaigns	1a			1evenue		912, 919, 01 914
EZ		Membership dues	1b					
Program Service Revenue   Contributions, gifts, grants		Fundraising events	1c					
캶		Related organizations	1d					
S,E		Government grants (contributions)	1e		#			
rion		All other contributions, gifts, grants,		· · · · · ·	1			
혈휩		and similar amounts not included above	1 <sub>f</sub>	739,997				
늘	a	Noncash contributions included in lines		96,757				
유	_	Total. Add lines 1a-1f		<b>•</b>	739,997			
<u>e</u>				Busn. Code				· · · · · · · · · · · · · · · · · · ·
盲	2a	TUITION AND FEES			403,191	403,191		
- Re	b	STUDENT HOUSING/A	UXILIARY		111,086	111,086		
<u>i</u>	C			<del></del>			-	
Š	d							
Ē	6							
ğ	f	All other program service rev	renue					
<u>~</u>		Total. Add lines 2a-2f		<b>&gt;</b>	514,277	······································		· · · · · · · · · · · · · · · · · · ·
	3	Investment income (including	dividends, int	erest, and				
		other similar amounts)		•	57,272			57,272
	4	Income from investment of ta	ax-exempt bon	d proceeds 🕨				
i	5	Royalties		<b>.</b>		-		
- 1		(ı) Rea	ıl .	(II) Personal				Ī
	6a	Gross Rents 9	2,022					
	b	Less rental exps 4	0,244					
	С	Rental inc or (loss) 5	1,778					
	_d	Net rental income or (loss)		_	51,778			51,778
	7a	Gross amount from (i) Securi sales of assets	ties	(ii) Other	·	'		
		other than inventory 2,08	3,513					
	b	Less cost or other	ŀ					
1			0,148					
	C	Gain or (loss)	6,635					
		Net gain or (loss) .		<u> </u>	-246,635		TIN-11-11-11-11-11-11-11-11-11-11-11-11-11	-246,635
	8a	Gross income from fundraising e	vents					
פחר		(not including \$				ŕ		,
Ve		of contributions reported on line '	1c)					<u> </u>
8		See Part IV, line 18	a					
Other Rever		Less direct expenses	b	· · · · · · · · · · · · · · · · · · ·				ŧ
0		Net income or (loss) from fur		ts 🕨	, , , , , , , , , , , , , , , , , , ,	, , <del>, , - , ,</del>		· · · · · · · · · · · · · · · · · · ·
	9a	Gross income from gaming activi	ı					
		See Part IV, line 19	a	-		,		
		Less direct expenses	b					ļ
		Net income or (loss) from ga Gross sales of inventory, les		<u> </u>		· · · · · · · · · · · · · · · · · · ·	<del></del>	<del></del>
	iva	returns and allowances	a					<b>1</b>
	<b>.</b>	Less cost of goods sold	ъ́ <u> —</u>					
		Net income or (loss) from sa		v <b>Þ</b>	j			Ť
		Miscellaneous Rever		Busn. Code				
	11a			1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	j			1
	b		•					
	c			<u> </u>				<del></del>
	d	All other revenue						<del> </del>
	e	Total. Add lines 11a-11d		<b></b>				
	12	Total Revenue. Add lines 1	n, 2g, 3, 4, 5, 6	id, 7d, 8c.				
		9c, 10c, and 11e	- ' '	<u> </u>	1,116,689	514,277	0	-137,585

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).

	All other organizations must co	omplete column (A) but ar	e not required to complet	e columns (B), (C), and (D)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		expenses	general expenses	
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				<del></del>
-	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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	105,268		21,186	84,082
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,154,760	681,008	473,752	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	43,686	24,339	19,347	
9	Other employee benefits	133,174	74,196	58,978	
10	Payroll taxes	59,430	20,186	39,244	
11	Fees for services (non-employees)				
a	Management				<del></del>
b	Legal	25 627		25,627	
C	Accounting	25,627 83,923		83,923	· · · · · · · · · · · · · · · · · · ·
d	Lobbying	03,923		03,323	
•	Professional fundraising services See Part IV, line 17	13,230		13,230	
T -	Investment management fees	70,761	23,970	10,105	36,686
g 12	Other Advertising and promotion	16,482	23,370	16,482	307000
13	Office expenses	51,342		50,181	1,161
14	Information technology	87,726		87,726	
15	Royalties				
16	Occupancy	143,312	72,461	67,963	2,888
17	Travel	72,316	13,048	59,268	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,107	2,386	3,721	
20	Interest	1,876		1,876	
21	Payments to affiliates				· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization	128,183	30,161	90,482	7,540
23	Insurance	60,951	11,943	46,022	2,986
24	Other expenses Itemize expenses not			1	
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)	175 550	175 550		·
a	WESLEY CHAPEL	175,558	175,558	29,072	
ь	LIBRARY	29,072	6 560	21,535	
C	MISCELLANEOUS	28,104 13,079	6,569 13,079	41,535	
d	STUDENT BOOKS	9,834	9,834		
e	STUDENT ACTIVITIES	7,088	7,088		<del></del>
95	All other expenses  Total functional expenses Add lines 1 through 24f	2,520,889	1,165,826	1,219,720	135,343
<u>25</u> 26	Total functional expenses. Add lines 1 through 24f  Joint Costs. Check here	2,320,003	1,103,020	2,227,120	100,010
20	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation		İ		
	ignoralising solicitation				Form 990 (2008)

	art /	V Datatice Street							
					(A) Beginning of year		(B) End of		
	1	Cash—non-interest bearing	<del></del>		78,259	1		52,	526
	2	Savings and temporary cash investments		-	394,229			36,4	
	3			<u> </u>	154,623			50,4	
	4	Pledges and grants receivable, net		-	43,358			55,	
	5	Accounts receivable, net			43,330	-4-	.=	33,.	120
	٦	Receivables from current and former officers, directors, tri				ا ـ ا			
	ء ا	employees, or other related parties. Complete Part II of So		_		5			
	6	Receivables from other disqualified persons (as defined u							
		4958(f)(1)) and persons described in section 4958(c)(3)(B	) Complet	e		1 . 1			
45	۱ ـ	Part II of Schedule L		ļ-	<del></del>	6	<del></del> -		
Assets	7	Notes and loans receivable, net		-		7			
SS	8	Inventones for sale or use		-	02.006	8	<del></del>		
⋖	9	Prepaid expenses and deferred charges	1 г	4 700 000	23,096	9		22,	<u> </u>
	1	Land, buildings, and equipment cost basis	10a	4,799,202					
	Ь	Less accumulated depreciation Complete	1						
	İ	Part VI of Schedule D	10b	2,167,708	2,757,246		2,6		
	11	Investments—publicly traded secunties		<u> </u>	2,266,834	11	1,0	25,	<u> 536</u>
	12	Investments—other securities See Part IV, line 11		<u> </u>		12			
	13	Investments—program-related See Part IV, line 11		ļ.		13			
	14	Intangible assets				14			
	15	Other assets See Part IV, line 11		L	825				992
	16	Total assets. Add lines 1 through 15 (must equal line 34)			5,718,470		4,3		
	17	Accounts payable and accrued expenses			148,046	17	1:	38,	<u>858</u>
	18	Grants payable		Ļ		18			
	19	Deferred revenue				19			
	20	Tax-exempt bond liabilities				20			
ē	21	Escrow account liability Complete Part IV of Schedule D		L		21			
Liabilities	22	Payables to current and former officers, directors, trustees							
ap		employees, highest compensated employees, and disqua	lified						
I		persons Complete Part II of Schedule L		Į		22			
	23	Secured mortgages and notes payable to unrelated third p	parties			23			
	24	Unsecured notes and loans payable				24			
	25	Other liabilities Complete Part X of Schedule D			268,783	25	2	97,	817
	26	Total liabilities. Add lines 17 through 25			416,829	26	4	36,	675
S		Organizations that follow SFAS 117, check here	K and						
nces		complete lines 27 through 29, and lines 33 and 34.		1					
<u>a</u>	27	Unrestricted net assets			2,287,679	27	1,1	80,	566
Fund Bala	28	Temporarily restricted net assets			329,170	28		93,	181
Þ	29	Permanently restricted net assets			2,684,792	29	2,6	74,	583
.5		Organizations that do not follow SFAS 117, check her	e ▶ 🗍		,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1 1111111
٥		and complete lines 30 through 34.	_						
	30	Capital stock or trust principal, or current funds		1		30			
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment f	fund	[		31			
Š	32	Retained earnings, endowment, accumulated income, or	other funds			32			
*	33	Total net assets or fund balances			5,301,641	33	3,9	48,	330
ž	34	Total liabilities and net assets/fund balances .			5,718,470		4,3	85,	005
P	art )	(I Financial Statements and Reporting							
_			<del>.</del>				<b>[</b>	Yes	No
1		• • • • • • • • • • • • • • • • • • • •	Cash X	,	ner				v
		ere the organization's financial statements compiled or revie	-	•	I <b>.</b>		2a 2b	X	X
		Were the organization's financial statements audited by an independent accountant?							
(		Yes" to lines 2a or 2b, does the organization have a commi			-			<b>.</b>	l
-		e audit, review, or compilation of its financial statements an					2c	X	<b>-</b> -
3		a result of a federal award, was the organization required to	o undergo	an audit or audits as set	חו חחסו			w	
		e Single Audit Act and OMB Circular A-133?	***				3a	X	<u> </u>
!	) If "	Yes," did the organization undergo the required audit or aud	aits?	·	- <u>,-,</u>		3b	X	Ц

#### 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.

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

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

WESLEY BIBLICAL SEMINARY

Employer identification number

64-0579585

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is (Please check only one organization ) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II ) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 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 An organization organized and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a | Type I b Type II c Type III–Functionally Integrated 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) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(lii) Provide the following information about the organizations the organization supports h (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of (described on lines 1-9 ın col (i) listed ın your the organization in organization in col support organization (i) organized in the above or IRC section. governing document? col (i) of your (see instructions)) support? US? Yes No No

Schedule A (Form 990 or 990-EZ) 2008 WESLEY BIBLICAL SEMINARY 64-0579585

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.)

<u>sec</u>	tion A. Public Support							
Cal	endar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	3	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							<del></del>
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							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)		`					
6	Public support. Subtract line 5 from line 4							
	tion B. Total Support			r	,	T		
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8	(f) Total
7	Amounts from line 4				ļ .			<del> </del>
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on				1			
0	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10				<u> </u>	<u>i</u>		· · · · · · · · · · · · · · · · · · ·
12	Gross receipts from related activities, etc (	•					12	
13	First five years. If the Form 990 is for the o	-	second, third, fourt	h, or fifth tax year a	as a section 501(c)	(3)		
_	organization, check this box and stop here					•		<u> </u>
	tion C. Computation of Public Su	<del> </del>	<del></del>					
14	Public support percentage for 2008 (line 6,			(f)) .		•	14	%
15	Public support percentage from 2007 Sche	· · · · · · · · · · · · · · · · · · ·					15	%
l6a	33 1/3 % support test—2008. If the organi			s, and line 14 is 33	1/3 % or more, ch	eck this box		_
	and stop here. The organization qualifies a	. ,	J	40 45	:- 22 4/2 9/			
b	33 1/3 % support test—2007. If the organi			•	15 33 1/3 % OF MOI	e, cneck this		▶ [
7-	box and stop here. The organization qualif 10%-facts-and-circumstances test—200	• •	•		or 16h and line 1	1 is 10% or		▶ ∟
17a	more, and if the organization meets the "fac	•			•			
	organization meets the "facts-and-circumst		•	•				▶ [
b	10%-facts-and-circumstances test—200		•		•		or	₹ ∟,
J	more, and if the organization meets the "fac	-					<b>J</b> i	
	organization meets the "facts-and-circumst			· ·	-			▶ □
18	Private foundation. If the organization did		•		<u> </u>			
-	Filtate iounidation. It the organization did	HOLGICON & DOX OF	10, 10a, 10b,	176, 01 175, GIEG	THIS DOX BING SEE	1134440410113		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

<u></u>	(Complete only if you che	cked the box	on line 9 of Pa	π ι.)	<del></del>		<del></del>					
	tion A. Public Support		1		T / 11 0007	1 () 2000	(0.7					
Cal	endar 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.")											
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose											
3	Gross receipts from activities that are not an unrelated trade or 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											
6	Total. Add lines 1-5				<u> </u>	<b>.</b>	ļ					
7a	Amounts included on lines 1, 2, and 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			<del> </del>	<u> </u>	<del> </del>						
8	Public support (Subtract line 7c from line 6)						1					
	tion B. Total Support	T (=) 0004	T (1) 0005	1 (-) 2000	(4) 2007	(-) 2009	(O Total					
	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total					
9	Amounts from line 6		-	<del> </del>			·					
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											
C	Add lines 10a and 10b		<u> </u>									
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,			ļ			4					
	and 12)		<u> </u>	1	<u> </u>	1	1					
14	First five years. If the Form 990 is for the organization, check this box and stop here	•	, second, third, four	th, or fifth tax year	as a section 501(c	)(3)	<b>▶</b> [					
Sec	tion C. Computation of Public Su	pport Percen	tage									
15	Public support percentage for 2008 (line 8,	column (f) divided	l by line 13, column	<b>(f)</b> )		15	%					
16	Public support percentage from 2007 Sche	dule A, Part IV-A,	line 27g			16	%					
Sec	tion D. Computation of Investme	nt Income Pe	rcentage				<del></del>					
17	Investment income percentage for 2008 (lin	ne 10c, column (f)	divided by line 13,	column (f))		17	<del></del>					
18	Investment income percentage from 2007	•				18	%					
19a	33 1/3 % support tests—2008. If the organ											
	17 is not more than 33 1/3 %, check this bo						▶ [					
b	33 1/3 % support tests—2007. If the organ						, r					
	line 18 is not more than 33 1/3 %, check th	· ·	_				▶					
20	Private foundation. If the organization did											

Part IV 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)

### SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ To be completed by organizations described below.

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- · Section 527 organizations. Complete Part I-A only

### If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

#### If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization  WESLEY BIBLICAL SEMI	NARY		Employer Identific	
Part I-A To be completed by all organization See the instructions for Schedule C f	s exempt under section :	501(c) and se		
Provide a description of the organization's direct and indi		Part IV		
2 Political expenditures			<b>▶</b> \$_	
3 Volunteer hours				
Part I-B To be completed by all organization See the instructions for Schedule C f		501(c)(3).		
1 Enter the amount of any excise tax incurred by the organ	nization under section 4955		<b>▶</b> \$	
2 Enter the amount of any excise tax incurred by organizat	tion managers under section 4955		<b>&gt;</b> \$	
3 If the organization incurred a section 4955 tax, did it file f	Form 4720 for this year?			Yes No
4a Was a correction made?				∐ Yes ∐ No
b If "Yes," describe in Part IV				
Part I-C To be completed by all organization See the instructions for Schedule C f		501(c), excep	t section 501(c)(3)	) <b>.</b>
1 Enter the amount directly expended by the filing organization	on for section 527 exempt function	1		
activities			<b>▶</b> \$	
2 Enter the amount of the filing organization's funds contribute	ted to other organizations for secti	on		
527 exempt function activities			▶ \$	
3 Total of direct and indirect exempt function expenditures A	Add lines 1 and 2 and enter here a	nd		
on Form 1120-POL, line 17b			<b>▶</b> \$	Yes No
4 Did the filing organization file Form 1120-POL for this year	n .			∐ Yes       No
5 State the names, addresses and employer identification nu	umber (EIN) of all section 527 polit	ical organizations		
were made. Enter the amount paid and indicate if the amount	unt was paid from the filing organi	zation's funds or v	vere political	
contributions received and promptly and directly delivered	to a separate political organization	i, such as a separ	ate segregated fund	
or a political action committee (PAC) If additional space is	needed, provide information in Pa	art IV	<del></del>	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
	1		1	I

				•	64-05795	0.5
	7 1111 1111 1111		AL SEMINARY			85 Page 2
r	art II-A To be completed by or					
Λ.	(election under section Check ► ☐ if the filing organiza			criedule C loi	uctails.	
	Check ► if the filing organization  Check ► if the filing organization			ntrol" provision	se annly	
				THEO PIOVISION	(a) Filing	(b) Affinded
	Limits on Lo (The term "expenditures"	bbying Expendit		,	organization's totals	(b) Affiliated group totals
1a				<u>'</u>		
	Total lobbying expenditures to influence a		, ,,			<del></del>
	Total lobbying expenditures (add lines 1a a		lobbying)			
	Other exempt purpose expenditures					<del></del>
	Total exempt purpose expenditures (add li	nes 1c and 1d)				
	f Lobbying nontaxable amount Enter the an	•	a table in both			
	columns		<b>5</b> 12212 III 22111	l l		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nonta	xable amount is:			
	Not over \$500,000	20% of the amount or				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of	the excess over \$500,000			
Ì	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of	f the excess over \$1,000,0	00		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	the excess over \$1,500,00	0		
1	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25%	of line 1f)				·
h	Subtract line 1g from line 1a Enter -0- if lin	ne g is more than line a	1			
i	i Subtract line 1f from line 1c Enter -0- if line	e f is more than line c		L		
j	j If there is an amount other than zero on eit	ther line 1h or line 1i, d	lid the organization file	Form 4720 reportir	ng	
	section 4911 tax for this year?					Yes No
		4-Year Averagi	ng Period Under	Section 501(h	)	
	(Some organizations th					he five
					the instructions.)	
						····
		bying Expenditu	res During 4-Yea	r Averaging P	erioa	
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
	g,	(4)	(, 2000	(0,200)	(,	(5)
_						
	Lobbying non-taxable amount					
t	Lobbying ceiling amount					
	(150% of line 2a, column(e))			<b>!</b>		
c	Total lobbying expenditures					
	1. Construction of Association					
	d Grassroots non-taxable amount					
e	Grassroots ceiling amount					
	(150% of line 2d, column (e))		<b>‡</b>	1	1	

Schedule C (Form 990 or 990-EZ) 2008

f Grassroots lobbying expenditures

To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form Part II-B 5768 (election under section 501(h)). See the instructions for Schedule C for details.

	or or forconditional obstacles of the monace and a constant of	(a	1)	(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local			
	legislation, including any attempt to influence public opinion on a legislative matter or			
	referendum, through the use of			
а	Volunteers?		X	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
	Media advertisements?		Х	
d	Mailings to members, legislators, or the public?		X	
е	Publications, or published or broadcast statements?		X	
f	Grants to other organizations for lobbying purposes?		X	
	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		83,923
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		X	
i	Other activities? If "Yes," describe in Part IV		Х	
i	Total lines 1c through 1i			83,923
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х	
b	If "Yes," enter the amount of any tax incurred under section 4912			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Х	

To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or Part III-A section 501(c)(6). See the instructions for Schedule C for details.

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details.

1	Dues, assessments and similar amounts from members		
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of		
	political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total .	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		
	and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1 Also, complete this part for any additional information

SCHEDULE C, PART II-B, LINE 1I

THE ORGANIZATION PAID A FEDERAL LOBBYING CONSULTANT TO ASSIST IN OBTAINING FEDERAL FUNDING FOR PROGRAMS.

Supplemental Information (continued)

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

OMB No 1545-0047
2008
Open to Public

Name of the organization

Inspection
Employer identification number

WI	ESLEY BIBLICAL SEMINARY		64-05	79585				
	rt I Organizations Maintaining Donor Advised Ful	ccounts. Complete if						
	the organization answered "Yes" to Form 990, F	Part IV, line 6.						
		(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year							
2	Aggregate contributions to (during year)							
3	Aggregate grants from (dunng year)			·-				
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor advisors in writing that	the assets held in donor advised						
	funds are the organization's property, subject to the organization's exclusive	sive legal control?		Yes	∐ No			
6	Did the organization inform all grantees, donors, and donor advisors in w	riting that grant funds may be						
	used only for charitable purposes and not for the benefit of the donor or	donor advisor or other			$\Box$			
	impermissible private benefit?			Yes	No_			
Pa	rt II Conservation Easements. Complete if the organic		990, Pa	irt IV, line 7.				
1	Purpose(s) of conservation easements held by the organization (check a							
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically impo		area				
	Protection of natural habitat	Preservation of certified historic str	ucture					
	Preservation of open space							
2	Complete lines 2a-2d if the organization held a qualified conservation of	ontribution in the form of a conservation ease	ment					
	on the last day of the tax year		[ <u>1</u>	11 11 44 5				
			-	Held at the End	of the Year			
а	Total number of conservation easements		2a		<del></del>			
b	Total acreage restricted by conservation easements		2b					
C	Number of conservation easements on a certified historic structure inclu		2c					
d	Number of conservation easements included in (c) acquired after 8/17/0		2d					
3	Number of conservation easements modified, transferred, released, extra	inguished, or terminated by the organization	during					
	the taxable year							
4	Number of states where property subject to conservation easement is lo							
5	Does the organization have a written policy regarding the periodic monit	oring, inspection, violations, and		Π.,	Π.,			
	enforcement of the conservation easements it holds?			Yes	∐ No			
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing							
7	Amount of expenses incurred in monitoring, inspecting, and enforcing ea			<del>-</del> -				
8	Does each conservation easement reported on line 2(d) above satisfy the	ne requirements of section		П.,	□			
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?			☐ Yes	∐ No			
9	In Part XIV, describe how the organization reports conservation easeme							
	balance sheet, and include, if applicable, the text of the footnote to the o	irganization's financial statements that descri	ibes					
	the organization's accounting for conservation easements  Art III Organizations Maintaining Collections of Art,	Historical Transumos or Other S	imilar A	ecote				
***	Art III Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to	Form 990. Part IV. line 8.	iiiiiai A	133Ct3.				
	Complete it the organization answered Tes to	7. 5.111 000, 1 dit 17, mio 0.	<del></del>					
		- de	undin -f					
1a	If the organization elected, as permitted under SFAS 116, not to report if art, historical treasures, or other similar assets held for public exhibition							
			JIIC SEI VICE	,				
	provide, in Part XIV, the text of the footnote to its financial statements the	ial describes triese items						
	If the organization elected, as permitted under SFAS 116, to report in its	revenue statement and halance sheet work	e of art					
D	historical treasures, or other similar assets held for public exhibition, ed							
		dealion, or research in fulfillerance of public s	JOI TIOC,					
	provide the following amounts relating to these items			s				
	(i) Revenues included in Form 990, Part VIII, line 1			<b>*</b>				
_	(ii) Assets included in Form 990, Part X	other similar assets for financial sain, assets	a tha	<b>"</b>				
2	If the organization received or held works of art, historical treasures, or		- u10					
	following amounts required to be reported under SFAS 116 relating to the	неѕе нетѕ		¢				
a	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b>	*				
b	Assets included in Form 990, Part X	•	•	<b>*</b>				

Part VI	Investments—Land, Bu	ildings, and Equipment.	See Form 990, Part X	, line 10.	
	Description of investment	(a) Cost or other basis	(b) Cost or other	(c) Depreciation	(d) Book value
		(investment)	basis (other)		
1a Land			428,669		428,669
<b>b</b> Building	gs		2,927,606	969,225	1,958,381
c Leaseh	old improvements	<u> </u>	1		
<b>d</b> Equipm	nent		818,838	616,877	201,961
e Other			624,089	581,606	42,483
Total. Add lin	es 1a-1e (Column (d) should equa	I Form 990, Part X, column (B),	line 10(c).)	<b>•</b>	2,631,494

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 WESLEY BIBLICAL SEMINA	RY	64-0579585	Page 3
Part VII Investments—Other Securities. See Form 990	Part X, line 12.		
(a) Description of security or category	(b) Book value	(c) Method of	valuation
(including name of security)		Cost or end-of-yea	market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other		···	
	-		
			<del></del>
			<u> </u>
<del></del>			
7.1.701	<del></del>	······································	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 990			
(a) Description of investment type	(b) Book value	(c) Method of	
		Cost or end-of-yea	r market value
			<del> </del>
			· · · · · · · · · · · · · · · · · · ·
			· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·	
			······································
Total. (Column (b) snould equal Form 990, Part X, col (B) line 13)	<u> </u>		
Part IX Other Assets. See Form 990, Part X, line 15.		·	
(a) Description			(b) Book value
<u>.                                    </u>			
			·
		·	
	. <u> </u>		
	N		
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)		<u> </u>	
Part X Other Liabilities. See Form 990, Part X, line 25			
(a) Description of liability	(b) Amount		
Federal income taxes			
DEFERRED COMPENSATION	132,895		
ANNUITY OBLIGATIONS	126,682		
DEFERRED TUITION	38,240		
			,
			,
Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)	297,817		
In Part XIV, provide the text of the footnote to the organization's financial staten		zation's liability for	· · · · · · · · · · · · · · · · · · ·
uncertain tax positions under FIN 48			

	dule D (Form 990) 2008 WESLEY BIBLICAL SEMINARY 64-05/95	82		Page 4
•••••	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		<del></del> -	9 9 9 9 9 9
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	╄-	1,116,689
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	-1	2,520,889
3	Excess or (deficit) for the year Subtract line 2 from line 1	3		-1,404,200
4	Net unrealized gains (losses) on investments	4	+	50,889
5	Donated services and use of facilities	5	+	
6	Investment expenses	6	+	
7	Prior period adjustments	7		
8	Other (Describe in Part XIV)	8	+	FO 000
9	Total adjustments (net) Add lines 4-8	9	+	50,889
0	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10		-1,353,311
	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per R		$\overline{}$	1,194,592
1	Total revenue, gains, and other support per audited financial statements	1	┰	1,194,394
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12  Net unrealized gains on investments  2a 50,88	اه		
		<u>'</u>	1	
	Donated services and use of facilities 2b		1	
	Recoveries of prior year grants  Other (Describe in Part XIV)  2c  40,24	<u>.</u>		
			1	01 122
	Add lines 2a through 2d	2e		91,133 1,103,459
3	Subtract line 2e from line 1	-	+	1,103,433
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b  4a  13, 23	3.0		
		<u> </u>		
		-   4c	. 1	13,230
	Add lines 4a and 4b  Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)	5	+	1,116,689
	int XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per		 rn	<u> </u>
1	Total expenses and losses per audited financial statements	1	Ť	2,547,903
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		十	
- а	Donated services and use of facilities 2a	l	1	
_	Prior year adjustments 2b	7		
	Losses reported on Form 990, Part IX, line 25	$\neg$	1	
	Other (Describe in Part XIV)  2d  40, 24	14		
	Add lines 2a through 2d	2e	, ]	40,244
3	Subtract line 2e from line 1	3		2,507,659
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		T	
а	Investment expenses not included on Form 990, Part VIII, line 7b	30		
b	Other (Describe in Part XIV)		1	
	Add lines 4a and 4b	4c		13,230
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	. 5	丄	2,520,889
	art XIV Supplemental Information			
com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b			
nd 2	2b, Part V, line 4; Part X, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b			
:	PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS			. <b></b>
	THE ENDOWMENT FUNDS ARE INTENDED PRIMARILY TO PROVIDE PROV	TOR	TN	COME FOR
_				
_	STUDENT FINANCIAL AID, AN ENDOWED FACULTY CHAIR, AND A LEC	TURE	: <u>s</u>	ERIES
_				
_				. <b></b> -
_	PART XI, LINE 8 - RECONCILATION OF CHANGES - OTHER		- <b>-</b>	
_	RENTAL PROPERTY_EXPENSES	\$		40,244
_				
_	RENTAL PROPERTY_EXPENSES	¥ _		

Schedule D (Forn	n 990) 2008		BIBLI		MINARY	, 		64	-057958	5		Page <b>5</b>
Part XIV S	Supplemer	ntal Inform	ation (conti	nued)								
						· <del></del> ·						
PART X	I <u>I</u> ,_L <u>I</u> N	<u>E</u> 2D	<u>REVENU</u>	E_AMOU	NTS_IN	CLUDE	D IN_	FINAN	CIALS -	OTHE	<u>er</u>	
_RENTAL	PROPER	TY EXP	ENSES						\$		40,	244
							<del>-</del>				··	
						· – – ·		. –  –				
PART X	I <u>II, L</u> I	NE 2D	EXPEN	SE AMO	UNTS I	NCLUD	ED_IN	FINA	NCIALS	- OTI	IER	
_RENTAL	PKOPEK	TI_EVPI	_ <u></u>			· – – ·		· – – ·	\$		_40,	<u> </u>
						· <b>-</b> -		· ·				
								· – – ·		_ <del>_</del>		
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										·		

### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury internal Revenue Service

Name of the organization

### **Schools**

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

➤ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2008

Open to Public repection

WESLEY BIBLICAL SEMINARY

Employer identification number 64 – 0579585

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its			
	brochures, catalogues, and other written communications with the public dealing with student admissions,		1	
	programs, and scholarships?	2	X	,,,,
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media		-	
	during the period of solicitation for students, or during the registration period if it has no solicitation program,			
	in a way that makes the policy known to all parts of the general community it serves? If "Yes," please		1	
	describe If "No," please explain	3	_X	
	PUBLICIZED IN ITS ACADEMIC CATALOG, AT LEAST ANNUALLY IN			
	A NEWSPAPER, AND THROUGH VARIOUS OTHER METHODS.			
_				
4	Does the organization maintain the following?	. 1	<b>.</b>	
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	-
þ	Records documenting that scholarships and other financial assistance are awarded on a racially		<b>1</b>	
	nondiscriminatory basis?	4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	ļ.,
	if you answered "No" to any of the above, please explain. (If you need more space, attach a separate			
	statement)			
5	Does the organization discriminate by race in any way with respect to	_		
а	Students' nghts or privileges?	5a		X
Ь	Admissions policies?	5b		X
		ا ۔ ا	ŀ	•
С	Employment of faculty or administrative staff?	5c		X
				x
đ	Scholarships or other financial assistance?	5d	<del>                                     </del>	
				x
0	Educational policies?	5e		<u> </u>
	The office Provide	5f		x
ī	Use of facilities?	-51		
_	Athlete are are and 2	E		x
g	Athletic programs?	5g		<del>  **</del> -
L	Other extracurncular activities?	5h		x
h		311	<del> </del>	
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate			
	statement )			I
				I
c-	December or any action received any financial and as acceptance from a conference tall accepts?	6-	х	ŧ
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a 6b	<u> </u>	x
b	Has the organization's right to such aid ever been revoked or suspended?  If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement  SEE STMT 1	100	-	<del>  ^</del>
-	in you allowed the state and out the output and output allowed and allowed allowed and allowed allowed and allowed allowed allowed and allowed allowed allowed allowed and allowed allowed allowed allowed allowed allowed all			1
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of	7	х	Ī
	Rev Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation			

## SCHEDULE M (Form 990)

**NonCash Contributions** 

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

Attach to Form 990.

OMB No 1545-0047

2008

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

WESLEY BIBLICAL SEMINARY

Employer Identification number 64 - 0579585

Pa	Part I Types of Property							
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues			
1	Art—Works of art							
2	ArtHistorical treasures				<del></del>			
3	Art—Fractional interests							
4	Books and publications				· · · · · · · · · · · · · · · · · · ·			
5	Clothing and household	1						
	goods		,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		<del></del>			
6	Cars and other vehicles						<u>-</u> .	
7	Boats and planes							
8	Intellectual property	37		77 100	CMCCK BBCKEB	OHORRO		
9	Securities—Publicly traded	X	3	77,188	STOCK BROKER	QUOIES		
10	Securities—Closely held stock	<u> </u>						
11	Securities—Partnership, LLC,							
12	or trust interests Securities—Miscellaneous	<b> </b>				<del> </del>		
13	Qualified conservation							
	contribution (historic							
	structures)	ļ						
14	Qualified conservation	i						
	contribution (other)	ļ						
15	Real estate—Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies		ļ <u></u>					
21	Taxidermy							
22	Historical artifacts					<del> </del>		
23	Scientific specimens		-		<u> </u>	<del></del>		
24	Archeological artifacts			<u> </u>				
25	Other ►( )	' <del></del>						
26	Other ► ( )	<b> </b>						
27	Other ► ( )	<u> </u>	<b>_</b>		<del>                                     </del>			
28	Other ► ( )  Number of Forms 8283 received by t	he crasniz	ation during the tay year	for contributions for		<del></del>		
29	which the organization completed Fo				29 0			
	The organization completed to	5200, 1		-g=/ <del></del>			Yes	No
30a	During the year, did the organization	receive by	contribution any property	reported in Part I, lines 1-2	8 that			
	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be							É
	used for exempt purposes for the en			•		30a		X
b	If "Yes," describe the arrangement in							
31	Does the organization have a gift acceptance policy that requires the review of any non-standard							Ė
	contributions?							X
32a	Does the organization hire or use thin	rd parties o	or related organizations to	solicit, process, or sell non-	-cash	1		
	contributions?					32a	ļ.,	X
b	If "Yes," describe in Part II					li li		ĺ
33	If the organization did not report reve	enues in co	lumn (c) for a type of pro	perty for which column (a) is	s checked,			ĺ
	describe in Part II							<u> </u>

Schedule M (Form 990) 2008 WESLEY BIBLICAL SEMINARY 64-0579585

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

# SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990

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

OMB No 1545-0047

2008

Open to Public

Name of the organization

WESLEY BIBLICAL SEMINARY

Employer identification number 64 - 0579585

FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS

AUXILIARY ENTERPRISES CONSIST OF STUDENT HOUSING AND OTHER

ESSENTIALLY SELF-SUPPORTING OPERATIONS THAT EXIST TO

PROVIDE SERVICES TO STUDENTS, FACULTY OR STAFF, AND THAT

CHARGE A FEE THAT IS RELATED TO THE COST OF THE SERVICE.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE BOARD OF TRUSTEES REVIEWS AND APPROVES THE PRESIDENT'S COMPENSATION

ANNUALLY AND CONSIDERS RELEVANT COMPARABILITY DATA AS PART OF THE PROCESS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
MANAGEMENT REVIEWS SALARY LEVELS ANNUALLY AND CONSIDERS RELEVANT
COMPARABILITY DATA AS PART OF THE PROCESS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS AND OTHER INFORMATION ARE MADE AVAILABLE UPON REQUEST.

SCHEDULE O - ADDITIONAL INFORMATION

THE FORM 990 IS REVIEWED BY MANAGEMENT PRIOR TO SUBMISSION TO THE IRS.

64-	Λ	E	7	0	E	Ω	F
74-	.,	: 1	•	-	: )	O	

# **Federal Statements**

# Statement 1 - Schedule E, Line 6 - Governmental Financial Aid

Description

THE SEMINARY PARTICIPATES IN THE UNITED STATES DEPARTMENT OF EDUCATION'S STAFFORD STUDENT LOAN PROGRAM.

Department of the Treasury

(Rev April 2009)

# Application for Extension of Time To File an **Exempt Organization Return**

► File a separate application for each return.

OMB No 1545-1709

Internal Revenue	Service			
If you are !	iling for an Automatic 3-Month Extension, complete only Part I and check this box		<b>&gt;</b>	X
<ul> <li>If you are f</li> </ul>	iling for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form	)		
Do not compl	ete Part II unless you have already been granted an automatic 3-month extension on a previously filed Forr	n 8868		
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).			
A corporation r	equired to file Form 990-T and requesting an automatic 6-month extension—check this box and complete		•	
All other corpo	rations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension me tax returns	sion of		
Electronic Fili	ng (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of tin	ne to file		
	rns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 886			
electronically if	(1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870,	group		
	imposite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part		m	
	e details on the electronic filing of this form, visit www irs.gov/efile and click on e-file for Charities & Nonprofit			
Type or	Name of Exempt Organization		er identification number	r
print				
File by the	WESLEY BIBLICAL SEMINARY	64-0579585		
due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions.  P. O. BOX 9938			
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  JACKSON MS 39286			
Check type of	return to be filed (file a separate application for each return)			
X Form 99	Form 990-T (corporation)		Form 4720	
Form 99	D-BL Form 990-T (sec. 401(a) or 408(a) trust)		Form 5227	
Form 99	D-EZ Form 990-T (trust other than above)		Form 6069	
Form 99	0-PF Form 1041-A		Form 8870	
If this is for for the whole go a list with the r  1 I reques until for the o	nization does not have an office or place of business in the United States, check this box a Group Return, enter the organization's four digit Group Exemption Number (GEN)	If this is attach	<b>•</b>	
		n account	ung period	
	plication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, nonrefundable credits. See instructions.	3a	\$	
	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax			
•	s made. Include any prior year overpayment allowed as a credit.	3b	\$	
	Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,	Ģ.s		
•	vith FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment  See instructions.	3c	\$	
	are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-f	EO		
for payment in				
For Privacy A	ct and Paperwork Reduction Act Notice, see Instructions.		Form 8868 (Rev 4-	I-2009)

Joseph E. Hines, CPA 11-9-09

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 886	8 (Rev '4-2009)			Page 2					
• If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box			► X					
Note Onl	ly complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form	n 8868							
<ul><li>If you</li></ul>	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)								
Part I	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (	no copies	needed).						
Type or	er identificati	on number							
print									
File by the	WESLEY BIBLICAL SEMINARY	64-0	579585						
extended	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS	use only						
due date fo filing the	P. O. BOX 9938			·					
return See	City, town or post office, state, and ZIP code For a foreign address, see instructions.								
instructions	JACKSON MS 39286		and the party						
Check ty	pe of return to be filed (File a separate application for each return).		_						
X For	0 Form 990-PF Form 1041-A		Form 6069						
For	rm 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 4720		∐ For	m 8870					
	rm 990-EZ Form 990-T (trust other than above) Form 5227								
STOPI D	o not complete Part II if you were not already granted an automatic 3-month extension on a previously	filed Form	3868.	<del></del>					
• The b	pooks are in the care of  JANICE CROSBY								
Telep	phone No. ▶ 601-366-8880 FAX No. ▶								
• If the	organization does not have an office or place of business in the United States, check this box			▶ 📙					
<ul><li>If this</li></ul>	is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	this is							
for the wh	nole group, check this box  If it is for part of the group, check this box	and attach	а						
list with th	ne names and EINs of all members the extension is for.								
4 I re	quest an additional 3-month extension of time until 5/15/10.								
5 For	calendar year , or other tax year beginning $7/01/08$ , and ending $6/30/6$								
6 If th	nis tax year is for less than 12 months, check reason: 🔃 Initial return 🔲 Final return 🔲 Chang	je in account	ing period						
	ite in detail why you need the extension								
	ADDITIONAL TIME IS REQUESTED TO GATHER INFORMATION TO PREPARE A COMPLETE								
Al	ND ACCURATE RETURN.								
8a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,								
les	s any nonrefundable credits. See instructions.	8a	\$						
b If th	nis application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and								
esti	imated tax payments made. Include any prior year overpayment allowed as a credit and any								
am	ount paid previously with Form 8868.	8b	\$						
c Bal	lance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit								
with	h FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$						
	Signature and Verification								
	alties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of orrect, and complete, and that I am authonzed to prepare this form	my knowledge	and belief,						
it is true, Ct	On 1 Catric			2/9/10					
Signature	) Joseph Z. Arma Title > C. P.A.		Date >	2/1/10					
	<i>V 1</i>		Form <b>88</b>	100 (Rev 4-2009)					