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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

Department of the Treasury

SCANNED DEC 0 6 2010

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

2009

Open to Public Inspection

_	define revenue of the second s												
	For the 2009 calendar year, or tax year beginning , 2009, and ending ,												
В	Check if a	applicable	C Name of organiza	ation						1 .	-	ification Numbe	er
	Add	ress change IRS label	Inspiratio								0831		
	Nam	ne change or print or type.	Number and stree	et (or PO box if r	mail is n	ot delivered to stre	eet addr)	Room/s	uite	E Teleph	one num	ber	
	Initia	al return See specific	P. O. Box	352		••				(20	5) 6	46-2941	
	Tern	mination Instruc-	City, town or cour	ntry		S	tate Zi	IP code + 4					
	Ame	ended return	Jemison			<u> </u>	AL 3	35085		G Gross	receipts	s 708,6	76
	Арр	lication pending F Name a	and address of principa	l officer						a group retu		ılıates?	Yes X No
	_	Charles V	Wheeling PO Bo	x 352	Jen	ison	AL 3	35085	H(b) Are all	affiliates inc attach a list		structions) [ ,	Yes No
ī	Tax-e	exempt status X 501		(insert no )		4947(a)(1) o	r $\square$	527	,, 110,	attach a nat	(300 111	30 00000137	
J	Web	site: ► inbookse	east.org						H(c) Group	exemption n	umber <sup>1</sup>	<b>-</b>	
K	Form o	of organization X Corpora	ation Trust	Association	Other	<b>&gt;</b>	L Yea	r of Formal	tion 198	0 <u>m</u> :	State of	legal domicile	AL
Pa	ırt İ	Summary											
	1 E	Briefly describe the org	ganization's missi	on or most siç	gnifica	nt activities	Chr	istia	n <u>eva</u> n	gelis	<u>n</u>		
Ų			. <b></b>										
anc	_												
Activities & Governance	_				<del>-</del>	<u>-</u>							_ <b></b> _
30			if the organization				ispose	d of mor	e than 25	% of its a		14	
જ	3 N	Number of voting mem Number of independen	ibers of the govern	ning body (Pa	irt VI, ning he	iine ra) idv (Part VIII.	ine 1h)	1			4	9	
lies		Total number of emplo			mig be	ouy (i uit vi, i					5	10	
ξ		Total number of volunt	•	•							6	55	
Ac		Total gross unrelated b			, Icolu	mn (C), ine 1:	2				7 a		0.
	١d	Net unrelated business	taxable income f	rom Form 99	0-T, lir	ne 34					<u> 7 b</u>		
									F	rior Year		Curren	nt Year
•	8 (	Contributions and gran				6.	23,595.						
Revenue		Program service revenue (Part VIII, line 2g)											
eve	1	Investment income (Pa	·										678.
Œ	1	Other revenue (Part VI											35,816.
_		Total revenue – add II					, line l	12)	<del></del>				60,089.
	13 (	Grants and similar an ounts paid (Part IX, column (A), lines 1-3)											19,450.
	14	Benefits paid to er for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)										2	20 252
S	15 5	Salaries, other comper	nsation Pemployee	benefits (Pa	rt IX, c	column (A), III	nes b-ı	10)		-		3.	39 <b>,</b> 353.
SUS.	l .	Pigiessi <b>via V</b> undrateir	1071			)							
Expenses	l .	Total fundraising expe						0.					
	17 (	Other expenses Parti Total expenses Add in	IX (Gumn (A), lir	nes 11a-11d,	11f-24	f)							19,544.
	18	Total expenses Add in	nes 13-17 (must e	equal Part IX,	colum	n (A), line 25	)						78,347.
		Revenue less expense	s Subtract line 18	8 from line 12	?							-	18,258.
Net Assets or Fund Balances									Begi	nning of `		End o	
2 a	20	Total assets (Part X, I	ine 16)							538,		<del>†</del>	95 <u>,</u> 338.
Ž	21	Total liabilities (Part X	., line 26)							35,	349.		10,018.
		Net assets or fund bal		ne 21 from lin	ie 20					503,	<u>579.</u>	4	85,320.
Pa	art II	Signature Blo	ck										
		Under penalties of perjury true, correct, and complete	, I declare that I have e	xamined this returner (other than off	rn, inclu	ding accompanyin ased on all inform	g schedu	iles and sta	tements, and	to the best	of my kr	lowledge and be	lief, it is
		LINE CONTRACTOR		101/	<u> </u>	asca on an amon		ол рлор	1	11	i A I i	1 .	
Si	gn	- GIMIY	パイ・ヘイン	Chin	<b>D</b> -					<u>. [[]                                  </u>	V /	0	
He	ere	Signature of officer		a i	$\alpha$				U	ate	- 1		
		Charles Wh		YRESIDE	<i>₽</i>								
_		Type or print name ar	na title	<del></del>							- TE	Prenarer's identif	woo number
_	• .1						Dat	te	s	Check if elf-	1 11	reparer's identif see instructions)	yang mumber
Pa Pr		Preparer's signature	11 11.					1.1		mployed	1 11	1125 11	101
	e- rer's		7 Mil				/	1/2//	<i>''</i>		'	420-66	6414
Üs		yours if self-	tin & L'Eta	ang, L.L	<u>.c.</u>		· <del>_</del> ·				, ,		~ /
	ıly	employed), P.C	). Box 994				<u> </u>	0001				11898	
		ZIP+4 NOI	rthport				5476	-0994	F	Phone no	(20		
Ma	v the IF	RS discuss this return	with the preparer	shown above	7 (see	instructions)						X Yes	No

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

TEEA0101 07/20/09 Form 990 (2009)

	990 (2009) Inspiration Books East, Inc.	63-0831249	Page 2
<u>Par</u>	Statement of Program Service Accomplishments		<del></del>
1	Briefly describe the organization's mission		
	Christian evangelism		
	<b>'</b>		
2	Did the organization undertake any significant program services during the year which were not listed on the p		_
	Form 990 or 990-EZ?	Ye	s 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?	?	s X No
	If 'Yes,' describe these changes on Schedule O		<del></del>
4	Describe the exempt purpose achievements for each of the organization's three largest program services by ex	vnenses Section 5	01(c)(3)
-	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and alloc	cations to others, the	ne total
	expenses, and revenue, if any, for each program service reported		
_	(0.1)	•	04 402 \
4 a	(Code) (Expenses \$ 176,276. including grants of \$ 19,450.) (Rev		
	Publication and distribution of Christian literature.		
	Organization excerpts portions of Seventh Day Adventist	- <b></b>	
	literature for distribution in mission efforts		
		<del></del>	
		<b></b>	
		- <b></b>	
	· · · · · · · · · · · · · · · · · · ·		
4 t	(Code) (Expenses \$ 23,365. including grants of \$ 0.) (Rev	renue \$	0.)
	Seminars related to Biblical prohecy		
1	c (Code) (Expenses \$ including grants of \$) (Rev	renue S	Υ.
(	/ (2000) (Expenses 4) (New	U.100 Y	,
		<del>-</del>	
		<b></b> -	<del>-</del>
		<b></b>	
40	Other program services (Describe in Schedule O )		-
•	(Expenses \$ including grants of \$ ) (Revenue \$		)
	<u> </u>		
-46	e Total program service expenses ► 199, 641.		

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete X 1 Schedule A 2 Х Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 3 Х Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete 4 Х Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and 5 reporting requirement and proxy tax? If 'Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or 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 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes.' 8 Х complete Schedule D, Part III 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 Х Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 10 Х is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable 11 Х Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D. Part VI Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII • Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If Yes, complete Schedule D, Part X Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Х 12AWas the organization included in consolidated, independent audited financial statement for the tax Yes No year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A Х Х Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? Х 14a **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *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 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 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 17 column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Х lines 1c and 8a? If 'Yes,' complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' 19

20

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Х

complete Schedule G, Part III

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

Page 4

Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III 22 Х Did the organization answer 'Yes' to Part VII. Section A. line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J 23 Х 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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 d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25 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 25 a Х b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete 25b Х Schedule L, Part I 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 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III 27 Х Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a Х b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28b Х c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 31 Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 32 Х 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 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х 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 35 Х 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 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 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 38 Note. All Form 990 filers are required to complete Schedule O

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Form 990 (2009)

63-0831249 Form 990 (2009) Inspiration Books East, Inc. Page 5 Part V 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. 1 a Information Returns Enter -0- if not applicable 0 1 b **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c Х 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the 10 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? 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 by 32 Х this return? 3 b b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 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)? **4** a Х **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 X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b Х c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6a Х 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). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7 a Х provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b Х c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7 e Х benefit contract? 7 f Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business Х 8 holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.

<b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?		
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	10 b	

10 b		
11 a		
11 b		

11 Section 501(c)(12) organizations. Enter:

a Gross income from other members or shareholders

a Did the organization make any taxable distributions under section 4966?

**b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )

	***************************************		
2 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	Form	10417
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12 b	

Form 990 (2009)

9a

9b

Х

Х

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A.	Governing Body and Management						
					Yes	No		
, 1 a	Enter the	number of voting members of the governing body	1a 14			1		
t	Enter the	number of voting members that are independent	1 <b>b</b> 9	_				
2	Did any o	officer, director, trustee, or key employee have a family relationship or a business rela rector, trustee or key employee?	ationship with any other	2	X			
3	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?							
4 Did the organization make any significant changes to its organizational documents								
•	since the prior Form 990 was filed?							
5								
6		organization have members or stockholders?	•	6		Х		
7 a	Does the	organization have members, stockholders, or other persons who may elect one or m	ore members of the	7a		х		
t		decisions of the governing body subject to approval by members, stockholders, or oth	er persons?	7 b		Х		
8	Did the o	rganization contemporaneously document the meetings held or written actions undert	taken during the year by					
a		rning body?		8a	X			
	_	nmittee with authority to act on behalf of the governing body?		8b		Х		
9	Is there a	any officer, director or trustee, or key employee listed in Part VII, Section A, who can the mailing address? If 'Yes,' provide the names and addresses in Schedule O	not be reached at the	9		x		
Sec		Policies (This Section B requests information about policies not	required by the Interna					
	enue Code	•	roquirou by the mitorne					
	•				Yes	No		
10 a	Does the	organization have local chapters, branches, or affiliates?		10 a		X		
ŀ	If 'Yes,' o	loes the organization have written policies and procedures governing the activities of ches to ensure their operations are consistent with those of the organization?	such chapters, affiliates,	10b				
11		organization provided a copy of this Form 990 to all members of its governing body be	efore filing the form? .	11		Х		
		in Schedule O the process, if any, used by the organization to review this Form 990.						
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13						Х		
ı	Are office to conflic	ers, directors or trustees, and key employees required to disclose annually interests ${\sf tits}^2$	hat could give rise	12b	_			
•	Does the	organization regularly and consistently monitor and enforce compliance with the police O how this is done	cy? If 'Yes,' describe in	12c				
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 p	rocess for determining compensation of the following persons include a review and a comparability data, and contemporaneous substantiation of the deliberation and deci	pproval by independent					
		nization's CEO, Executive Director, or top management official		15 a	X			
	_	icers of key employees of the organization		15 b	X			
	If 'Yes' to	line 15a or 15b, describe the process in Schedule O (See instructions )						
16		rganization invest in, contribute assets to, or participate in a joint venture or similar a ring the year?	arrangement with a taxable	16 a		X		
ı	h If 'Yes.' h	nas the organization adopted a written policy or procedure requiring the organization the enture arrangements under applicable federal tax law, and taken steps to safeguard the control of the control o	to evaluate its participation					
	status w	th respect to such arrangements?		16 b				
		Disclosures	<del> </del>					
18	inspection	5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an Indicate how you make these available Check all that apply website Another's website X Upon request	nd 990-T (501(c)(3)s only) av	aılable	for pu	blic		
19	Describe	In Schedule O whether (and if so, how) the organization makes its governing documents available to the public	ents, conflict of interest polic	y, and	fınanc	ıal		
20		e name, physical address, and telephone number of the person who possesses the bo	ooks and records of the organ	nization				
		Wheeling POBox 352 Jemison P		205)_6		2941		

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees See instructions for definition of 'key employees'

Check this box if the organization did not compensate any current officer, director, or trustee

- 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

(A)	(B)	(c)						(D)	(E)	(F)	
Name and Title	Average hours							Reportable compensation from	Reportable compensation from	Estimated	
	per week	adavidi al trustee or director	nethinosed tastee	Offi -e-i	Key employee	Highest connactsated employee	Fusher	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	
Charles Wheeling							_				
Dir & Pres	40.00	Х		Х	Х			29,562.	0.	12,000.	
Judy Wheeling											
Dir & Sec	28.00	Х		Х	х			12,173.	0.	0.	
Tony Harriman										· · · · · · · · · · · · · · · · · · ·	
Dir & VP	40.00	х		Х	х			28,417.	0.	22,557.	
Dorothy Benjamin											
Director	40.00	Х			х			20,630.	0.	4,089.	
Paul Cales											
Director	1.00	х						0.	0.	0.	
Robert Ernest											
Director	1.00	х						0.	0.	0.	
Vincent Hecox											
Director	1.00	х						0.	0.	0.	
Summer Hecox										1	
Director	1.00	Х					L	0.	0.	0.	
William Huffman										"	
Director	1.00	Х						0.	0.	0.	
John Linn											
Director	1.00	Х						0.	0.	0.	
Dick Rogers						]					
Director	1.00	X						0.	0.	0.	
Edith Rogers											
Director	1.00	Х			L			0.	0.	0.	
Dana Snowden											
Director	1.00	Х						0.	0.	0.	
Colene Snowden				1	1						
Director	1.00	Х						0.	0.	0.	
	-										
	-							_			

Part VII   Section A. Officers, Directors, Trus	tees, K	еу	En	ıplo	ye	es,	and	Highest Con	pensated Em	ployees (cont.)
(A)	(B)							(D)	(E)	(F)
Name and Title	Average hours per week		_	Check Officer				Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation
	nours per week	vidual t	Institutional trustee	Cer	employee	Highest compen	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
		rustee	l truste		yee	npensa				O games to to
						ed .				
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	-		<b></b>							
1 b Total		<u> </u>	<u> </u>	<u></u>	!	1	▶	90,782.	0	. 38,646.
2 Total number of individuals (including but not limited	I to thos	e lıs	ted	abov	ve) v	who	rece			
from the organization   0										Yes No
3 Did the organization list any former officer, director	or truste	e, k	еу є	empl	oye	e, oı	r higi	hest compensated	l employee	
<ul> <li>on line 1a<sup>7</sup> If 'Yes,' complete Schedule J for such in</li> <li>For any individual listed on line 1a, is the sum of return the organization and related organizations greater the</li> </ul>			per	isatii f 'Ya	on a	and o	other	compensation fro	om ch	3 X
ındıvıdual										4 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sch Section B. Independent Contractors	edule J	for s	uch	per	son		aleu	organization for s		5 X
Complete this table for your five highest compensate compensation from the organization	ed indep	ende	ent (	cont	ract	ors (	that	received more tha	n \$100,000 of	
(A) Name and business addres	.s							(B	) of Services	(C) Compensation
That is and sacrificed desired										
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►	but not l	ımıte	ed to	o tho	se	liste	d ab	ove) who received	more than	

Pai	t VIII   Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	the first part of the first pa				
	h Total. Add lines 1a-1f	623,595.			
PROGRAM SERVICE REVENUE	Business Code  2 a  b  c  d  e  f All other program service revenue				
P.R.	g Total. Add lines 2a-2f  3 Investment income (including dividends, interest and other similar amounts)  4 Income from investment of tax-exempt bond proceeds  5 Povalties	678.	0.	0.	678.
	(i) Real (ii) Personal  6a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss)  7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss)				
OTHER REVENUE	d Net gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18  b Less direct expenses c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19  b Less: direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances b Less cost of goods sold  b 48,587.				
	c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a  b	35,816.	35,816.	0.	0.
	d All other revenue e Total. Add lines 11a-11d	660,089.	35,816.	0.	678.

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 req	uired to complete columns	(B), (C), and (D).
--	-------------------	---------------------------	--------------------

	All other organizations must comp	(A)	(B)		(D)
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	(C) Management and general expenses	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	19,450.	19,450.		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	129,428.	63,465.	65,963.	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)	223, 1231	35, 1331	33,3331	
7	Other salaries and wages	149,731.	127,271.	22,460.	0.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	42,031.	35,726.	6,305.	0.
10	Payroll taxes	18,163.	13,015.	5,148.	0.
11	Fees for services (non-employees)				
á	a Management			· · · · · · · · · · · · · · · · · · ·	
	b Legal				
	c Accounting	750.	0.	750.	0.
	d Lobbying	700.	•		······································
	e Prof fundraising svcs. See Part IV, In 17				
	<u> </u>			<del></del>	
	Investment management fees				
	Other				
	Advertising and promotion	62.710	40.005	14 702	
13	Office expenses	63,718.	48,925.	14,793.	0.
14	Information technology	10,394.	0.	10,394.	0.
15	Royalties		10.000	10.050	
16	Occupancy	20,860.	10,808.	10,052.	0.
17 18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials	10,163.	0.	10,163.	0.
19	Conferences, conventions, and meetings	23,365.	23,365.	0.	0.
	Interest		==,,,,,,,		
21	Payments to affiliates	-,,-			<u> </u>
22	· ·	14,673.	11,661.	3,012.	0.
	Insurance	11,073.	11,001.	3,012.	
	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 )				
	Mission expense	156,826.	156,826.	0.	0.
	Sabbath school	729.	729.	0.	0.
	Bank charges	2,530.	0.	2,530.	0.
	Business entertainment	194.	0.	194.	0.
	Dues and subscriptions	322.	322.	0.	0.
	All other expenses	15,020.	12,931.	2,089.	0.
	Total functional expenses. Add lines 1 through 24f	678,347.	524,494.	153,853.	0.
_	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				
BAA		<u>-</u>	······································		Form <b>990</b> (2009)

**Balance Sheet** 

Part X

(A) Beginning of year (B) End of year Cash - non-interest-bearing 275 1 275. 2 201,652. Savings and temporary cash investments 282,409 3 Pledges and grants receivable, net 0. 0. 1,272. 1,816. Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 129,142 8 126,614. 9 9 Prepaid expenses and deferred charges 10 a 10a Land, buildings, and equipment cost or other basis 594,732. Complete Part VI of Schedule D 10b 484,217. 105,830. 10 c 110,515. **b** Less accumulated depreciation 11 Investments - publicly-traded securities 11 20,000. 12 54,466. 12 Investments - other securities. See Part IV, line 11 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 15 Other assets See Part IV. line 11 15 Total assets Add lines 1 through 15 (must equal line 34) 538,928. 16 495,338. 16 2,149. 1,918. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L Secured mortgages and notes payable to unrelated third parties 23 23 24 8,100. Unsecured notes and loans payable to unrelated third parties 33,200. 25 Other liabilities Complete Part X of Schedule D 35,349 26 10,018 Total liabilities. Add lines 17 through 25 and complete lines Organizations that follow SFAS 117, check here 27 through 29 and lines 33 and 34. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 29 29 Permanently restricted net assets P X and complete Organizations that do not follow SFAS 117, check here FUZD lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, and equipment fund 32 485,320. 32 Retained earnings, endowment, accumulated income, or other funds 503,579. 485,320. 503,579. 33 33 Total net assets or fund balances. 34 495,338. 34 Total liabilities and net assets/fund balances 538,928. Form 990 (2009) BAA

orm <b>990</b> (2009) Inspiration Books East, Inc.	63-0831249	_ Pa	ige <b>12</b>
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990.   Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2 a		X
b Were the organization's financial statements audited by an independent accountant?	2 b		Х
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant?	ght of the audit,		
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year well consolidated basis, separate basis, or both	re issued on a		
Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	in the Single 3a		х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ne required audit		

# SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Name	of the	organization							Employe	r identificat	ion number		
Ins	pi:	ration Books	East, Inc.						63-08	31249	)		
Par	ţĪ	Reason for Pul	olic Charity Statu	s (All organizations	must c	comple	te this	part.)	See ı	nstructi	ions		
The c	rga	nization is not a priv	ate foundation becaus	e it is (For lines 1 through	gh 11, ch	neck onl	y one bo	ox.)					
1		A church, convention	n of churches or asso	ciation of churches descr	ribed in s	section	170(b)(1	)(A)(i).					
2	П	A school described	in section 170(b)(1)(A	)(ii). (Attach Schedule E	)								
3	П	A hospital or coope	rative hospital service	organization described in	n <b>sectio</b> i	n 170(b)	(1)(A)(ii	i).					
4	Ħ	A medical research	organization operated	I in conjunction with a ho	spital de	escribed	ın <b>secti</b>	on 170(	b)(1)(A)	(iii). Ente	r the hospit	al's	
	ш	name, city, and stat	•	· •	•			`			•		
5			erated for the benefit of	of a college or university of	owned o	r operat	ed by a	governr	nental u	nit descr	ibed in sec	tion	
6 7	X	An organization tha		overnmental unit describ substantial part of its sup irt II )					or from t	he gener	al public de	escribe	∍d
8			community trust described in section 170(b)(1)(A)(vi). (Complete Part II )										
9		on 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 exercises are unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after											
	_		section 509(a)(2). (Co								3		
10	Ш	An organization org	anized and operated of	exclusively to test for pub	lic safet	y See s	ection 5	509(a)(4	).				
11	Ш	more publicly suppo	orted organizations de	exclusively for the benefit escribed in section 509(a) ation and complete lines	)(1) or s	ection 5	09(a)(2)	ions of, See <b>s</b> e	or carry ection 5	out the 909(a)(3).	purposes of Check the	f one of box th	or nat
		a Type I	<b>b</b> Type II	c 🔲 Type III	l – Func	tionally	integrate	ed		d 🗌	Type III-	Other	
е		By checking this bo than foundation ma 509(a)(2).	x, I certify that the org nagers and other than	anization is not controlle one or more publicly su	d directl	y or indi organiza	rectly by ations de	one or escribed	more d in secti	isqualifie on 509(a	d persons )(1) or sect	other ion	
f		If the organization r check this box	eceived a written dete	rmination from the IRS th	hat is a	Type I, T	Гуре II о	r Type I	II suppo	orting org	anızatıon,		
g		Since August 17, 20	006, has the organizat	ion accepted any gift or	contribu	ition fror	n any of	the foll	owing p	ersons?	١	Yes	No
		(i) a person who below, the go	directly or indirectly overning body of the su	ontrols, either alone or to	ogether v	with pers	sons des	scribed	ın (ıı) an	ıd (III)	11 g (i)	103	
		(ii) a family mem	ber of a person descr	ribed in (i) above?							11 g (ii)		
		(iii) a 35% control	led entity of a person	described in (i) or (ii) ab	ove?						11 g (iii)		
h		Provide the following	ig information about th	ne supported organization	าร								
	(	i) Name of Supported Organization	(ii) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat (i) listed	Is the tion in col d in your erning ment?	the organ	rou notify iization in (i) of ipport?	organizat	Is the tion in col zed in the S ?	(vii) Amoun	t of Sup	port
				_	Yes	No	Yes	No	Yes	No			
					<u> </u>	ļ <u>.</u>							
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					<del> </del>	<del> </del>		<u> </u>	<del> </del>	<del>  -  </del>			
Total													

Par	t II Support Schedule for	Organizations	Described in	Sections 170(b	)(1)(A)(iv) an	d 170(b)(1)(A)			
	(Complete only if you checke	d the box on line 5	5, 7, or 8 of Part I.	)					
Sec	tion A. Public Support								
begi	ndar year (or fiscal year nning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	628,915.	595,085.	637,317.	759,986.	623,595.	3,244,898.		
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf								
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								
4	Total. Add lines 1-through 3	628,915.	595,085.	637,317.	759,986.	623,595.	3,244,898.		
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)						520,420.		
6	Public support. Subtract line 5 from line 4						2,724,478.		
Sec	tion B. Total Support						2,721,470.		
Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009									
7	Amounts from line 4	628,915.	595,085.	637,317.	759,986.	623,595.	3,244,898.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	7,847.	12,900.	9,787.	1,886.	678.	33,098.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on						·		
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)								
11	Total support. Add lines 7 through 10						3,277,996.		
12	Gross receipts from related activ	ties, etc. (see inst	ructions)			12	424,894.		
	First five years. If the Form 990 organization, check this box and	stop here	<u> </u>	, third, fourth, or f	fifth tax year as a	section 501(c)(3)	<b>▶</b> □		
	tion C. Computation of Pu								
	Public support percentage for 200 Public support percentage from 2		• • • • • • • • • • • • • • • • • • • •	11, column (f)		14	83.11 % 98.88 %		
16 a	33-1/3 support test — 2009. If the and stop here. The organization	organization did r	not check the box	on line 13, and th	ne line 14 is 33-1/	3 % or more, che			
t	33-1/3 support test — 2008. If the and stop here. The organization				and line 15 is 33-	1/3% or more, che			
17 a	a 10%-facts-and-circumstances te or more, and if the organization in the organization meets the 'facts	st - 2009 if the or neets the 'facts-an	ganization did not id-circumstances'	check a box on hi test, check this bo	x and stop here.	Explain in Part IV	/ how		
ŀ	o 10%-facts-and-circumstances te or more, and if the organization in organization meets the 'facts-and	neets the 'facts-an	d-circumstances'	test, check this bo	x and stop here.	Explain in Part IV	5 is 10% / how the		
18	Private foundation. If the organiz	ation did not chec	k a box on line, 13	3, 16a, 16b, 17a, c	or 17b, check this	box and see instr	ructions -		

Page 3

Schedule A (Form 990 or 990-EZ) 2009 Inspiration Books East, Inc.

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

Sec	tion A. Public Support	ked the box on in	ie s of r arcti				
	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	(u) 2000	(5) 2000	(0) 2307	(4) 2000	(6) 2333	() Total
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						
	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 through 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 amount on line 13 for the year						
c	: Add lines 7a and 7b		1		1.		
8	Public support (Subtract line						
	7c from line 6 )						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
	Amounts from line 6 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 i organization, check this box and	s for the organiza stop here	ition's first, secon	d, third, fourth, o	or fifth tax year as	a section 501(c)	<u> </u>
Sec	tion C. Computation of Pul	blic Support F	Percentage				
15	Public support percentage for 200	09 (line 8, column	(f) divided by line	e 13, column (f))		1	
	Public support percentage from 2					1(	6 %
Sec	tion D. Computation of Inv	estment Inco	me Percentage	е			
17	Investment income percentage for	or <b>2009</b> (line 10c,	column (f) divided	by line 13, colur	mn (f))	1	7 %
18	Investment income percentage from	om <b>2008</b> Schedul	e A, Part III, line 1	17		18	8 %
	<b>33-1/3 support tests</b> — <b>2009.</b> If the more than 33-1/3%, check this book	ox and stop here.	The organization	qualifies as a pu	blicly supported or	ganization	▶ ∐
	33-1/3 support tests – 2008. If the is not more than 33-1/3%, check	this box and stop	here. The organiz	zation qualifies as	s a publicly suppor	rted organization	%, and line 18
20	Private foundation. If the organiz	zation aid not ched	ck a box on line 1	4, 19a, or 19b, cf	neck this box and s	see instructions	

Scriedule A	(F01111 990 0	1 990-62) 2	2009 1115	piracio	II BOOKS	East, 1	inc.		3-003124	rage •
	Suppleme Part II, Im	ental Info ne 17a or	17b; and	Complete Part III, li	this part t ne 12. Pro	o provide ovide any	the explana other addition	ations requir onal informa	ed by Part ation. See in	II, line 10; nstructions.
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### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

# **Supplemental Financial Statements**

 Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 ► Attach to Form 990.
 ► See separate instructions 2009

Open to Public Inspection

Employer Identification number

	spiration Books East, Inc.			63-0831249	
Pa	Organizations Maintaining Donor the organization answered 'Yes' to	r Advised Funds or Other Similar Fun o Form 990, Part IV, line 6.	ds or Acc	ounts Complete	ıf
		(a) Donor advised funds	(b) F	unds and other acco	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				
5	Did the organization inform all donors and done funds are the organization's property, subject to	or advisors in writing that the assets held in don o the organization's exclusive legal control?	or advised	Yes	☐ No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for the purpose conferring impermissible private benefits	s, and donor advisors in writing that grant funds ne benefit of the donor or donor advisor or for ar fit??	may be ny other	Yes	☐ No
Pa	rt II   Conservation Easements Comple	ete if the organization answered 'Yes'	to Form 99	00, Part IV, line	7.
1	Purpose(s) of conservation easements held by	the organization (check all that apply)			
	Preservation of land for public use (e.g., re	ecreation or pleasure) Preservation o	of an historica	ally important land a	rea
	Protection of natural habitat	Preservation o	of certified his	storic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization last day of the tax year	n held a qualified conservation contribution in the	ne form of a c	conservation easeme	ent on the
	last day of the tax year			Held at the End of	the Year
	a Total number of conservation easements		2a		
	<b>b</b> Total acreage restricted by conservation easen	nents	2b		
	c Number of conservation easements on a certifi	ed historic structure included in (a)	2c		
	d Number of conservation easements included in	(c) acquired after 8/17/06	2d		
3	Number of conservation easements modified, t	ransferred, released, extinguished, or terminate	d by the orga	inization during the t	ax
	year ►				
4	Number of states where property subject to con		_		
5	Does the organization have a written policy regand enforcement of the conservation easemen	garding the periodic monitoring, inspection, hand	lling of violati	ions, Yes	No
6		g, inspecting, and enforcing conservation easem	nents	Tes	
7	Amount of expenses incurred in monitoring, induring the year ▶	specting, and enforcing conservation easements	\$_		
8	Does each conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of sect	tion	Yes	☐ No
9	include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its revenue and of the organization's financial statements that des	scribes the or	rganization's accoun	sheet, and ting for
Pa	rt III Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	Other Sin 8.	nilar Assets	
1	If the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial statement	ic exhibition, education, or research in furtheran	nt and balanc ce of public s	e sheet works of art service, provide, in F	, historical Part XIV,
	b If the organization elected, as permitted under treasures, or other similar assets held for publ amounts relating to these items	SFAS 116, to report in its revenue statement ar ic exhibition, education, or research in furtheran	nd balance sh ce of public s	neet works of art, his service, provide the f	torical ollowing
	(i) Revenues included in Form 990, Part VIII,	line 1		<b>►</b> \$	
	(ii) Assets included in Form 990, Part X			<b>&gt;</b> \$	
	If the organization received or held works of an amounts required to be reported under SFAS	116 relating to these items	r financial ga		ving
	a Revenues included in Form 990, Part VIII, line	1		►\$	
	<b>b</b> Assets included in Form 990, Part X			<b>►</b> \$	

		ks East, Inc			63-083			Page 2				
Part III Organizations Mainta	ining Collection	ons of Art, Histo	orical Treasure	s, or Ot	ther Similar Ass	ets (c	<u>ontınu</u>	ıed)				
3 Using the organization's acquisition items (check all that apply)	on accession and	other records, chec	k any of the followi	ng that a	re a significant use o	of its co	llection					
a Public exhibition		<b>—</b>	or exchange progra	ams								
<b>b</b> Scholarly research		e 🗌 Other										
c Preservation for future genera	ations											
4 Provide a description of the organ Part XIV	nization's collection	ns and explain how	they further the org	ganızatıoı	n's exempt purpose	ın						
5 During the year, did the organizat assets to be sold to raise funds ra						Yes		No				
Part IV Escrow and Custodia 9, or reported an amo				swered	'Yes' to Form 99	90, Pa	ırt IV,	line				
1a is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or	other intermediary	for contributions or	other ass	sets not	Yes	Γ	No				
<b>b</b> If 'Yes,' explain the arrangement				Г								
						Amoun	<u>t                                    </u>					
c Beginning balance					1c							
d Additions during the year		•		-	1 d							
e Distributions during the year				-	1e							
f Ending balance				Ĺ	1f	<del></del>		٦				
2a Did the organization include an a		0, Part X, line 21?			l	Yes	L	No				
b If 'Yes,' explain the arrangement				000	D. 1 1 / 1 10							
Part V   Endowment Funds Co	<del></del>	<del></del>				T						
	(a) Current year	(b) Prior yea	r (c) Two year	rs back	(d) Three years back	(e)	Four year	s back				
1 a Beginning of year balance						<del> </del>						
<b>b</b> Contributions						ļ						
c Net Investment earnings, gains, and losses												
d Grants or scholarships												
<ul> <li>Other expenditures for facilities and programs</li> </ul>												
f Administrative expenses					<del></del>							
<b>g</b> End of year balance												
2 Provide the estimated percentage	of the year end b	alance held as			· ·							
a Board designated or quasi-endow	ment -	*										
<b>b</b> Permanent endowment	<del></del>											
c Term endowment ►												
3a Are there endowment funds not in	n the possession o	of the organization t	hat are held and ad	dministere	ed for the	[	Yes	No				
organization by  (i) unrelated organizations						3a(i)	163	110				
(ii) related organizations						3a(ii)						
<b>b</b> If 'Yes' to 3a(ii), are the related of	rannizations listed	Lac required on Set	nodulo D2			3b		-				
4 Describe in Part XIV the intended	•	•				JD		<u></u>				
Part VI Investments—Land, B				rt X lin	ne 10							
Description of investment		Cost or other basis	(b) Cost or othe		(c) Accumulated	(h)	Book Va	alue				
·	(4)	(investment)	basis (other)		Depreciation	(4)						
1 a Land	<u> </u>	0.	32,45		02 160			,450.				
b Buildings	<u> </u>	0.	107,42		92,168.			, 259.				
c Leasehold improvements	<u> </u>	0.	46,05		21,727.			,332.				
d Equipment	nent 0. 408,796. 370,322. 38,474.											
e Other	_ (4)	(arm 000, D-d V	 				110					
Total. Add lines 1a through 1e (Column	n (a) must equal F	orm 990, Part X, co	piumn (B), line 10(c	<i>))</i>	► Cohod	ll		,515.				
BAA					Sched	iule <b>v</b> (l	-orm 99	90) 2009				

TEEA3302 02/02/10

Schedule <b>D</b> (Form 990) 2009 Inspiration Books			63-0831249 P	age 3
Part VII Investments-Other Securities See Fo	orm 990, Part X, Iir	ne 12.		
(a) Description of security or category . (including name of security)	(b) Book value	(c) Me Cost or end	thod of valuation -of-year market value	
Financial derivatives				
Closely-held equity interests .				
Other				
Z Coil Pain Relief stock	20,000.	Cost		
Silver coins	34,466.	Cost		
	1			
Total. (Column (b) must equal Form 990 Part X, col (B) line 12)	54,466.			
Part VIII Investments—Program Related (See I		1		
(a) Description of investment type	(b) Book value	(c) Me Cost or end	thod of valuation -of-year market value	
			=	
Total (Column (b) must equal Form 990, Part X, Col (B) line 13)	line 15)		<del></del>	
Part IX Other Assets (See Form 990, Part X,			(h) Dook wale	
(a) De	escription		(b) Book valu	<u></u>
			·	
		· · · · · · · · · · · · · · · · · · ·		
	<del></del>			
	<del></del>			
Total. (Column (b) must equal Form 990, Part X, col (B), lir	ne 15)		<b>•</b>	
Part X Other Liabilities (See Form 990, Part				
(a) Description of Liability	(b) Amount		<del></del>	
Federal Income Taxes				
Total (Column (b) must equal Form 990, Part X, col (B) line 25) ►		<u> </u>		
2. FIN 48 Footnote In Part XIV, provide the text of the footn	ote to the organization's	s financial statements that i	reports the organization's liabili	ıtv

Sche	edule <b>D</b> (Form 990) 2009 Inspiration Books East, Inc.	63-0831249	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statem	ents	
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 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		
Pai	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return	
1	Total revenue, gains, and other support per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	a Net unrealized gains on investments		
	Donated services and use of facilities 2b		
	Recoveries of prior year grants		
	d Other (Describe in Part XIV)		
	e Add lines 2a through 2d	2 e	
	Subtract line 2e from line 1	3	
	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		
	o Other (Describe in Part XIV)		
	c Add lines <b>4a</b> and <b>4b</b>	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
$\overline{}$	rt XIII   Reconciliation of Expenses per Audited Financial Statements With Expens	1 1	
	Total expenses and losses per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25		
	a Donated services and use of facilities 2a		
	b Prior year adjustments 2b		
	C Other losses 2c		
	d Other (Describe in Part XIV)		
	e Add lines 2a through 2d	2e	
_	Subtract line 2e from line 1	3	_
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4	
	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	
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)  rt XIV Supplemental Information	5	
line -	iplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete mation	Part IV, lines 1b and 2b, Pai this part to provide any add	t V, itional
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Schedule **D** (Form 990) 2009

Schedule D	(Form 990) 2009	Inspiration	Books East,	Inc.	63-6	0831249	Page 5
Part XIV	Supplemental	Inspiration Information (co	ntinued)				
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#### Schedule F (Form 990)

Department of the Treasury Internal Revenue Service

#### Statement of Activities Outside the United States

OMB No 1545-0047

<u> 2009</u>

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization Employer identification number 63-0831249 Inspiration Books East, Inc. Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the No Yes grantees' eliqibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 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 ) (f) Total expenditures in (e) If activity listed in (b) Number of (c) Number of (d) Activities conducted in (a) Region region (by type) (i.e., fundraising, program services, grants to recipients located in the region) (d) is a program offices in the èmployees or service, describe specific type of region agents in region region service(s) in region

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

Schedule F (Form 990) (2009)

63-0831249

Page 2

Schedule F (Form 990) 2009

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.

											:				
Cash															
11,250.															
Evangelism															
South Asia															
								•							
	Asia	Asia Evangelism													

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2009

Page 3

Inspiration Books East, Inc.

Schedule F (Form 990) 2009

(b) Region

(a) Type of grant or assistance

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.

(d) Amount of cash grant (c) Number of recipients

(f) Amount of non-cash assistance (e) Manner of cash disbursement

(h) Method of valuation (book, FMV, appraisal, other)

(g) Description of non-cash assistance

63-0831249

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Schedule F (Form 990) 2009

Schedule F	(Form 990) 2009	Inspiration	Books East,	Inc.		63-083124	9 Pag	je <b>4</b>
Part IV	Supplemental	Inspiration Information						
	Complete this part	to provide the infor	mation required in F	Part I, line 2, and	l any additional i	nformation		
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#### SCHEDULE O (Form 990)

# **Supplemental Information to Form 990**

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Open to Public Inspection

Name of the organization	Employer identification number
Inspiration Books East, Inc.	63-0831249
Pt VI-A, Line 2 Charles & Judy Wheeling are married, Vincent & Summer Hecox are married	
Pt_VI-A, Line 8b There are no committees other than governing body	
Pt VI-B, Line 11A Copies of the Form 990 are made available at the next meeting after filing.	
Pt_VI-B, Line 15 Compensation governed by majority of board and is documented	
Pt_VI-C, Line 19 Documents made available upon request	