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Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

B c	heck if ap Address c	oplicable Please		1		dentific 91-127	cation number 75574
□ _"	Name cha nitial retu Ferminate	rn type.		om/suite	Telephone r		3-6512
Ĭ [^]	Amended	Specifi		ľ	F Group Exe	•	on
	• Sect		izations and 4947(a)(1) nonexempt charitable trusts must attach ompleted Schedule A (Form 990 or 990-EZ).		ting Method specify)		Cash
	Vebsit	www.Home	steadRetreats.com			-	zation is not ale B (Form 990,
			only one) — Ø 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527	•	or 990-PF).		ле в (голп ээо,
K C	Check •	if the orga	nization is not a section 509(a)(3) supporting organization and its gross rec	eipts are no	rmally not m	ore th	an \$25,000. A
	_		eturn is not required, but if the organization chooses to file a return, be s		•	turn.	45000
_	_		ne 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead o			<u> </u>	15289
Pa	art I		penses, and Changes in Net Assets or Fund Balances			Sior	5504
	1	•	ifts, grants, and similar amounts received	• • •	1 2	-	9198
	2	-	revenue including government fees and contracts		3		
	3 4	Investment inco	es and assessments		4		1!
	5a		om sale of assets other than inventory 5a	• • •	2555	 	
	b		ner basis and sales expenses		30		
			m sale of assets other than inventory (Subtract line 5b from line	5a)	5c	1	252
e le	6		of trailes (complete applicable parts of Schedule G). If any amount is from gaming,	•			**
Revenue	a	Gross revenue (
ě		Beported on ding					
	b	Less: direct exp	enses other han fundraising expenses 6b				
	С		oss) from Sec ial events and activities (Subtract line 6b from line	6a)	6с		
	7a	Gro Q Q Q Q Q Q Q	yeoldry, less returns and allowances		1521		
	b b	Less: cost of go	ods sold		582		
	С	Gross profit or (, , (,		<u>7c</u>		93
	8	Other revenue () 8_		177
	9		Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		. ▶ 9		15228
	10		ar amounts paid (attach schedule)		10		
	11	•	or for members		. 11		3111
 € U I U Expenses 	12		ompensation, and employee benefits		12	-	42
Ë	13		s and other payments to independent contractors		13	├	6168
⋑X	14 15	• • •	t, utilities, and maintenance		<u>14</u> 15	 	
3	16		tions, postage, and shipping) 16		6208
•	17		Add lines 10 through 16		_ ′	 	15530
	18		it) for the year (Subtract line 17 from line 9)			 	-3018
Assets	19		and balances at beginning of year (from line 27, column (A)) (m			1	
88							7629
4		end-of-year figu	re reported on prior year's return)				
et A					<u> </u>		
Net A	20 21	Other changes i	n net assets or fund balances (attach explanation)		<u>20</u>		
Net A	20	Other changes i	n net assets or fund balances (attach explanation)		<u>20</u>	ad of	
Net A	20 21 art II	Other changes i Net assets or fu Balance She	n net assets or fund balances (attach explanation)	e, file Forn	20 . > 21 n 990 inste		Form 990-EZ. (B) End of year
	20 21 art II	Other changes i Net assets or fu Balance She	n net assets or fund balances (attach explanation)	e, file Forn	20 21 n 990 inste	22	Form 990-EZ. (B) End of year 1089
23	20 21 art II	Other changes i Net assets or fu Balance She ash, savings, and and and buildings	n net assets or fund balances (attach explanation)	e, file Forn	20 . ▶ 21 n 990 insterning of year 6231 71248	22	Form 990-EZ. (B) End of year 1089 7419
23 24	20 21 art II Ca La	Other changes in Net assets or fur Balance She ash, savings, and and and buildings ther assets (description).	n net assets or fund balances (attach explanation)	e, file Forn	20 21 n 990 inste nning of year 6231 71248	22 23 24	Form 990-EZ. (B) End of year 1089 7419
23 24 25	20 21 art II Ca La Ot	Other changes in Net assets or fur Balance She ash, savings, and and buildings ther assets (description assets).	n net assets or fund balances (attach explanation)	e, file Forn	20 21 n 990 insterning of year 623 71248 2114	22 23 24 25	Form 990-EZ. (B) End of year 1089 7419 181
P: 22 23 24	20 21 art II Ca La Oti	Other changes in Net assets or fur Balance Should be ash, savings, and and buildings ther assets (description of the state of the same of	n net assets or fund balances (attach explanation)	e, file Forn	20 21 n 990 inste nning of year 6231 71248	22 23 24 25 26	

Par	t III Statement of Program Service Accom			l.)		Expenses
Vha	tio the organization of printing a compression	Propagation of the gospel of				ired for section
Desc	cribe what was achieved in carrying out the org	anization's exempt purpos	ses. In a clear ar	nd concise		(3) and 501(c)(4) izations and section
nan	ner, describe the services provided, the number of	of persons benefited, and o	ther relevant info	rmation for		a)(1) trusts, optional
ach	program title.				for oth	
28	We helped 36 different churches plan and facilitate 44	4 Bible conferences. 1128 pe	ople attended the			
	conferences. We provided devotionals, facilities, me			s groups,		
	womens groups, and youth.	<u>'</u>				
		meludes foreign grants, obs		N [28a	95450
	(Grants \$) If this amount Our Sunday evening services involve 45 people and	includes foreign grants, che	ng of the scriptures	<u>. </u>	20a	
29	along with music and bible studies in the homes duri					
	financial difficulties.		ilgie illoilis wilo ale			
						45040
	(Grants \$) If this amount	includes foreign grants, che	eck here	<u>. ▶ ⊔</u>	29a	45018
30	We are involved with various other ministries who are					
	such as Ecuador, Nepal, India, and Papua New Guine	ea. We also are involved with	orphanages in Ner	oal as well		
	as rescuing and training poor women in Nepal.					
	(Grants \$) If this amount	ıncludes foreign grants, che	eck here	. ▶ □	30a	14834
31	Other program services (attach schedule)					
٠.		includes foreign grants, che	eck here	▶ □	31a	
32	Total program service expenses (add lines 28a t				32	155302
	t IV List of Officers, Directors, Trustees, and Key					
Гаг	List of Officers, Directors, Trustees, and Rey	(b) Title and average	(c) Compensation	(d) Contribution		(e) Expense
	(a) Name and address	hours per week	(If not paid,	employee benefit	plans &	account and
		devoted to position	enter -0)	deferred compe	nsation	other allowances
	ory S. Miller 19028 Meadow Lake Rd	President/Treasurer/Dir. 60 hours a week	_			
	nomish, WA 98290		0			See Attached
Tere:	sa Miller 19028 Meadow Lake Rd	Secretary/Director 30 hours a week				
	nomish, WA 98290	a week	0		0	0
Mark	D. Barrett 8510 E. Meadow Lake Drive	V. President/Director 10				
Snot	nomish, WA 98290	hours a week	0	l	0	0
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Part	V Other Information (Note the statement requirements in the instructions for Part V.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		>
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		>
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		>
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		~
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		~
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:	1		
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities	1		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
D	transaction during the year or is it 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 Schedule L, Part I	40b		•
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	-	V
41	List the states with which a copy of this return is filed. ▶ In Washington no filing is required			
42a	The organization's books are in care of ▶ Gregory S. Miller Telephone no. ▶	360-56		7
	Located at ▶ 19028 Meadow Lake Rd Snohomish, WA ZIP + 4 ▶	982	290	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			,
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	42b		~
	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.			
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	<u> </u>	~
	If "Yes," enter the name of the foreign country: ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year			
				Τ_
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			
	Form 990-EZ	44	<u> </u>	~
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If		ļ	
	"Yes," Form 990 must be completed instead of Form 990-EZ	45	\	<u>/</u>

Part VI

Part V	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 an	/(a)(1) nonexempt chari	xempt charita table trusts m	able trusts only. A ust answer questio	II sect ns 46	tion ⊢49b
46 I	Did the organization engage in direct or indirect	political campaign activiti	es on behalf of	or in opposition to	,	Yes No
	candidates for public office? If "Yes," complete S				46	
	Did the organization engage in lobbying activities				47	
	s the organization a school as described in sectio				48	
	Did the organization make any transfers to an ex-				49a	
	f "Yes," was the related organization a section 5				49b	
50 (Complete this table for the organization's five high	ghest compensated emplo	yees (other thai	n officers, directors, t	rustee	s and key
	employees) who each received more than \$100,0	(b) Title and average	(c) Compensation		r -	Expense
_	(a) Name and address of each employee paid more than \$100,000	hours per week devoted to position	(c) Compensation	employee benefit plans & deferred compensation	àcc	count and allowances
NONE						
			-			
51	Complete this table for the organization's five t \$100,000 of compensation from the organization	n. If there is none, enter "N	lone."			
NONE	(a) Name and address of each independent contractor	paid more than \$100,000	(b)	Type of service	(c) Con	npensation
NONE						
				-		
- -						
	-					
d	Total number of other independent contractors e	each receiving over \$100,0	00 ▶			
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete Declaration	ed this return, including accompar of preparer (other than officer) is l	nying schedules and based on all informa	statements, and to the be tion of which preparer has	st of my any kno	knowledge wledge ——
Sign Here	- In Mills			7/16/10		
	Signature of officer			Date		
	Gregory S. Miller President Type or print name and title					
Paid	Preparer's	Date	Check if self-	Preparer's identifying nu	mber (See	e instructions)
Prepare	signature		employed ▶			
Use On	Firm's name (or			EIN ►		
	address, and ZIP + 4			Phone no ▶		
May the	e IRS discuss this return with the preparer show	n above? See instructions		<u> ▶ L</u>	Yes	<u> </u>
				FC	バロ フゴリ	 (∠∪∪9)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Community Bible School

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

		11000011	101 1 00010 011	direy oracao par or	7			31.1.0				
'nе	orga			dation because it is: (
1				rches, or association			ribed in s	ection 1	70(b)(1)(A	4)(i).		
2				n 170(b)(1)(A)(ii). (Att								
3	닏	•	•	ospital service organ						.=00.144	·/^\/*** = .	
4	П	hospital's na	me, city, and sta									
5		section 170	(b)(1)(A)(iv). (Cor		-	-					unit descri	bed in
6		A federal, sta	ate, or local gove	ernment or governme	ntal unit	described	d in sect i	ion 170(t)(1)(A)(v)) .		
7				receives a substantia 1)(A)(vi). (Complete P		its suppo	rt from a	governm	ental uni	t or from 1	the general	public
8				l in section 170(b)(1)								
9		receipts from	n activities relate n gross investme	receives: (1) more that ed to its exempt funct ent income and unre after June 30, 1975.	ions-su lated bus	bject to d siness tax	certain ex kable inc	ceptions ome (les:	, and (2) s section	no more	than 331/3 %	of its
0		An organizat purposes of	tion organized a one or more put	nd operated exclusive nd operated exclusive olicly supported organ t describes the type	ely for th	ne benefi described	t of, to p	erform ti on 509(a)	he functi (1) or sec	ons of, o	a)(2). See s e	ut the
		a ☐ Type				e III–Fun				_	Type III-O	ther
е		By checking	this box, I cert	ify that the organizat n managers and other	ion is no	t control	led direc	tly or ind	lirectly by	y one or	more disqu	alified
		509(a)(1) or s	section 509(a)(2).	•								
f		organization,	, check this box	a written determinati							III support	ing . 🗆
g		Since Augus following per		the organization acce	epted any	giπ or c	ontributio	on trom a	ny or the	•		
		(i) A person	who directly or	r indirectly controls, ening body of the supp				h person	s descrit	ped in (ii)	Yes 11g(i)	No
		(ii) A family	member of a pe	rson described in (i) a of a person described	above?						11g(ii) 11g(iii)	
h				ation about the suppo								
(i)		e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the o	organization sted in your document?	(v) Did y the organ col (i)	ou notify nization in of your port?	organizat (i) organi	s the tion in col zed in the S ?	(vii) Amour suppor	
					Yes	No	Yes	No	Yes	No		
	-											
	-											
												

Total

Par	(Complete only if you check					and 1	70(b)(1))(A)(vi)
Sect	tion A. Public Support			<u>.</u>				
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e)	2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			Not	Applicable			
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5 6	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) Public support. Subtract line 5 from line 4.							
Sec	tion B. Total Support							_
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e)	2009	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
11	Total support. Add lines 7 through 10 .		<u> </u>		-	40		
12	Gross receipts from related activities, etc					12		
13	First five years. If the Form 990 is for organization, check this box and stop he tion C. Computation of Public Su	re	<u> </u>	nd, third, fourth				n 501(c)(3) ▶ □
				1 action (6)		14		%_
14	Public support percentage for 2009 (line		•					
15 10-	Public support percentage from 2008 Scl					15 6 or m	oro obs	
16a	331/3 % support test—2009. If the organizand stop here. The organization qualifies							
b	331/3 % support test-2008. If the organiz	zation did not	check a box on	line 13 or 16a,	and line 15 is	33⅓ %	or more,	check this
	box and stop here. The organization qua							
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circum organization meets the "facts-and-circum	acts-and-circui stances" test.	mstances" test, The organization	check this box	and stop here. publicly suppor	Explai ted org	n in Part ganızatior	IV how the
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "forganization meets the "facts-and-circumstances organization meets the "facts-and-circumstances organization did in the organization did in th	acts-and-circun ances" test. The	nstances" test, o organization qua	check this box a alifies as a public	and stop here . By supported or	Explair ganizat	n in Part	IV how the

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

Sec	tion A. Public Support						
Ca	llendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	75592	116667	61948	55321	55048	364576
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	69361	90083	69438	102946	91983	423811
3	Gross receipts from activities that are not an unrelated trade or business under section 513	1429	1834	589	916	264	5032
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5	146382	208584	131975	159183	147295	793419
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	24260	39796	27527	25079	6825	123487
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the	5040	45004	1000	10004	7070	40400
	amount on line 13 for the year	5942 30202	15361 55157	1036 28563	10094 35173		40106 163593
8 8	Add lines 7a and 7b	30202	33137	20003	33173	14490	629826
Sec	tion B. Total Support						
Ca	llendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	146382 1487	208584	131975	159183 84		793419
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	O	0	0	0
с 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	1487 2007	5292	67 5948	84 4688	1789 3200	3491 21135
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0
13	Total support. (Add lines 9, 10c, 11, and 12)	149876	213940		163955	' 	818045
14	First five years. If the Form 990 is for organization, check this box and stop	here , ,		nd, third, fourth	•		n 501(c)(3) ▶ □
	tion C. Computation of Public Su	· · · · · · · · · · · · · · · · · · ·		40 1		1.5	76.99 %
15 16	Public support percentage for 2009 (lin Public support percentage from 2008 S	Schedule A, Pa	rt III, line 15			15 16	76.99 <u>%</u> 74.79 <u>%</u>
	tion D. Computation of Investmer						.43 %
17	Investment income percentage for 200	•	• •	•		17 18	.21 %
18 19a	Investment income percentage from 20 331/3 % support tests – 2009. If the organization						
b	17 is not more than 331/3 %, check this b 331/3 % support tests—2008. If the organ line 18 is not more than 331/3 %, check this	ox and stop he	ere. The organi check a box on	zation qualifies Ine 14 or line	as a publicly s	supported orga 6 is more than :	nization ▶ ☑ 33⅓ %, and _
20	Private foundation. If the organization	•	_	-			
20	rivate roundation. Il the organization	aid flot Check	a box on line i	, 10a, 01 19 <u>0</u>		edule A (Form 990	

cneaule A (F	orm 990 or 990-EZ) 2009					Page •	•
Part IV	Supplemental Information. Part II, line 17a or 17b; and	. Complete this Part III, line 12	part to provide . Provide any ot	the explanation ther additional i	ns required Information.		-
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Form 4562

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

20**09**

Attachment Sequence No 67

Name(s) shown on return

Community Bible School

Business or activity to which this form relates

Form 990-EZ

► See separate instructions.

Identifying number 91-1275574

- 011	induity bible scribe	<u> </u>	1011119	30-LZ				91-12/05/4
Pai			ertain Property Un ted property, comp			omplete Part I.		
1			ons for a higher limit for				1	\$250,000
2			placed in service (see				2	
3			erty before reduction			ns)	3	\$800,000
4			ne 3 from line 2. If zero				4	
5						-0 If married filing		
	separately, see instr						5	
6	(a) [Description of prope	erty	(b) Cost (busin	ness use only)	(c) Elected cost		
		.,						
7	Listed property. Ent	er the amount t	from line 29		7			
8	Total elected cost o	f section 179 p	roperty. Add amounts	s in column (d	c), lines 6 and	7	8	
9			aller of line 5 or line				9	
10	Carryover of disallov	wed deduction	from line 13 of your 2	2008 Form 45	62		10	
11	Business income limitat	tion. Enter the sm	aller of business income	(not less than z	ero) or line 5 (se	e instructions)	11	
12	Section 179 expens	e deduction. A	dd lines 9 and 10, but	t do not ente	r more than lir	<u>e 11</u>	12	
13	Carryover of disallo	wed deduction	to 2010. Add lines 9	and 10, less l	ine 12 ▶	13		
			v for listed property. I					
						clude listed property.)	(See	instructions.)
14				(other than	listed proper	ty) placed in service		
	during the tax year	(see instruction	s)				14	
15	Property subject to	section 168(f)(1	I) election				15	
	Other depreciation			<u> </u>		<u> </u>	16	
Pa	IT III MACRS D	epreciation (Do not include list		.) (See instru	uctions.)	_	
				Section A	<u> </u>	<u> </u>	r	
17	MACRS deductions	for assets place	ced in service in tax y	ears beginnir	ng before 2009	9	17	9123
18	-	_				one or more general	Į	
	asset accounts, che		· · · · · · ·			O	<u> </u>	
	Section B	— Assets Plac (b) Month and year	(c) Basis for depreciation	i	ear Using the	General Depreciation	Jaysu	<u></u>
	Classification of property	placed in service	(business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) D	epreciation deduction
19	3-year property						ļ	
	5-year property		7112	5 yr	н	Y DDB		1422
_	7-year property							
	10-year property					<u> </u>		
	15-year property]						
	20-year property							
	25-year property			25 yrs.	1 11 1	5/L		··· ·
ł	Residential rental			27.5 yrs.	MM	5/L	 	
	property			27.5 yrs.	MM	9/L	-	
i	Nonresidential real	2/09	2798	39 yrs.	MM	5/L	-	63 35
	property	8/09	3684	2000 Tour Vo.	MM	S/L		
		- Assets Place	a in Service During 2	2009 lax fea	ar Using the A	Alternative Depreciation	JII Sy:	<u> </u>
	a Class life			10		5/L		
	o 12-year	ļ		12 yrs.	, 11 1	5/L	-	
	40-year	(0		40 yrs.	MM	5/L	<u></u>	
		(See instructi					04	
21							21	
22						and line 21. Enter here	00	10643
			return. Partnerships an			ctions	22	10043
23			ed in service during t section 263A costs	ne current ye		23		
	POLITOL OF THE DASIS	artinoutable (U	COULDING COURT COOLS				1	

Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A all of Section B, and Section C if applicable.

		olumns (a) throu	<u> </u>													
		Depreciation						_	I					_		
24 <i>e</i>	Do you have evid	ence to support the		nvestment	use clair	ned?	Ye	s U No	24t) If "Y∈	s," is the	<u>eviden</u>	ce writte	<u>n?</u> L	_ Yes □	<u> </u>
Тур	(a) se of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage		d) ther basi			preciatioi ivestmen	Rec	f) overy nod	(g) Metho Conven		(h Depred dedu	ciation	Elected	(i) I section cost
25		ciation allowan										25				
26	<u>`</u>	more than 509					•									
	r reperty deed	I I I I I I I I I I I I I I I I I I I	%													
	_ ·		%													
			%		-										1	
27	Property used	50% or less in			s use:											
			%								5/L –				T	
			%					-			5/L –				1	
			%				-				5/L -				1	
28	Add amounts	in column (h), l	ines 25 thr	ough 27.	Enter I	here a	nd on l	ine 21,	page 1			28			7	
29	Add amounts			-										29		
				Section												
	plete this section our employees, fi															ehicles
30	Total business	/investment mile	es driven	(a)		(t	 o)	1	c)		(d)		(e)		(f)	
30	during the y	/ear (do not es)	include	Vehicle	e 1		cle 2		icle 3	Vei	hicle 4	V	ehicle 5		Vehic	
31	Total commuting	miles driven durir	ng the year													
32	•	Total other personal (noncommuting) miles driven														
33	Total miles driv lines 30 through	ven during the y														
34	Was the vehicuse during off-		personal	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	•	Yes	No
35	Was the vehice	ole used prima owner or related													·	
36	Is another vehic	cle available for	personal													
		Section C-0		for Emp	lovers	Who	Provide	e Vehic	les for	Use b	y Their	Empl	oyees	•		
	wer these quest e than 5% own	tions to determ	ine if you r	neet an e	exception	on to	comple	ting Se	ction B	for ve	hicles us	sed by	emplo	yees v	vho ar	e not
37	Do you mainta your employe	ain a written po	licy statem	nent that	prohibi	its all p	person	al use c	of vehic	les, inc	cluding o	commi	uting, l	ЭУ	Yes	No
38		ain a written po														
39 40		all use of vehicle de more than fir						 nforma	 tion fro	 m you	 r employ	 ⁄ees a	 bout tl	he		
	use of the veh	icles, and retai	in the infor	mation re	eceived	?								L		
41	Do you meet to Note: If your a	the requiremen answer to 37, 38	ts concern 3, 39, 40, or	ing quali 41 is "Ye	fied aut	tomob not cor	ile den nplete s	nonstra Section	tion use <i>B for th</i>	e? (See	e instruc red vehic	tions.) cles.			<u>-</u> -	
Pa	rt VI Amor	tization														
	(a) Description	of costs	Date am	b) ortization gins	Ar		c) ble amou	nt		(d) section	р	(e) ortization enod or rcentag	_ A	mortizat	(f) ion for th	ııs year
42	Amortization o	f costs that beg	ins durina v	our 2009	tax ve	ar (see	instruc	tions):								
					I											
	Amortization of		-	-		-						_	43			
44	Total. Add ar	mounts in colur	mn (f). See	the instr	uctions	for w	here to	report				. 1	44			

Community Bible School – 91-1275574 Form 990 Attachment for 2009 Page 1 of 2

Form 990 EZ Part I Page 1 Line 5 - Gain or Loss from sale of assets:

	<u>Price</u>	<u>Basis</u>	Gain (loss)
Miscellaneous Small Items	\$ 275.	\$ 0.	\$ 275.
Piano	\$ 400.	\$ 0.	\$ 400.
Dishwasher	\$ 800.	\$ 0.	\$ 800.
Freezer	\$ 800.	\$ 30.	\$ 400.
Keyboard/Case	<u>\$ 280.</u>	<u>\$ 0.</u>	<u>\$ 280.</u>
Totals	\$ 2555.	\$ 30.	\$ 2525.

Form 990 EZ Part I Page 1 Line 7 – Gain or Loss from sale of inventory:

Firewood	\$ 675.	\$ 0.	\$	675.
Vending - Cookbooks	\$ 355.	\$ 296.	\$	59.
Vending – Candy/Soda	<u>\$ 491.</u>	<u>\$ 286.</u>	<u>\$</u>	<u>205.</u>
Totals	\$ 1521.	\$ 582.	\$	939.

Form 990 EZ Part 1 Page 1 Line 16 Other Expenses

Casual Help	\$ 310.
Depreciation (See Form 4562)	\$ 10643.
Groceries – Conferences	\$ 9191.
Interest	\$ 331.
Insurance	\$ 2825.
Office Supplies	\$ 912.
Benevolence	\$ 7339.
Missions	\$ 14834.
Supplies	\$ 3041.
Repairs – Equipment	\$ 1026.
Licenses	\$ 256.
Taxes – Payoll	\$ 5174,
Telephone	\$ 2888.
Travel and Entertainment	\$ 791.
Vehicle Expense	<u>\$ 2525.</u>
Total Expenses	\$ 62086.

Community Bible School – 91-1275574 Form 990 Attachment for 2009 Page 2 of 2

Form 990 EZ Part IV List of Officers, Directors - Column E - Housing Allowance

For the convenience of Community Bible School Greg and Teresa Miller receive use of the personal residence located on the property leased by Community Bible School. This property is where we hold our overnight Bible conferences and retreats as well as our church services. The appraised fair rental value of the housing is \$1400.00 per month. Water, sewer, and garbage is provided, all other utilities they pay.

Gregory S. Miller and Teresa A. Miller are husband and wife and lease to Community Bible School the facilities that Community Bible School uses for their Bible conferences, retreats, and church services. This property is 45 acres which include two conference buildings, two residences, two one bedroom apartments, shop building and lake property. The facilities are able to accommodate 60 people overnight with dining and kitchen facilities. The lease in 2009 was \$4000.00 per month plus property taxes, insurance, and repairs.