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Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

<u>A F</u>	or the	2009 calendar year, or tax year beginning AUG 1, 2009 and ending	<u>JUL 31, 2010</u>	
Bc	heck if	Please use IRS C Name of organization	D Employer identifi	cation number
	Addres	ss label or PUBLIC SCHOOL BIBLE STUDY COMMITTEE		
	Name change	Doing Business As		523361
L	return	See Specific Number and street (or P.O box if mail is not delivered to street address) Room/st		
	Termin ated	Instruc- P.O. BOX 4228	423-	648-0500
┕	Ameno	City or town, state or country, and 21P + 4	G Gross receipts \$	1,278,719.
L,	Application .	CHATTANOOGA, IN 37405	H(a) Is this a group re	
	pendin	F Name and address of principal officer RALPH W. MOHNEY, JR.	for affiliates?	Yes X No
		535 CHESTNUT STREET, SUITE 209, CHATTANOOG.	$\mathbf{A}_{\boldsymbol{\mu}}$ H(b) Are all affiliates inc	luded? Yes No
<u> T</u>	ax-exe	empt status X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527	If "No," attach a	list (see instructions)
JV	Vebsit	e: ▶ WWW.BIBLEINTHESCHOOLS.COM	H(c) Group exemptio	n number 🕨
KF	orm of	organization Corporation Trust X Association Other ▶ L Y	ear of formation 1956 N	A State of legal domicile TN
Pa	ırt I	Summary		
0	1	Briefly describe the organization's mission or most significant activities PROVIDE	BIBLE HISTORY	EDUCATION
2016tivities & Governance		TO PUBLIC SCHOOLS		
r.	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of m	nore than 25% of its net as	ssets
٥ ٥	3	Number of voting members of the governing body (Part VI, line 1a)	3	26
Ű	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	26
Se	5	Total number of employees (Part V, line 2a)	5	3
¥.	6	Total number of volunteers (estimate if necessary)	6	0
ڠ	7a -	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
<u> </u>	ь	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
			Prior Year	Current Year
BEVEN 3	8	Contributions and grants (Part VIII, line 1h)	1,212,456.	1,267,278.
3	9	Program service revenue (Part VIII, line 2g)		
لق	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	18,471.	11,441.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
Expense ANNED	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,230,927.	1,278,719.
Ž	13	Grants and similar amounts paid (Part IX, column (A) lines 1-3)		
3	14	Benefits paid to or for members (Part IX, column (A), line 4)		
(2)	15	Salaries other compensation, employee benefits (Part IX, column (A), lines 5-10)	177,287.	163,371.
<u>@</u> 2	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
xpe	b.	Total fundraising expenses (Part IX, column (D) line 25) 77,431.		
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11(241)	979,175.	<u>751,386.</u>
	18	Total expenses Add lines 13 17 (must equal Part IX, column (A), line 25)	1,156,462.	914,757.
	19	Hevenue less expenses Subtract line 18 from line 12 []	74,465.	363,962.
20.0		첫 DEC 0 6 2010 이	Beginning of Current Year	End of Year
set	20	Total assets (Part X, line 16)	1,532,166.	<u>1,656,483.</u>
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26) Not assets or fined balances, Subtract line 21 from line 20 OGDEN, UT	916,114.	676,469.
		Net assets of furio balances. Subtract line 21 from line 200	616,052.	980,014.
Pa	ırt II	Signature Block		
		Under penalties of perjury 1 declare that I have examined this return, including accompanying schedules and statement and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowled dge	ge and belief, it is true, correct,
		$\bigcap_{i=1}^{n} A_i A_i A_i A_i A_i A_i A_i$		
Sıgı	ו	1 Clot W Mohney of	Date	110
Her	е	Signature of officer	Date	
		RALPH W. MOHNEY, JR., PRESIDENT Type or print name and title		
		Data (Check if Prepar	er's identifying number
Paid		richalei's	self- (see in:	structions)
Prep	arer's	signature Taul Sunsh VIII DUEY C TO TOUT DIC	employed >	P00932002
Use	Only	yours if JOHYSON, MORPHEL & WRIGHT, P.C.	EIN ► 62-	1093134
		self-employed), address, and SYNTERN SOCIAL TRANSPORTERS	D	400\7EC 1170
		ZIP+4 CHATTANOGA, TN 37405	Phone no ► (423)756-1170 X Yes No
		RS discuss this return with the preparer shown above? (see instructions)		
9320	01 02-0	4-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate	instructions.	Form 990 (2009)

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

orm	990 (2009)	PUBLIC SCH	HOOL BIBI	LE STUDY	COMMITTI	EE	62-052	3361	Page 2
Par	t III Statement of P	rogram Service	Accomplis	hments					
1	Briefly describe the organi	ization's mission	SEE SCHI	EDULE O	FOR CONT	INUATION			
•	TO ENRICH THE		ERATION V	VITH THE	WISDOM A	AND KNOWLE	EDGE OF	THE	
	BIBLE BY DEVE					FINANCIAL			OR
	ELECTIVE, FOR								
	TEXT, TAUGHT	IN A CONTR	COLUED CI	TRRICIII	A BA LLB 7	INED AND	<u>בבבבב ב</u> ודקדייאמי	RID	
2	Did the organization under		program service	es during the ye	ai wilich were n	ot listed on			X No
	the prior Form 990 or 990-		_					res	LALI NO
	If "Yes," describe these ne					_		<u> </u>	[••]
3	Did the organization cease	*	=	nanges in how it	conducts, any p	program services?		L Yes	X No
	If "Yes," describe these ch	hanges on Schedule	9 O						
4	Describe the exempt purp	ose achievements f	or each of the o	rganization's thi	ree largest progr	am services by exp	oenses		
	Section 501(c)(3) and 501	(c)(4) organizations	and section 494	7(a)(1) trusts are	e required to rep	ort the amount of	grants and		
	allocations to others, the t	total expenses, and	revenue, if any,	for each progra	m service report	ed			
4a	(Code) (Expenses \$	698.857	 including grar 	nts of \$) (Re	evenue \$)
	REIMBURSEMENT							COUN	TY
	SCHOOL SYSTEM	FOR TEACE	ITNG BTRI	TE HISTO	RY CLASS	ES IN THE	PUBLIC	SCHO	OL
		I FOR TEACT	ITMG DIDI	JE HIJIO.	KI CUADO.	BD 114 11111	TODLIC	DCIIO	<u> </u>
	SYSTEM.								
		_							
							-	•	
4b	(Code) (Expenses \$		including gran	nts of \$) (Be	evenue \$		
4 D	(Code) (Expenses a		including grai	π3 01 Φ	<i>)</i> (1 id	Sveride w		,
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			w-z-						
40	(Code) (Expenses \$		including grai	nts of \$	\/Re	evenue \$		
4c	(Code) (Expenses a		including grai	π3 01 ψ	/ (i i	evende ¢		,
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							·	_	
									
									
	Otto	(D	15 O)						
4d	Other program services (\	•	`		
	(Expenses \$		g grants of \$	057) (Revenue	<u> </u>]		
<u>4e</u>	Total program service ex	xpenses ► \$	698,	05/.					00 (00 = = =
03300	2							⊦orm 9	90 (2009)

			Yes	No
1 '	s the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		!	
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			•
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	X	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	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			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			ĺ
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		ļ	
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15 000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Form	990 (2009)

		Form		2009)
	Note. All Form 990 filers are required to complete Schedule O	38	х	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-		
	If "Yes," complete Schedule R, Part V, line 2	36		_X_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
34	Was the organization related to any tax-exempt or taxable entity?			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u> X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	Schedule N, Part II	32		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	If "Yes," complete Schedule N, Part I	31		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	contributions? If "Yes," complete Schedule M	30		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
С				_
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	instructions for applicable filing thresholds, conditions, and exceptions)			
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	Schedule L, Part III	27		X
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	;		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	Schedule L, Part I	25b		X
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
b				
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>X</u> _
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05		v
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	any tax-exempt bonds? Did the exemptation act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c		-
С	, , , ,	04=		
b		24b		
_				
	Schedule K. If "No", go to line 25	24a		Х
Z7d	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	Schedule J	23		x
دع	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	- 22		Λ
22	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 2? If "Yes," complete Schedule I, Parts I and III	22		X
~~	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
.	* Did the average to a second areas there of 000 of average and other accordance to a second and average the second		Yes	No

r a	T V Statements Regarding Other IRS Filings and Tax Compliance		Yes	No
12	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	Γ	162	NO
14	U.S. Information Returns Enter -0- if not applicable			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	3	l	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4		
·	(gambling) winnings to prize winners?	1c		_
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
		3		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			Ĭ
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and			1
	Financial Accounts	1		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			l
	Tax Shelter Transaction?	5c		
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		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			ĺ
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			l
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			l
	provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		
	to file Form 8282?	7c_		X
	If "Yes," indicate the number of Forms 8282 filed during the year	1		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	_		37
	benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
-	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7g 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	10	 	
-	supporting organizations maintaining donor advised funds and section sos(a)(s) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.	-		
a	Did the organization make any taxable distributions under section 4966?	9a		X
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)]		
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

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				r	
		1	Į	م دا	Yes	No
1a	Enter the number of voting members of the governing body	1a	-	26		
þ	Enter the number of voting members that are independent	_1b	<u> </u>	_26		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other.	-	-	
	officer, director, trustee, or key employee?			2	-	X
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision		1	7.5
	of officers, directors or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo		0 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's asser	ts?		5		X
6	Does the organization have members or stockholders?		4.1	6_		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the	_		77
	governing body?	_		7a		X
	Are any decisions of the governing body subject to approval by members, stockholders, or other per			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during	the year			
	by the following					
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	<u> </u>	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code.)	·		
				<u> </u>	Yes	No
	Does the organization have local chapters, branches, or affiliates?			10a		_X
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chapt	ers, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	-1 .1		10b	32	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	iling th	e form?	11	X	
11A					3,5	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
ь	Are officers, directors or trustees, and key employees required to disclose annually interests that cout to conflicts?	uld giv	e rise	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,"	describe		:	
	ın Schedule O how this is done			12c	X	
13	Does the organization have a written whistleblower policy?			13	X	
14	Does the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approve		ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	X	
þ	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			
	taxable entity during the year?			16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-			1		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	anızat	on's			
	exempt status with respect to such arrangements?			. 16b	l	
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed TN	F /F :	140)			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1	(501)	c)(ප)s only) ava	ulable for		
	public inspection. Indicate how you make these available. Check all that apply Own website. X Another's website. X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflict	of interest pol	icy, and fina	ıncıal	
	statements available to the public					
20	State the name, physical address, and telephone number of the person who possesses the books a MARY JANE MCBRIDE - 423-648-0500	nd rec	ords of the org	anization 🕨		
		740	2			
				Form	990 (2009

932006 02-04-10

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization'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 employee."
- 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) Name and Title	(B) Average		(C) Position					(D) Reportable	(E) Reportable	(F) Estimated
	hours per	⊢ <u>`</u>	(check all that apply)			app	oly)	compensation from	compensation from related	amount of other
	week	ndividual trustee or director	Individual itristee or unrest institutional trustee Officer (Wey employee Employee Enmer Former		the organization	organizations (W-2/1099-MISC)	compensation from the			
		ustee o	Institutional trustee		æ	Bsuadu		(W-2/1099-MISC)	(** 2) 1000 111100)	organization
		dual tr	utional		Key employee	est con				and related
		Apu	thstr	Officer	Key e	High	Former			organizations
JERRY V. ADAMS										
BOARD MEMBER	1.00	X						0.	0.	0.
LAWRENCE B. AUSTIN III							1			
BOARD MEMBER	1.00	X					L	0.	0.	0.
HARRIET W. BOND									_	
BOARD MEMBER	1.00	X	<u> </u>			_	1	0.	0.	0.
FRANK A. BROCK										
BOARD CHAIRMAN	1.00	X		X		_	_	0.	0.	0.
MARK A. CALDWELL	1 00	l								
BOARD MEMBER	1.00	X	ļ	_		<u> </u>		0.	0.	0.
MARY COLEMAN	1 00	3,7		٦,					0	0
SECRETARY	1.00	A	-	X		-	\vdash	0.	0.	0.
RONALD M. EYTCHISON	1 00	v						0.	0.	0.
BOARD MEMBER JOHN E. HENEGAR	1.00	<u> </u>	-	-		\vdash	\vdash	0.	<u> </u>	<u> </u>
BOARD MEMBER	1.00	v						0.	0.	0.
HENRY A. HENEGAR	1.00	A.		-			H	0.		
BOARD MEMBER	1.00	x						0.	0.	0.
THOMAS H. MCCALLIE III	1.00	1	1	 	-				-	
BOARD MEMBER	1.00	x						0.	0.	0.
RALPH W. MOHNEY JR.			Ì							-
PRESIDENT	40.00	X		X				54,600.	0.	15,400.
MADELENE MILLER										
BOARD MEMBER	1.00	X						0.	0.	0.
TERESA NORTH										
BOARD MEMBER	1.00	X				<u> </u>	<u> </u>	0.	0.	0.
DR. W. GARY PHILLIPS										
BOARD VICE CHAIRMAN	1.00	X	ļ	X				0.	0.	0.
JASPER A. REYNOLDS III						ŀ			_	_
BOARD MEMBER	1.00	X	<u> </u>	ļ	_			0.	0.	0.
BECKY SCEARCE										
BOARD MEMBER	1.00	X	 	ـ	<u> </u>	1	-	0.	0.	0.
ELEONORE H. WILLIAMS	1 00							_		_
BOARD MEMBER	1.00	<u>į X</u>	L	L	L		<u> </u>	0.	0.	0 . Form 990 (2009)

932007 02-04-10

Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, a	nd l	łigh	est	Compensated Employe	ees (continued)			
(A)				C)			(D)	(E)		(F)		
Name and title	(B) Average			Posi	-	1		Reportable	Reportable		Estimate	ed
	hours	(cl	neck	all t	that	арр	ly)	compensation	compensation		amount	of
	per	- i						from	from related		other	
	week	Hect				_		the	organizations	C	ompensa	ition
		60.0	E			ž.		organization	(W-2/1099-MISC)		from th	е
		ruste	E		99	nper		(W-2/1099-MISC)		1	organizat	
<u>-</u>		lal	i iii		oldu	S es	_	[i	and relat	
		Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			9	organizati	ons
TERRET III III III III III III III III III I		-								┿		
JEFFREY T. WILSON	1 00							_	^			^
BOARD MEMBER	1.00	X				-		0.	0.	╨		0.
BRENDA WRIGHT									•			_
BOARD MEMBER	1.00	X						0.	0,	4	_	0.
JOHN C. DEMOSS	•											
BOARD MEMBER	1.00	X						0.	0.	<u>.</u>		0.
STEVEN L. FROST												
TREASURER	1.00	X		X				0.	0.	.		0.
DONALD E. MORTON												
BOARD MEMBER	1.00	Y						0.	0.			_0.
REV. GERALD O'GUINN	1.00	22			-	 		<u> </u>	·-····································	+		
	1 00	77						0.	0.			^
BOARD MEMBER	1.00	Α.				├	_	0.		₩		0.
DR. BILL STACY									•			•
BOARD MEMBER	1.00	X				<u> </u>		0.	0.	<u></u>		0.
THOMAS A.H. WHITE												
BOARD MEMBER	1.00	X				L	L	0.	0.	<u>↓</u>		0.
WILLIAM WILDER, JR.												
BOARD MEMBER	1.00	X				ļ		0.1	0.	,		0.
DOUGLAS K. STROMBERG												
VP STRATEGIC INITIATIVES	30.00	i		X		İ		27,688.	0.		6,4	98.
1b Total	L	'				—		82,288.	0,		21,8	
2 Total number of individuals (including but n	ot limited to th	200	lieto	d al	2016	2) 14/					,	
compensation from the organization	or minica to ti	.000		.	5011	٠, ٠٠٠			,coo iii ropoitabio			0
Compensation from the organization									· · · · · · · · · · · · · · · · · · ·		Yes	No
O Didate a constant test and a second	-l k - u - u k - u	_4	1		!				anlavas an	Г	1.00	
3 Did the organization list any former officer,			, key	/ em	ibio;	yee,	OI I	iignesi compensated en	ipioyee on	Ι.	<u>, </u>	v
line 1a? If "Yes," complete Schedule J for s										F	3	<u>X</u>
4 For any individual listed on line 1a, is the su									ne organization			
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	or such individual		<u> </u>	4	X
5 Did any person listed on line 1a receive or a	ccrue compe	nsat	on f	rom	any	unr	elat	ed organization for servi	ces rendered to			
the organization? If "Yes," complete Sched	ule J for such_	pers	on							<u>اـــا</u>	5	<u>X</u>
Section B. Independent Contractors											 .	
1 Complete this table for your five highest co	mpensated in	depe	ende	nt c	ontr	racto	ors t	hat received more than	\$100,000 of compen	satio	on from	
the organization NONE												
(A)				-				(B)			(C)	
Name and business	address							Description of s	ervices	Com	npensatio	n
							l					
	 						\dashv					
								• •				
							J		İ			
2 Total number of independent contractors (i		ot li	mite	d to		_	sted	I above) who received m	ore than			
\$100,000 in compensation from the organic	ration 🕨				- (n .			1			

			2009) PUBL]		<u>, BIBLE S</u>	TUDY COMMI	TTEE	<u>62-0523</u>	361 Page 9
Pa	rt \	/IK	Statement of Reve	nue					
	•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
t st	1	а	Federated campaigns	1a					
or Ja		b	Membership dues	1b		j			-
an, c		С	Fundraising events	1c					
gif ar		ď	Related organizations	1d					
E,E		е	Government grants (contribut	tions) 1e					
흥기		f	All other contributions, gifts, gran	1 1					
들			similar amounts not included abo	we 111	<u> 267,278.</u>				
Contributions, gifts, grants and other similar amounts		g	Noncash contributions included in lines	s 1a-1f \$					
OB		h	Total. Add lines 1a-1f		T	1,267,278.			
İ					Business Code				
ice	2	а							
e e		b							
n S		С				<u></u>			
Program Service Revenue		d			-		-		
) Lo		e	All all and an annual and an annual and an annual and an annual and an annual and an annual and an an annual and an an annual and an an annual and an an annual and an an an an an an an an an an an an an						
_			All other program service reve	enue					
$\overline{}$	3		Total. Add lines 2a-2f Investment income (including	dividends intere					
	•		other similar amounts)	dividends, inter	>50, and	11,441.			11,441.
	4		Income from investment of ta	x-exempt bond r	proceeds				
	5		Royalties		•				
			.,	(ı) Real	(II) Personal				
	6	а	Gross Rents						
		b	Less rental expenses						
		С	Rental income or (loss)						
		d	Net rental income or (loss)	-	<u> </u>				
	7	а	Gross amount from sales of	(i) Securities	(II) Other				
İ			assets other than inventory						
		b	Less cost or other basis	·					
			and sales expenses				ļ		
			Gain or (loss)		1				
			Net gain or (loss)		<u> </u>				
e l	8	а	Gross income from fundraisin						
Ne			including \$		Ì		ļ į		
Other Revenue			contributions reported on line						
þer		_	Part IV, line 18 Less direct expenses	a b					
ō			Net income or (loss) from fund	_	D	1			
	۵		Gross income from gaming a	=					
	J	_	Part IV, line 19	a a	1				
		ь	Less direct expenses	b					
			Net income or (loss) from gan						
- 1	10		Gross sales of inventory, less	=					
- 1			and allowances	а					
		b	Less cost of goods sold	b					
-		С	Net income or (loss) from sale	es of inventory	▶				
ļ		_	Miscellaneous Revenu	je	Business Code			ĺ	
	11								
		þ							
		C	All other revenue						
İ			All other revenue Total, Add lines 11a-11d						····
	12		Total revenue See instructions.			1,278,719.	0.	0.	11,441.
93200	8		TOTAL 19701190 OOO MON BORIONS.			<u>,-,-:-,</u>	·		Form 990 (2009)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must compl		not required to comple	ete columns (B), (C), and (C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
· 2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				_
5	Compensation of current officers, directors,				
	trustees, and key employees	104,186.	12,502.	58,344.	33,340.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	34,134.	3,848.	19,520.	10,766.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	14,469.	1,400.	9,845.	3,224.
10	Payroll taxes	10,582.	1,276.	5,932.	3,374.
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	5,900.		5,900.	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	2,083.		2,083.	
12	Advertising and promotion				
13	Office expenses	26,862.		23,029.	3,833.
14	Information technology				
15	Royalties	· · · · · · · · · · · · · · · · · · ·			
16	Occupancy				
17	Travel	1,129.		1,030.	99.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,921.		1,921.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,742.		2,742.	
23	Insurance	3,987.		3,987.	
24	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)				
а	EDUCATIONAL SERVICES	676,468.	676,468.		
b	COMMUNITY INITIATIVES	19,960.			19,960.
С	MISCELLANEOUS	7,892.	921.	4,136.	2,835.
d	CLASSROOM MATERIALS	2,442.	2,442.		
е					
	All other expenses				
25	Total functional expenses Add lines 1 through 24f	914,757.	698,857.	138,469.	77,431.
26	Joint costs Check here ▶ ☐ If following				•
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
					Farm 000 (2000)

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Pa	rt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	90.
	2	Savings and temporary cash investments		1,198,917.	2	1,148,868.
	3	Pledges and grants receivable, net		326,575.	3	503,593.
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trust	ees, key			-
		employees, and highest compensated employees. Complete	Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under	er section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B) C	omplete			
		Part II of Schedule L.		T-117-4-1-	6	
ţ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D 10a	13,701.			
	b	Less accumulated depreciation ' 10b	9,769.	6,674.	10c	3,932.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities See Part IV, line 11			12	
	13	Investments · program-related See Part IV, line 11			13	
	14	Intangible assets	<u> </u>		14	
	15	Other assets See Part IV, line 11	į	· · · ·	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		1,532,166.	16	1,656,483.
	17	Accounts payable and accrued expenses		916,114.	17	676,469.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability Complete Part IV of Sch	nedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees,	ey employees,			
iab		highest compensated employees, and disqualified persons	Complete Part II			
		of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third par	ties		23	
	24	Unsecured notes and loans payable to unrelated third partie	s į		24	
	25	Other liabilities Complete Part X of Schedule D	ļ		25	
	26	Total liabilities. Add lines 17 through 25	1	916,114.	26	676,469.
		Organizations that follow SFAS 117, check here	and complete			
es		lines 27 through 29, and lines 33 and 34.		40.000		0.4.5 0.7.0
anc	27	Unrestricted net assets	-	48,279.	27	246,270.
Baj	28	Temporarily restricted net assets	-	<u>563,273.</u>	28	729,244.
5	29	Permanently restricted net assets	<u>-</u>	4,500.	29	4,500.
교		Organizations that do not follow SFAS 117, check here	and and			
ŏ		complete lines 30 through 34.				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	ļ		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fun-			31	
et,	32	Retained earnings, endowment, accumulated income, or oth	er funds		32	
~	33	Total net assets or fund balances	-	616,052.	33	980,014.
	34	Total liabilities and net assets/fund balances		1,532,166.	34	1,656,483.

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Employer identification number

			SCHOOL BIBLE						62	2-0523361
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st comple	te this par	t) See inst	tructions		
Part I The organ 1	ization is not a A church, co A school des A hospital or A medical receity, and stat An organizat section 170 A federal, sta An organizat section 170(A community An organizat activities rela income and of See section An organizat An organizat more publichy describes the a Type By checking foundation in If the organizat	for Public Char a private foundation invention of churches cribed in section 17 a cooperative hospi search organization of the ion operated for the ion operated for the ion operated for the ion operated for the ion operated for the ion operated for the ion operated for the ion operated for the ion operated for the ion operated for the ion that normally rec ion that normally rec inted to its exempt fur unrelated business to ion organized and op io	because it is (For lines is, or association of chur object) (A)(ii). (Attach Sotal service organization object) of a college or under Part II.) ent or governmental universe a substantial part ite Part II.) election 170(b)(1)(A)(vi). eleves (1) more than 33 inctions subject to certal axable income (less sections) and experimental universe expert III.) perated exclusively to temperated exclusively to temperated exclusively for the part III. perated exclusively for the pe	ations must be a controlled by supporte	st completed in section pital description or from a support from suppo	te this part only one bection 170(b)(1)(aribed in secondarited by on 170(b)(1)(aribed in secondarited by on 170(b)(1)(aribed in 170(b)(1)(aribed in 170(b)(1)(aribed in 170(b)(1)(aribed in 110(b)(1)(aribed i	(A)(iii). (A)(ii	mental union from the nembershing of its y the organication 509(i). Enter the described general properties of the properties of th	he hospital's name, ed in bublic described in d gross receipts from from gross investment after June 30, 1975 purposes of one or eck the box that Type III - Other persons other than
	foundation m If the organiz supporting o Since Augus (i) A perso the gove (ii) A family	nanagers and other to ration received a writt rganization, check that the 17, 2006, has the count who directly or ind erning body of the sign of the s	han one or more publicly ten determination from the his box organization accepted an irectly controls, either all supported organization? In described in (i) above?	y supporte the IRS tha ny gift or co lone or tog	d organiza at it is a Ty ontribution ether with	ations desc pe I, Type a from any	onbed in s II, or Type of the folk	ection 509 e III owing pers	9(a)(1) or s	Yes No 11g(i) 11g(ii)
h	• •	•	person described in (i) a about the supported on							[11g(iii)]
	of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	in col. (i) lis governing (document?	organizat (i) of your	ion in col support?	(vi) Is organizatio (i) organiz U.S	on in col. ed in the	(vii) Amount of support
			(see instructions))	Yes	No	Yes	No	Yes	No	
Total LHA For F	Privacy Act ar	nd Paperwork Redu	ction Act Notice, see t	he Instruc	tions for			Schedul	e A (Forn	n 990 or 990-EZ) 2009

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Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009 PUBLIC SCHOOL BIBLE STUDY COMMITTEE 62-0523361 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received (Do not 1200800. 1330664. 1214587. 1212456. 1267278. 6225785. include any "unusual grants") 2 Tax revenues levied for the organ ization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 1200800. 1330664. 1214587. 1212456. 1267278. 4 Total, Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, 329,707. column (f) 5896078. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (f) Total Calendar year (or fiscal year beginning in) (b) 2006 (c) 2007 (d) 2008 (e) 2009 (a) 20051214587. 1212456. 1267278. 6225785. 1200800 1330664. 7 Amounts from line 4 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties 18,471 60,752. 9,396. 19,520. 11,441 1,924 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) 6286537. 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 93.79 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2009

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009						Page 3
Part III Support Schedule fo	or Organizations	Described in	Section 509(a)(2) (Complete only	If you checked the bo	ox on line 9 of Part I
Section A. Public Support				<u> </u>	<u></u>	r
Calendar 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 no	pt					
include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		-	-			
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit the organization without charge	to					
•						
6 Total. Add lines 1 through 5				 		
7a Amounts included on lines 1, 2, ar	ŧ					
3 received from disqualified perso	ns				- 	
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 amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
ection B. Total Support						<u> </u>
alendar year (or fiscal year beginning in) (a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
Oa Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from business acquired after June 30, 1975	ses					
c Add lines 10a and 10b						
1 Net income from unrelated busine activities not included in line 10b, whether or not the business is regularly carried on	ess					
2 Other income Do not include gain or loss from the sale of capital	1					
assets (Explain in Part IV) 3 Total support (Add lines 9, 10c, 11 and 12	.,					
4 First five years. If the Form 990 is		s first second the	rd fourth or fifth t	ax vear as a section	on 501(c)(3) organiz	ation
check this box and stop here	, i.e. the organization	o mot, doodiid, tiil	a, rourar, or mar t	w. your as a souli	s so itoloj organiz	
ection C. Computation of Pu	ıblic Support Pe	ercentage				
5 Public support percentage for 200		*	column (fl)		15	
			Column (i))		15	
6 Public support percentage from 2 Section D. Computation of In					16	ç
					47	
7 Investment income percentage for			rie 13, column (f))		17	
18 Investment income percentage from	om ∠υυ δ Scriedule A,	ran in, line 17			18	9

20 Private foundation. If the organization did not check a box on line 14 19a or 19b check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Schedule D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Name of the organization

PUBLIC SCHOOL BIBLE STUDY COMMITTEE

Employer identification number 62-0523361

Pai	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
	-	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
•	are the organization's property, subject to the organization's	exclusive legal control?	└ Yes
6	Did the organization inform all grantees, donors, and donor a	idvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No_
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or p		storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
a	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements	and the second of the second	2b
C	Number of conservation easements on a certified historic str		2c 2d
ď	Number of conservation easements included in (c) acquired a Number of conservation easements modified, transferred, re		
3		leased, extinguished, or terminated by th	e organization during the tax
4	year ▶ Number of states where property subject to conservation ea	sament is located	
4 5	Does the organization have a written policy regarding the pel		
3	violations, and enforcement of the conservation easements r	- · · · · · · · · · · · · · · · · · · ·	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		_
8	Does each conservation easement reported on line 2(d) above		•
•	and section 170(h)(4)(B)(ii)?	,	Yes No
9	In Part XIV, describe how the organization reports conservati	on easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the organization's accounting for
	conservation easements		
Pai	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and t	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these		
þ	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, of	or research in furtherance of public servic	e, provide the following amounts relating to
	these items		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		al gain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items	. .
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		> \$

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051

Schedule D (Form 990) 2009

Sche	dule D (Form 990) 2009 PUBLIC	SCHOOL BIB	LE STUDY C	COMMITTE	<u>EE</u>	62-0	523361	L Page	<u>2</u>
Par						Similar Ass	sets (conti	nued)	_
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that	t are a sigr	nificant use of	ts collection	ı ıtems	
•	(check all that apply)								
а	Public exhibition	d	Loan or exc	change progra	ms				
b	Scholarly research	е	Other						_
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	n how they further t	the organization	on's exemp	ot purpose in.F	Part XIV		
5	During the year, did the organization solicit o	r receive donations o	of art, historical trea	asures, or othe	er sımilar a	ssets			
	to be sold to raise funds rather than to be ma						Yes	No	_
Par	t IV Escrow and Custodial Arran	•	te if organization a	nswered "Yes	" to Form	990, Part IV, III	ne 9, or		
	reported an amount on Form 990, Par								_
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for contribution	ns or other as:	sets not in	cluded		r	
	on Form 990, Part X?					Į.	Yes	L No	
b	b If "Yes," explain the arrangement in Part XIV and complete the following table								_
							Amount		_
c	Beginning balance					1c			_
d	Additions during the year		•			1d			_
е	Distributions during the year					1e			_
f								_	
2a									
	b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds Complete 4 the exposuration engaged "Yes," to Form 900, Part IV, line 10								
Par	Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back								
	}	(a) Current year	(b) Prior year	(c) Two year	s dack (d) Three years ba	ck (e) Four	years back	-
1a	Beginning of year balance	567,773.	399,434.						_
b	Contributions	164,500.	26,575.						_
С	127 150							-	
d	Grants or scholarships		13/,150.	-					-
е	Other expenditures for facilities								
	and programs	426.		+					-
Ť	Administrative expenses		E67 773	+					-
9							-		
2	Board designated or quasi-endowment	70.34	s %						
a	Permanent endowment • . 61	<u> </u>							
0		⁷⁰							
C	Are there endowment funds not in the posse	· -	ation that are held a	and administe	red for the	organization			
3a	by	.33.011 Of the organize	tion that are now t	2110 001111111010	.00 101 1110	o.gaza.io		Yes No	-
	(i) unrelated organizations						3a(i)	X	-
	(ii) related organizations						3a(ii)	X	-
ь	If "Yes" to 3a(II), are the related organizations	s listed as required o	n Schedule R?				3b		-
4	Describe in Part XIV the intended uses of the								-
Par), Part X, line	10				_
	Description of investment	(a) Cost or o	ther (b) Cos	t or other	(c) Acc	umulated	(d) Bool	k value	-
		basis (investri		(other)	depre	eciation			
1a	Land								_
ь	Buildings							0	_
C	Leasehold improvements							0	<u>.</u>
d	Equipment		1	L3,701.		9,769.		3,932	<u>.</u>
е	Other							0	_
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line	10(c).)		.		3,932	

Schedule D (Form 990) 2009

20

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for

uncertain tax positions under FIN 48

	dule D (Form 990) 2009 PUBLIC SCHOOL BIBLE STUDY COMMI			0523361	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Audite	d Financial Stat	ement		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		1,278,	<u>719.</u>
2	`Total expenses (Form 990, Part IX, column (A), line 25)	2		914,	757.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3		<u>36</u> 3,	962.
4	Net unrealized gains (losses) on investments	4			
5	Donated services and use of facilities	5			
6	Investment expenses	6			•
Ź	Prior period adjustments	7			
8	Other (Describe in Part XIV)	8		•	
9	Total adjustments (net) Add lines 4 through 8	9			0.
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		363	962.
10 Par	t XII Reconciliation of Revenue per Audited Financial Statements Wit		Return		202.
1	Total revenue, gains, and other support per audited financial statements		1	1,278,	719.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12			<u> </u>	7230
2					
a			1 1		
b	Donated services and use of facilities 2b	-	- i		
С	Recoveries of prior year grants 2c		-		
d	Other (Describe in Part XIV)		-		^
е	Add lines 2a through 2d		2e		0.
3	Subtract line 2e from line 1		3	1,278,	719.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b		4 1		
b	Other (Describe in Part XIV)				
С	Add lines 4a and 4b		4c		0.
_ 5	Total revenue Add lines 3 and 4c. (This must equal Form 990 Part I, line 12)		5		719.
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements Wi	th Expenses pe	r Retu		
1	Total expenses and losses per audited financial statements		1	914,	757.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities 2a				
b	Prior year adjustments 2b		7		
c	Other losses 2c		7		
d	Other (Describe in Part XIV)				
e	Add lines 2a through 2d		2e		0.
3	Subtract line 2e from line 1		3	914	757.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				, , , ,
-					
а			-		
	Other (Describe in Part XIV)		┥,		0
	Add lines 4a and 4b		4c	014	0. 757.
<u>5</u>	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) It XIV Supplemental Information		5	914,	151.
		and A. Dard N. Lance	41	Nh. Dard V. Iva	4. D- d
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a				4, Pan
	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this p				
PAI	RT V, LINE 4: THE TERM ENDOWMENT ACTIVITY IN TH	E AMOUNT OF	F \$∠.	13,149	
	T TOWN DITCHE OF THE PROPERTY	mun "nathi	- MO	7T TTD 13 11	
WA:	S ESTABLISHED FROM A CHARITABLE BEQUEST TO FUND	THE BAIR	D MCC	CLURE.	
	ACUED ON AN ANDUAL DAGTO OMUED MEMOCRADILY DE	CMDIOMED E		OT A CCTT	ממזי
T.E.	ACHER ON AN ANNUAL BASIS. OTHER TEMPORARILY RE	STRICTED FO	פתמנ	CLASSII	עביר.
D37	MAIN DOADD ARE BOD NEW DIEDOEG DEGETIADIE BOD	¢502 505 31		י משמ שני	A ATTE
BI	THE BOARD ARE FOR NET PLEDGES RECEIVABLE FOR	\$503,595 AI	ND TI	ie ked i	MINK
	AGUER BURRO ALO ELO				
TEA	ACHER FUNDS FOR \$12,500.				
			Sched	ule D (Form 9	90) 2009

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions

PUBLIC SCHOOL BIBLE STUDY COMMITTEE
Part I Questions Regarding Compensation

Employer identification number 62-0523361

<u> </u>	active decisions regarding compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,	ĺ		
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
_	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a	i	<u>X</u>
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X X X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	ŀ		
	contingent on the revenues of			
а	The organization?	5a		X
b	Any related organization?	5b		<u>X</u>
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а	The organization?	6a		Х
b	Any related organization?	6b		<u>X</u>
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISG compensation	3C compensation	0	6	Œ	(E)
					Retirement and	Nontaxable	Total of columns	Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(B)(I)-(D)	reported in prior Form 990 or Form 990-EZ
	Ξ	54,600.	0.	0	15,400.	0	70,000.	70,000.
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Schedule J (Form 990) 2009

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

PUBLIC SCHOOL BIBLE STUDY COMMITTEE

Employer identification number 62-0523361

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
MIDDLE AND HIGH SCHOOL TEACHERS, EMPLOYED BY THE HAMILTON COUNTY
DEPARTMENT OF EDUCATION.
FORM 990, PART VI, SECTION B, LINE 11: IT IS THE PUBLIC SCHOOL BIBLE STUDY
COMMITTEE'S POLICY THAT THE TREASURER WILL REVIEW THE IRS FORM 990 PRIOR TO
ITS FILING AND MAKE COPIES AVAILABLE TO THE BOARD OF DIRECTORS FOR THEIR
REVIEW IN ADVANCE OF THE FILING WITH THE IRS. THE MEANS OF DELIVERY SHALL
BE BY HARD COPY OR EMAIL TO EACH DIRECTOR'S MAILING OR EMAIL ADDRESS.
FORM 990, PART VI, SECTION B, LINE 12C: THE PRESIDENT ENSURES THAT ALL
BOARD MEMBERS, OFFICERS, AGENTS, EMPLOYEES, AND INDEPENDENT CONTRACTORS OF
THE ORGANIZATION ARE MADE AWARE OF THE ORGANIZATION'S POLICY WITH RESPECT
TO CONFLICTS OF INTEREST.
FORM 990, PART VI, SECTION B, LINE 15: IN REVIEWING AND APPROVING
COMPENSATION OF ANY "COVERED INDIVIDUALS," THE PUBLIC SCHOOL BIBLE STUDY
COMMITTEE BOARD OF DIRECTORS, OR A DELEGATED COMMITTEE OF THE BOARD
(REFERRED TO AS THE "APPROVAL BOARD" BELOW), WILL UTILIZE THE FOLLOWING
PROCESS:
1. IMPARTIAL DECISION MAKERS. THE COMPENSATION ARRANGEMENT IS APPROVED IN
ADVANCE BY THE APPROVAL BODY COMPOSED ENTIRELY OF INDIVIDUALS WHO DO NOT
HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT.
2. COMPARABILITY DATA. WHEN THE APPROVAL BODY IS CONSIDERING COMPENSATION
TO COVERED INDIVIDUALS, IT RELIES ON COMPARABILITY DATA THAT DEMONSTRATE
THE FAIR MARKET VALUE OF THE COMPENSATION IN QUESTION.
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2009 832211 02-03-10

SCHEDULE O

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

PUBLIC SCHOOL BIBLE STUDY COMMITTEE

Employer identification number 62-0523361

3. CONCURRENT DOCUMENTATION. THE APPROVAL BODY DOCUMENTS HOW IT REACHED
ITS DECISIONS, INCLUDING THE DATA ON WHICH IT RELIED. TO QUALIFY AS
CONCURRENT DOCUMENTATION, WRITTEN OR ELECTRONIC RECORDS OF THE APPROVAL
BODY MUST NOTE:
A. THE TERMS OF THE COMPENSATION AND THE DATE IT WAS APPROVED.
B. THE MEMBERS OF THE APPROVAL BODY WHO WERE PRESENT AND THOSE WHO VOTED
ON IT.
C. THE COMPARABILITY DATA OBTAINED AND RELIED UPON AND HOW THE DATA WAS
OBTAINED.
D. ANY ACTIONS TAKEN WITH RESPECT TO CONSIDERATION OF THE COMPENSATION BY
ANYONE WHO IS OTHERWISE A MEMBER OF THE APPROVAL BODY BUT WHO HAD A
CONFLICT OF INTEREST WITH RESPECT TO THE DECISION ON THE COMPENSATION.
FORM 990, PART VI, SECTION C, LINE 19: IF THE GOVERNING DOCUMENTS AND
CONFLICT OF INTEREST POLICY OF THE PUBLIC SCHOOL BIBLE STUDY COMMITTEE ARE
SUBJECT TO THE FEDERAL PUBLIC DISCLOSURE RULES (OR STATE PUBLIC DISCLOSURE
RULES), THESE DOCUMENTS WILL BE MADE PUBLICLY AVAILABLE AS APPLICABLE LAW
MAY REQUIRE. OTHERWISE, THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST
POLICY WILL BE PROVIDED TO THE PUBLIC AT THE DISCRETION OF MANAGEMENT.
FORMS 990, PART XI, LINE 2C
THE PROCESS OF SELECTING AN INDEPENDENT AUDITOR AND OVERSEEING THE
AUDIT HAS NOT CHANGED FROM THE PRIOR YEAR.

Schedule O (Form 990) 2009

	10
	PAGE 10
	990
2009 DEPRECIATION AND AMORTIZATION REPORT	FORM 990

Current Year Deduction	2,742.		
Current Sec 179	0	-	
Accumulated Depreciation	7,027.		
Basis For Depreciation	13,701.		
Reduction In Basis	0		
Bus % Excl			
Unadjusted Cost Or Basis	13,701.		
No No	16		
Life	5.00		
Method	SI		
Date Acquired	, VARIESSL		
Description	FURNITURE, FIXTURES & OFFICE EQUIPMEN * TOTAL 990 PAGE 10 DEPR		
Asset No	1		

(D) - Asset disposed

*ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Department of the Treasury internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

➤ Attach to your tax return.

990

OMB No 1545-0172

Name(s) shown on return

▶ See separate instructions. Business or activity to which this form relates

Identifying number

	BLIC SCHOOL BIBLE S				PAGE 10		62-0523361
Pa				y iistea proper	ty, complete Pa		1
	Maximum amount See the instructions	•				1	250,000.
	otal cost of section 179 property plac	· ·	· ·			2	000 000
3 7	hreshold cost of section 179 property	before reduction	ın limitation			3	800,000.
4 F	Reduction in limitation Subtract line 3	from line 2 If zero	or less, enter -0-			4	
5 c	oflar limitation for tax year Subtract line 4 from line	e 1 If zero or less enter	-0- If married filing separately	, see instructions	- 	5	
6	(a) Description of pi	operty	(b) Cost (b	usiness use only)	(c) Elec	ted cost	_
							4
					_ [
7 L	sted property Enter the amount from	ine 29		7			
	otal elected cost of section 179 prope		s in column (c), lines 6 a	and 7		8	
	entative deduction Enter the smaller	•	, , , , , , , , , , , , , , , , , , ,			9	
	Carryover of disallowed deduction from		008 Form 4562			10	
	Business income limitation. Enter the s	•		zero) or line 5		11	
	Section 179 expense deduction Add I		•	•		12	
	Carryover of disallowed deduction to 2	· ·		▶ 13	1	14	
	: Do not use Part II or Part III below for			P 13	_ 		<u> </u>
				oluda listad ai	roporty)		
	 						
	Special depreciation allowance for qua	ulified property (ot	ner than listed property) placed in sei	vice auring		
	ne tax year					14	
15 F	Property subject to section 168(f)(1) el	ection				15	0.740
	Other depreciation (including ACRS)					16	2,742.
Pa	t III MACRS Depreciation (Do no	ot include listed p	roperty) (See instruction	ons.)			
	MACRS deductions for assets placed you are electing to group any assets placed in ser Section B - Assets	vice during the tax year	• •	accounts check h		iation Sys	tem
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)		(e) Convention	on (f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property	7					
c	7-year property	7			-		
d	10-year property						
	15-year property						
t	20-year property	-					
	25-year property			25 yrs		S/L	
<u>g</u>	25 year property	,		27 5 yı		S/L	
h	Residential rental property	/		27 5 yı		S/L	
				1	i	S/L	
1	Nonresidential real property	/		39 yrs	MM	S/L	
	Contract C Annual I	Planed in Comine	During 2009 Tax Yea	r I loung tha A		_	mtom
		Placed in Service	During 2009 Tax Tea	r Using the A	lternative Depr		/Steili
<u>20a</u>	Class life	_				S/L	
<u>b</u>	12-year			12 yrs		S/L	
<u> </u>	40-year	/		40 yrs	s MM	S/L	<u> </u>
	rt IV Summary (See instructions)					Г	
	usted property Enter amount from lin					21	
22 1	otal. Add amounts from line 12, lines	14 through 17, lir	nes 19 and 20 in colum	n (g), and line	21		
E	Enter here and on the appropriate line:	s of your return P	artnerships and S corp	orations - <u>see</u>	ınstr	22	2,742.
23 F	or assets shown above and placed in	service during th	e current year, enter th	e			
	portion of the basis attributable to sec	tion 263A costs		23	<u> </u>		<u> </u>
91625 11-04	1 09 LHA For Paperwork Reduction	n Act Notice, see	separate instructions	3.			Form 4562 (2009)

SCHOOL BIBLE STUDY COMMITTEE 62-0523361 Form 4562 (2009) PUBLIC 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, completeonly 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? No 24b If "Yes," is the evidence written? No Yes Yes (b) (c) (e) (f) (i) (h) (d) Elected Date Business/ Basis for depreciation Type of property Recovery Method/ Depreciation Cost or section 179 placed in investment deduction Convention period (list vehicles first) other basis service use percentage use only) cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use % Property used 50% or less in a qualified business use S/L S/L % % S/L 28 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (f) (a) (b) (c) (d) (e) Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 Yes Yes Yes No 34 Was the vehicle available for personal use Yes Νo No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37 38 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI | Amortization (f) (b) (c) (d) (e) (a) Amortizable amount period or percentage begins 42 Amortization of costs that begins during your 2009 tax year

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43

44

44 Total. Add amounts in column (f) See the instructions for where to report

43 Amortization of costs that began before your 2009 tax year