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Form 990

Department of the Treasury Internal Revenue Service

SCANNED DEC 27 2010

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)

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

OMB No 1545-0047

Open to Public Inspection

<u>A</u>	For th	ne 2009 ca	alendar	year, or tax year beginning	August 1	, 2009, a	nd ending	Jul	ly 31	, 20 10)
В	Check if	applicable	Please	C Name of organization Oklah	oma Bible Acader	my			D Emplo	yer identifi	cation number
		s change	use IRS tabel or	Doing Business As					73	1	083792
	Name o		print or	Number and street (or P O box if it	nail is not delivered to street	t address)	Room/suite		E Teleph	one numbe	r
	Initial re		type. See	5913 West Chestnut					(580)	24	42-4104
			Specific Instruc-	City or town, state or country,	and ZIP + 4		<u> </u>				
一	Termina		tions.	Enid, Oklahoma 73703					G Gross	ncainte \$	1626815
		ed return	F Nan	ne and address of principal office	Paul MacDonal	d					
ш,	Applicati	on pending	1	West Chestnut, Enid, Okl		u					Yes No
_	Tay-ov	empt status			947(a)(1) or 527			1		included?	
<u>'</u>					347 (a)(1) 01 327					a list (see ir	istructions)
<u> </u>				ahomabible.com oration Trust Association	O11 E	J. Vee			exemption ni		-1- 014
				oration Trust Association	Other ▶	L Year	of formation	1911	M State	of legal dom	icile OK
F	art I	Summ			 -						
	1			the organization's mission			:	• • • • • • • • • • • • • • • • • • • •	· • • • • • • • • • • • • • • • • • • •		
ø	1	Middle	school	and high school Christia	n education progr	am					
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Activities & Governance	2	Check this	box ►	If the organization discontinuous	ed its operations or disp	posed of more	than 25% of	f its net ass	ets.		
∞ ∞	3	Number	of votir	ng members of the govern	ing body (Part VI, I	ine 1a).			. 3	ļ	10
es	4	Number	of inde	pendent voting members	of the governing bo	ody (Part V	/I, line 1b)		. 4	ļ	10
ž	5	Total nur	nber of	f employees (Part V, line 2	a)				. 5		53
Act	6	Total nur	mber of	f volunteers (estimate if ne	cessary)				. 6		30
	7a	Total gro	ss unre	elated business revenue fr	om Part VIII, colum	n (C), line	12		7a	<u> </u>	0
				usiness taxable income fro					. 7b		
								Prior Y	ear	Cur	rent Year
_	8	Contribu	tions ai	nd grants (ParkVIII) Fe			. [229051	1	495250
Revenue	9			e revenue (Part VIII, line-2					1308405		1366380
ě	10	Investme	ent inco	me (Pad) VIII -column (A)	lines 3 (Pand 7d)	• • •			33053		63851
č	11	Other rev	venue (me (Part) VIII, column (A), Part VIII, column (A), lines	25) 66. 80 9c. 10c.	and 11e)			24800		19055
	12	Total reve	enue—a	add lines 8 through 11 (mus	equal Part VIII, colu	umn (A), line	e 12)		1595309		1944536
	-			lar amounts patd (Part IX,	100				0	 	0
	14			or for members (Part IX).					0		0
e S	15			ompensation, employee ben		 n (Δ) lines F			1129996		1239689
Expenses	162			draising fees (Part IX, colur			, 10,		0		0
꼾	l loa			expenses (Part IX, column		_	122				
_	_		_	(Part IX, column (A), lines					558880	<u> </u>	508232
			•	Add lines 13-17 (must ed	•				1688876	 	1747921
	19			penses. Subtract line 18 fro		n (A), line a	²³⁾ · ·		-93567	 	196615
o de			.000 0%	pontoco caonao mo no ne	<u>,, , , , , , , , , , , , , , , , , , ,</u>	· • • · · ·	Be	ginning of C		End	d of Year
ets	20	Total ass	acto (De	art X, line 16)					3738010	ļ — — — — — — — — — — — — — — — — — — —	4379733
Ass	20						· · ·		457160	†	902268
Net Assets Fund Baland	21 22			Part X, line 26)	21 from line 20		· · ·		3280850	 	3477465
	art II		ature		22, 110111 1110 20.		<u> </u>		<u> </u>		0477400
				f perjury, I declare that I have exa	mined this return, includi	ng accompan	vina schedule	es and state	ments, and	to the best	of my knowledg
		and belie	f, it is tra	e correct/and complete Declar	ation of preparer (other t	han officer) is	based on all	information	of which p	reparer has	any knowledge
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		Preparer' signature				Date	self-		(see instru	identifying n ictions)	umbei
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			and ZIP					Phone r	10 ▶ (
Ma	ly the	IRS disci	uss this	s return with the preparer	snown <u>abov</u> e? (see	e instructio	ns)			. 11	Yes L No

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

Form **990** (2009)

Cat No 11282Y

Form s	990 (2009) Pai	ge 2			
Par	t III Statement of Program Service Accomplishments				
1	Briefly describe the organization's mission: Middle school and senior high school (grades 6-12) Christian education program				
	Did the every return undertake any every fract are every divined the every back and a set back as				
2	Did the organization undertake any significant program services during the year which were not listed on	No			
	the prior Form 990 or 990-EZ?	ИО			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Na			
If "Yes," describe these changes on Schedule O. 4 Describe the exempt purpose achievements for each of the organization's three largest program services by experiments for each of the organization.					
7	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants a allocations to others, the total expenses, and revenue, if any, for each program service reported.	.nd			
4a	(Code:) (Expenses \$1663163 including grants of \$) (Revenue \$1244021)				
	Education Program				
4b	(Code:) (Expenses \$ 84758 including grants of \$) (Revenue \$ 122359) Lunch Program				
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	•••••••••••••••••••••••••••••••••••••••				
	•••••••••••••••••••••••••••••••••••••••				
		· 			
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)				
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	Other program services (Describe in Schedule O.)				
40	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)				
4e	Total program service expenses ► 1747921				

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	✓_	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓_	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	4		✓
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		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		✓
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		✓
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	✓_	
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	✓_	
•	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.			٤
•	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			
40	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		1
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	✓_	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	14b		✓
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		1
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		1
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		✓
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		1
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		1
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	l	✓

Par	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
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		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		√
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a	:	√
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	_29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	_	1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O		1	
		-	<u> </u>	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 40		ļ	ļ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		1
b	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		1
b	If "Yes," enter the name of the foreign country: ▶		1	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		/
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	_		١,
	Prohibited Tax Shelter Transaction?	5c	-	1
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_		'
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		<u> </u>	
	and services provided to the payor?	7a	ļ .	✓
	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		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g	ļ	<u> </u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	ļ	✓
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>	 	
а	Did the organization make any taxable distributions under section 4966?	9a	╁—	↓ ✓
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	-	+ ✓
10	Section 501(c)(7) organizations. Enter:			
a	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.	ł		
b	Gross receipte, included of Form 330, Fait Vin, line 12, for public use of club facilities	}	1	1
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders.			
a	areas means were married as characteristics.	1	1	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	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			1

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

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			لـــــا
	any other officer, director, trustee, or key employee?	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		√
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		√
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u> </u>
6	Does the organization have members or stockholders?	6	√	
7 a	g,,		_ ,	
	of the governing body?	7a	V	
D	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	-v _	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following: The governing body?	8a	7	
a b	Each committee with authority to act on behalf of the governing body?	8b	-	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	05		
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		1
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte-			
Rev	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		✓_
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	✓	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	4-		
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	406		
	rise to conflicts?	12b	✓	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	✓	
13	Does the organization have a written whistleblower policy?	13		✓
14	Does the organization have a written document retention and destruction policy?	14		✓
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		√
b	Other officers or key employees of the organization	15b		→
40	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 arrangement	16a		
	with a taxable entity during the year?	Ioa		
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
 17	List the states with which a copy of this Form 990 is required to be filed ▶ NA		_	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c	c)(3)s	onlv)	•
	available for public inspection. Indicate how you make these available. Check all that apply.	,,-,-	,	
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds o	f the	
	organization: ▶ Paul MacDonald, 5913 West Chestnut, Enid, Oklahoma, 73703		_	

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

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

1a Complete this table for all persons required to be listed. 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.

□ Check this box if the organization did not compared to the companies of the comp	mpensate_	any o	curr	ent	offic	cer, d	lirec	tor, or trustee.	,	
(A)	(B)	1			C)			(D)	(E)	(F)
Name and Title	Average	Positi	on (chec	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Paul Woodward, President	2			1						
Charlie Cannon, Vice-President	2			1						
Janet Wiens, Secretary	2			1						
Stephanie Eaton, Treasurer	2			1						
Paul MacDonald	40					1		41741		27000
					:					
					<u> </u>					

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)	(B)			-	C)			(D)	(E)		(F)	
Name and title	Average hours per week	Individual trustee	nstrtutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	com f org	stimated mount of other opensation rom the ganization direlated anizations	
	_											
	_											
	_											
	-											
	_											
	-											
	-											
	_											
	-											
1b Total	<u> </u>		I		<u> </u>	l	<u> </u>		· · · · · · · · · · · · · · · · · · ·	-		
Total number of individuals (including but	not limited	to the	ose	liste	ed a			no received mo	ore than \$100.0	000 in		_
reportable compensation from the organiz	ation ►											
										_	Yes N	0
3 Did the organization list any former office							oye	e, or highest o	ompensated	3		-
employee on line 1a? If "Yes," complete S For any individual listed on line 1a, is the										3	_	_
the organization and related organizations	greater tha	ortabi in \$15	60,0	оп 100?	oens If "	Yes."	COI	nolete Schedu	nsation from the J for such			
ındıvıdual										4		<u>_</u>
5 Did any person listed on line 1a receive services rendered to the organization? If "	or accrue 'Yes." comp	compolete 3	oens S <i>ch</i>	satıd edu	on f le J	from a for s	any uch	unrelated org	anization for	5		_
Section B. Independent Contractors									· . · . ·	1 0		_
Complete this table for your five highest compensation from the organization.	ompensate	d ind	epe	nde	nt c	ontra	icto	rs that receive	d more than \$1	00,000	of	
(A) Name and business ad	dress				_			(B) Description of s	ervices	(C Compe		
None												
							<u> </u>					
							\vdash					
												_
Total number of independent contractors (more than \$100,000 in compensation from	including bi	ut not	lım n ▶	ited	to 1	those	liste	ed above) who	received			

art	VIII	Statement of Revenue	(A)	(B)	(C)	(D)
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns 1a				
חסה	ь	Membership dues 1b				
a	С	Fundraising events 1c				
ila		Related organizations 1d				
sir		Government grants (contributions).	 -	1		
ther	f	All other contributions, gifts, grants, and similar amounts not included above 1f 495	5250			
and other similar amounts	g	Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f	▶ 495250			
e e		Business (*	
le l	2a	Education (Tuition/Fees)	1244021			
æ	b	Lunch	122359			
Nice.	С					
Program Service Revenue	d				ļ	
E	e	All other program service revenue .				<u> </u>
Prog	q	Total. Add lines 2a–2f	▶ 1366380	 	+	
_		Investment income (including dividends, interest,	1000000		 	
	3	other similar amounts)	63851			
	4	Income from investment of tax-exempt bond proceeds	•			
	5	Royalties	•			
	l	(i) Real (ii) Person				ļ
	6a	Gross Rents1	9055			
		Less: rental expenses	2055			
		Rental income or (loss) 11 Net rental income or (loss)	9055 ► 19055		 	
		(3) Canadana (4) Oth	- :0000	<u> </u>	 	
	/a	Gross amount from sales of assets other than inventory				
	Ь	Less: cost or other basis			1	
		and sales expenses .			4	
	С	Gain or (loss)				
	d	Net gain or (loss)	•		<u> </u>	
Me	8a	Gross income from fundraising			}	
Ver		events (not including \$				
Other Reven		of contributions reported on line 1c). See Part IV, line 18 a				
ř	h	Less: direct expenses b			ì	
₹		Net income or (loss) from fundraising events	>		1	
	9a	Gross income from gaming activities.				
	1	See Part IV, line 19			•	
	b	Less: direct expenses b			<u> </u>	
	l	Net income or (loss) from gaming activities	•		-	
	10a	Gross sales of inventory, less			1	}
		returns and allowances a Less: cost of goods sold b				
		Less: cost of goods sold b Net income or (loss) from sales of inventory	D			
	Ť	Miscellaneous Revenue Business C	ode			
	11a					
	С					
	d	All other revenue			<u></u>	
	е	Total. Add lines 11a-11d			<u> </u>	
	12	Total revenue. See instructions	<u>▶ 1944536</u>		1	

Part IX Statement of Functional Expenses

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

	All other organizations must complete con			• • • • • • • • • • • • • • • • • • • •	
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the				
_	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			- ··· .	
5	Compensation of current officers, directors, trustees, and key employees			41741	
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	937228	794013	101474	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	237452	152007	85445	
10	Payroll taxes	65009	57463	7546	
11	Fees for services (non-employees):				
	Management				
	Legal			-	
					-
	Accounting				
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion		4000	22222	
13	Office expenses	37145	1355	30368	5422
14	Information technology	31919	29210	2709	
15	Royalties	100010	100010		
16	Occupancy	108216	108216		
17	Travel	30612	30612		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.	121106	121106		
23	Insurance	30236	30236		
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	Textbooks/Materials	54258	54258		
b	Student Activities	42774	42774		
c	Lunch Expenses	51966	51966		
d				4	
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1747921	1473216	269283	5422
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				

Part X **Balance Sheet** (A) Beginning of year (B) End of year -76529 1 -81834 1129023 2 1884121 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 11874 -1163 4 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 7 8 Inventories for sale or use Prepaid expenses and deferred charges . 9 Land, buildings, and equipment: cost or 10a 10a other basis Complete Part VI of Schedule D Less: accumulated depreciation 10b 2686679 10c 2565572 11 11 Investments—publicly traded securities . . . Investments-other securities. See Part IV, line 11 12 12 13 13 Investments-program-related. See Part IV, line 11 14 14 15 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 3738010 16 4379733 17 4088 17 Accounts payable and accrued expenses . . . -4098 18 18 453072 19 19 906366 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties . . . 24 24 Other liabilities. Complete Part X of Schedule D 25 25 26 Total liabilities. Add lines 17 through 25 457160 26 902268 Organizations that follow SFAS 117, check here ▶ and Balances complete lines 27 through 29, and lines 33 and 34. 54693 27 Unrestricted net assets 54694 27 538992 28 856712 28 Temporarily restricted net assets. . . Fund 2687165 29 2566059 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 5 30 Assets Capital stock or trust principal, or current funds . . . 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 Retained earnings, endowment, accumulated income, or other funds 32 33 3280850 33 3477465 Total liabilities and net assets/fund balances 3738010 34 4379733

Page	12
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Form	990	(2009)

Pa	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			Ì
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓
	Were the organization's financial statements audited by an independent accountant?	2b		✓
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
Ŭ	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
a	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	}		l
u	•			
•	issued on a consolidated basis, separate basis, or both:	l		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	<u> </u>		ļ
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		✓
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.	3b	[

Form **990** (2009)

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.

▶ 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

Name of the organization Employer identification number Oklahoma Bible Academy 1083792 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33\% % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33/4 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a 🗌 Type I **b** ☐ Type II c ☐ Type III-Functionally integrated d ☐ Type III–Other e D By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (III) Type of organization (iv) Is the organization (vi) Is the (vii) Amount of (v) Did you notify (described on lines 1-9 in col (i) listed in your organization organization in col the organization in support above or IRC section governing document? col (1) of your (i) organized in the (see instructions)) support? US? Yes Yes Yes No No

Total

	dule A (Form 990 or 990-EZ) 2009						Page 2
	Support Schedule for Org (Complete only if you chec					and 170(b)(1)(A)(vi)
	tion A. Public Support						
Ca	alendar 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						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		ļ				
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	-				<u> </u>	
	alendar 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>		<u> </u>		
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	re					
Sec	ction C. Computation of Public Su				-	I . I	
14	Public support percentage for 2009 (line					14	%
15	Public support percentage from 2008 Sci	hedule A, Part	II, line 14 .			15	%
16a	33% % support test – 2009. If the organiand stop here. The organization qualifies			•	line 14 is 331/3		
b	331/3 % support test-2008. If the organic						
	box and stop here. The organization qua	ilifies as a publ	licly supported	organization .			▶
I7a	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	mstances" test,	check this box	and stop here	. Explain in	Part IV how the
b	10%-facts-and-circumstances test – 2008 more, and if the organization meets the "forganization meets the "facts-and-circumstant"	acts-and-circun	nstances" test,	check this box	and stop here.	Explain in I	Part IV how the
18	Private foundation. If the organization did						

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	d the box of	11 11110 3 01 1 6			<u> </u>	
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(4) 2009	(a) 2000	(f) Total
O.	mendar year (or inscal year beginning in)	(a) 2003	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(r) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 6	The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support	4-) 0005	# N 0000	() 0000		Т	
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	-				:	
13	Total support. (Add lines 9, 10c, 11, and 12.)		,				
14	organization, check this box and stop here						
	tion C. Computation of Public Su	-	_				
15	Public support percentage for 2009 (lin			ne 13, column	(f))	15	%_
16	Public support percentage from 2008 S				<u> </u>	16	
	tion D. Computation of Investmen					 	
17	Investment income percentage for 2009				olumn (f)) .	17	
18	Investment income percentage from 20					18	<u>%</u>
19a	331/3 % support tests—2009. If the orga 17 is not more than 331/3 %, check this b	ox and stop h e	ere. The organ	zation qualifies	s as a publicly	supported orga	anization 🕨 🗌
b	33% % support tests - 2008. If the organ line 18 is not more than 33% %, check this	box and stop	here. The orga	nızatıon qualifie	s as a publicly	supported orga	inization 🕨 🗌
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	, check this b	ox and see ins	tructions >

	om 990 or 990-EZ) 2009 Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
	Part II, line 17a or 17b, and Part III, line 12. Provide any other additional information. See instructions.

SCHEDULE D (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.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Oklahoma Bible Academy 1083792 73 : Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 2 Aggregate grants from (during year) 3 4 Aggregate value at end of year . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified 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 2a 2b c Number of conservation easements on a certified historic structure included in (a) . d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year **•** Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or 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, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

b Assets included in Form 990, Part X

\$

Page	2

Par	t III Organizations Maintaini	ng Collections o	of Art, His	storical	Treasures,	or Ot	her Similar /	Assets (c	continued)
3	Using the organization's acquisition, collection items (check all that apply		ther recor	ds, chec	k any of the f	ollow	ng that are a	significan	t use of its
а	Public exhibition		d	Lo	an or exchan	ge pro	ograms		
b									
C									
4	Provide a description of the organiz Part XIV.	ation's collections	and expla	aın how	they further t	he org	ganization's e	xempt pu	rpose in
5	During the year, did the organization sassets to be sold to raise funds rather	solicit or receive do	nations of ined as pa	art, histo	orical treasures organization's	s, or o	ther similar	. 🔲 Y	′es 🔲 No
Par	Escrow and Custodial A IV, line 9, or reported an					swere	ed "Yes" to F	orm 990	, Part
	is the organization an agent, trustee included on Form 990, Part X?					ns or o	other assets r	not Y	′es 🗌 No
b	If "Yes," explain the arrangement in	Part XIV and com	plete the	following	g table:		 		
						<u> </u>		Amount	
С						1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					_1f	L		. 🗖
b	Did the organization include an amilf "Yes," explain the arrangement in	Part XIV.							′es ∐ No
Par	t V Endowment Funds. Co					$\overline{}$			
		(a) Current year	(b) Prior	r year	(c) Two years b	ack (d) Three years ba	ick (e) Fo	ur years back
1a	Beginning of year balance	170000		170000					
b	Contributions	505618		170000			<u> </u>		
С	Net investment earnings, gains, and losses	47380	_						
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
f g	Administrative expenses End of year balance	722998		170000			·		<u>.</u> .
2	Provide the estimated percentage of	of the year end bal	ance held	l as:					
а	Board designated or quasi-endown	nent 🕨	0 %						
b	Permanent endowment ▶1	<u>00</u> %							
С	Term endowment ▶ %	6							
3a	Are there endowment funds not in th	e possession of th	e organiza	ation tha	t are held and	admı	nistered for th	е	G. 7
	organization by:							<u> </u>	Yes No
	(i) unrelated organizations							. 3a(i	
	(ii) related organizations							. 3a(ii)
_	If "Yes" to 3a(ii), are the related org Describe in Part XIV the intended u					- •		. <u>3b</u>	<u> </u>
4 Dat	t VI Investments—Land, Bu					4 V I	no 10		
Par									
	Description of investment	(a) Cost or other (investm			t or other (other)		ocumulated preciation	(d) Bo	ok value
1a	Land				560100				560100
b	Buildings				3200302		1240307		1959995
С	Leasehold improvements								
d	Equipment				72765		27288		45477
e Taka	Other	must squal Farms Of	00 0== 14		(D) tran 10(-1)				
rota	I. Add lines 1a through 1e. (Column (d)	must equal Form 9	sυ, raπ X,	column	(b), line 10(c))	<u> </u>	<u> ▶ </u>		2565572

Part VII	Investments—Other Securities	s. See Form 990, Part X	(, line 12.	
	Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year ma	ation rket value
Financial de	erivatives			
Other		ļ <u> </u>		
		<u> </u>	 	
			 	
		<u> </u>		
T-1-1 (0-1	A1		<u> </u>	
	(b) must equal Form 990, Part X, col (B) line 12)	od Soo Form 000 Port	V line 12	
Part VIII				-1 -
	a) Description of investment type	(b) Book value	(c) Method of value Cost or end-of-year ma	ation urket value
			 	
			 	
		<u> </u>		
		_		
	(b) must equal Form 990, Part X, col (B) line 13.) ► Other Assets. See Form 990, Part X	ut V line 15	_L	
Part IX	Other Assets. See Form 990, Fa	(a) Description		(b) Book value
		(a) becomplies		(b) Book value
				
				
Total. (Colu	ımn (b) must equal Form 990, Part X, col.	(B) line 15.)		
Part X	Other Liabilities. See Form 990			
1.	(a) Description of liability	(b) Amount		
Federal inc	come taxes			
		<u> </u>	\rightarrow	
		<u> </u>		
			-	
			_	
			_	
		 		
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25.) ▶		_ <u>L</u>	

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.

Sched	ule D (Form 990) 2009			Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990	to Audited Financial S	Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5_	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Comb		10	
1	Total revenue, gains, and other support per audited financial statemen	nts	· 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a	·	
a	Net unrealized gains on investments	2b		
b	Donated services and use of facilities	2c	 	
C	Recoveries of prior year grants	2d		
d	Other (Describe in Part XIV.)		2e	
e			3	
3 4		<i>i</i> · <i>i</i> · · · · ·	· •	
-	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4a		
a b	Investment expenses not included on Form 990, Part VIII, line 7b . Other (Describe in Part XIV)	4b		
C	Add lines 4a and 4b		. 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	···
Par	t XIII Reconciliation of Expenses per Audited Financial St			rn
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIV.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b		
C	Add lines 4a and 4b		. 4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part	I, line 18.)	. 5	
	t XIV Supplemental Information	·- <u>-</u>	<u></u> .	
Com	plete this part to provide the descriptions required for Part II, lines 3, 5	, and 9; Part III, lines 1a a	and 4; Part IV, li	nes 1b
	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4t	o; and Part XIII, lines 2d a	and 4b. Also co	mplete
เกเร	part to provide any additional information.			
Par	t V Explanation:			
••••				
The	earnings from the endowment funds are used for tuition assistance	e for appropriate studer	nts.	
	••••••			
		•••••		
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				••••••••••

Schedule D (For	chedule D (Form 990) 2009 Page 5					
Part XIV	Supplemental Information (continued)					
· · · · · · · · · · · · · · · · · · ·						
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SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection Employer identification number

OMB No 1545-0047

Name of the organization Oklahoma Bible Academy 73 1083792

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	1	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions,			
	programs, and scholarships?	2	✓	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please			
	describe. If "No," please explain. If you need more space, use Schedule O (Form 990)	3	✓	
	Published in Enid News and Eagle newspaper			
	Published in student enrollment brochures/forms			
	Printed on website			
	•••••••••••••••••••••••••••••••••••••••			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	✓	
þ	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	✓	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
_	with student admissions, programs, and scholarships?	4c	✓	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	✓	
	If you answered "No" to any of the above, please explain. If you need more space, use Schedule O			
	(Form 990).			
	•			
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		✓
				١,
b	Admissions policies?	5b		✓
				,
C	Employment of faculty or administrative staff?	_5c		✓
		١		,
þ	Scholarships or other financial assistance?	<u>5d</u>		✓
		ٔ ۔ ا		,
e	Educational policies?	<u>5e</u>		✓
_		5f		
T	Use of facilities?	31	_	┡┻
_	Adhlada waa ayawa2	5g		1
g	Athletic programs?			
h	Other extracurricular activities?	5h		✓.
	If you answered "Yes" to any of the above, please explain. If you need more space, use Schedule O (Form 990).			
		L		
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a		✓
b	Has the organization's right to such aid ever been revoked or suspended?	6b		√
	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990).			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05			
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 990)	7		

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

OMB No 1545-0047

2009
Open to Public Inspection

Employer identification number

Oklahoma Bible Academy	73	1083792		
Form 990, Part VI, Section A, Line 10				
The completed Form 990 and its supplements schedules are presented to the headmaste	r and eac	ch of the 10 members of		
the board of directors for their review and approval prior to filing.				
Form 990, Part VI, Section A, Line 11				
Paul Woodward, 1925 Ramona, Enid, OK 73703				
Charlie Cannon, 1121 Chantell Dr., Enid, OK 73703				
Janet Wiens, 6528 Garland Road, Waukomis, OK 73773				
Stephanie Eaton, 2917 Kelly Road, Enid, OK 73703				
Form 990, Part VI, Section B, Line 12c				
Board of director members shall disclose to the other members of the board any conflict	of intere	st and the remaining		
board members shall determine the most ethical procedure to follow. The member shall	abide by	the board of director's		
decision.				
Form 990, Section VI, Section C, Line 19				
Financial statements are presented to the board of directors on a monthly basis for review	w and ap	proval, to the		
corporation members at the annual meeting, and discussed as needed for other interested	d parties	s. The other		
documents and policies of the school are available in the school office for perusal upon	request c	of any interested party.		
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Name of the organization	Employer identification number
Name of the organization	:
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