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... **990**

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2011 calendar year, or tax year beginning , 2011, and ending , 20											
В	Check if	applicable.	C Name of organization	WORLD BIBL	E SCHOOL OF	TULARE COU	NTY	·	D Employe	er identification n	umber
	Address	change	Doing Business As		•					77-0236056	
	Name ch	hange	Number and street (or F	O. box if mail is	s not delivered to s	treet address)	Room/suit	е	E Telephoi	ne number	
	Initial ret		P.O. BOX 3700							559-967-0913	
$\overline{\Box}$	Termina		City or town, state or co	ountry, and ZIP	+ 4						
F	Amende	·	VISALIA, CA 93278-	3700					G Gross re	ecepts \$	379,090
$\overline{\sqcap}$			F Name and address of p		Joel Coppinge	er		H(a) is this		for affiliates? Yes	✓ No
_	, фр.,оц	or porturing	P.O. Box 3700, Visalia		11 3					ncluded? Yes	
	Tay-eye	mpt status	✓ 501(c)(3)	501(c) () ◀ (insert no)	4947(a)(1) o	r 527			list (see instruction	
<u>:</u>	Website		w.worldbibleschoolof			<u> </u>		H(c) Grou	p exemption	number 🕨	
ĸ			Corporation Trust		Other ►	TL,	Year of formation			of legal domicile	CA
_	art I	Summ			0				1 0		
	1		escribe the organizat	on's mission	or most signif	icant activitie	es. Our pu	rpose and f	unction is	to teach the Bi	ble to
	'	-	who is interested in lea		-						
80	1		free of charge, to any			<i></i>					
Га			in foreign countries to				ible. We als		support p		iiow up
/er	2		is box ▶☐ if the org				disposed o	f more tha	25% of	ite not accote	
Activities & Governance	2		of voting members o			-	uisposed o	i illore triai	. 3	ils riel assels.	
•8	3		•	•	• • •						
ä	4		of independent votin	-	-						-
Ž	5		mber of individuals ei		-	Jii (Part V, II	ine zaj .		5		
Ac	6	Total nur	nber of volunteers (e	stimate if ne	cessary)		· · · ·		6		6
	7a	l otal uni	elated business reve	nue trom Pa	rt VIII, column		/ED : [7a		
	b	Net unre	lated business taxab	ie income tro	om Formlaa n-1	, IINO-34	· · · · ·	Prior Y	. 7b	Current Y	0
	1 _)	MANY 1 A	2012	PITOLI		Current	
e	8		tions and grants (Par		′ l-+1	MAY 1 4	2012		311,951		379,083
ē	9	_	service revenue (Par	_			<u>· · · · · · · · · · · · · · · · · · · </u>				
Revenue	10	Investme	ent income (Part VIII,	column (A), I	ines 3, 4, and 7	COEN	·UT·∓		22		7
	11	Other rev	venue (Part VIII, colur	nn (A), lines	5, 6d, 8c <u>l.9c, 1</u>	DC, and Tie)	10)				
_	12	Total rev	enue-add lines 8 trir	ougn 11 (mu	st equal Part VII	ii, column (A),	, line 12)		311,973		379,090
	13		nd similar amounts p	•	• •	-	· · ·		263,520		306,687
	14		paid to or for member			-	· _ · · -				
es	15		other compensation,	• •	•	• •	· -		22,633		23,506
Expenses	16a		onal fundraising fees	-	• •	=	(c)	* 1-480 45 MM	2 THE DE MARKET		
훘	_b		draising expenses (F				38,814				
-	17		penses (Part IX, colu	• • •	•	•	<i>:</i> · · ⊢		87,971		54,963
	18		penses. Add lines 13-			umn (A), line	25)		374,124		385,156
	19	Revenue	less expenses. Sub	ract line 18 1	from line 12 .	<u> </u>			-62,151		-6,066
Net Assets or		_					1	eginning of C		End of Ye	
85et	20		sets (Part X, line 16)				• • •		36,684		32,414
A P	21		oilities (Part X, line 26				· · ·		507		2,303
<u> (734</u>	. 22		ets or fund balances.	Subtract line	21 from line 2	<u>0</u>	<u> </u>		36,177		30,111
-	art II	$\overline{}$	ture Block	.		.					
ZU	nder pena	alties of peril	yry, I declare/that) have ex tete Declaration of prepare	amined this retu	ım, including accor	npanying sched	ules and stater	nents, and to	the best of a	my knowledge and	belief, it is
	e, correc	i, and com	Peter Declaration of Dieban	or (order tream of		i information or v	which preparer	TIAS ASTY KITOW	/AA-	W Q 11	11
C'Sig		1		19//]//(U	10,00	1
		/ Sign	patture of difficien	2 7/0°				D	ate '	// /	
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<u>z</u>		170	e or print name and trile				- · · · · · · · · · · · · · · · · · · ·	 	- 	- I	
ΈPε	aid	Print/Ty	pe prepareris name	Pr	eparer's signature		Da	te	Check		
Pr	epare	er						·	self-em	ployed	
8	se On	Firm's	name 🕨					Fir	m's EIN 🕨	<u></u>	
<u>⋝</u> _		Firm's a	address >					Ph	one no		
Ma	y the II	RS discus	s this return with the	preparer sho	own above? (se	e instruction	ns)			<u> </u> Ye	s 🗌 No

Part	V 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 (see instructions)?	2	1	
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	<u> </u>		Ť
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		1
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	ا ا	<u> </u>	- -
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	44		47.07.1 #
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	11a	✓	
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	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	11c		1
d	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	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		,
	Schedule D, Parts XI, XII, and XIII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	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, Parts II and IV	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, Parts III and IV	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 (see instructions)	17		1
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		<u> </u>	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18	_	✓
^^	If "Yes," complete Schedule G, Part III	19	L	✓
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	<u> </u>	✓
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	

Part	IV Checklist of Required Schedules (continued)			ago 1
04			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization 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 c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d		√
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	25a 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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
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
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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	35b 36		1
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,	30		
	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	38	1	

Part	V Statements Regarding Other IRS Filings and Tax Compliance			ugo
	Check if Schedule O contains a response to any question in this Part V	<u>.</u>		. 🗆
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1	1	l	Ì
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	-		-
00	reportable gaming (gambling) winnings to prize winners?	1c	✓	
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 1	2b	,	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	-	-
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	ŧ	1
ь	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		✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for 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		1
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?	5c	<u> </u>	<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	١.		,
h	organization solicit any contributions that were not tax deductible?	6a		 ✓
b	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	100		+-
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods]		
	and services provided to the payor?	7a	-	1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	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 receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f	L	✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	-	ļ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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		7
9	Sponsoring organizations maintaining donor advised funds.	-	-	•
а	Did the organization make any taxable distributions under section 4966?	9a	-	1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:		1	1
а	Initiation fees and capital contributions included on Part VIII, line 12		l	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b]		
11	Section 501(c)(12) organizations. Enter:		1	
a	Gross income from members or shareholders	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.)		1	
10-	· · · · · · · · · · · · · · · · · · ·	ـقة ا		
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a	 -	├
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	1	
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	1	†
_	Note. See the instructions for additional information the organization must report on Schedule O.	1.50	†	
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans		[
C	Enter the amount of reserves on hand	1	1	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
h	If "Ves." has it filed a Form 720 to report these payments? If "No." provide an evaluation in Schedule O	146		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
	Check if Schedule O contains a response to any question in this Part VI			Ø7.0. ☑
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 4			;
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			(
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 4			1
ь 2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			1
_	any other officer, director, trustee, or key employee?	2	_	1
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 governing documents since the pnor Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	,	✓
6	Did the organization have members or stockholders?	6		✓_
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_		
_	one or more members of the governing body?	7a		✓
b	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	70		 -
•	the year by the following:			
а	The governing body?	8a	7	
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓_
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	<u>_</u>	
10a	Did the organization have lead chapters branches or effiliates?	100	Yes	No
b	Did the organization have local chapters, branches, or affiliates?	10a		<u> </u>
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		✓
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		✓_
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40		
10	describe in Schedule O how this was done	12c		
13 14	Did the organization have a written whistleblower policy?	13 14		1
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?			
а	The organization's CEO, Executive Director, or top management official	15a	1	1
b	Other officers or key employees of the organization	15b		
4.	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 with a taxable entity during the year?			لـــِـا
.	·	16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		1
Secti	on C. Disclosure		<u> </u>	·
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
40	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of	f inte	rest p	olicy,
20	and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records	af ah-		
20	organization: ► Joel P. Coppinger, 1130 Dove Dr., Visalia, CA 93291 559-967-0913	ui ine	•	

Form	agn	(2011)
	330	(2011)

				
Part VII	Compensation of Officers, Directors, 1	Trustees, Key Employees,	, Highest Compensated Employee:	s, 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.
- 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, if any. 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 neither the organization noi	r any relate	a org:	anız	atio	n c	ompe	nsa	ited any curren	it officer, directo	r, or trustee.	
		(C)									
(A)	(B)	١			ition			(D)	(E)	(F)	
Name and Title	Average					than o		Reportable	Reportable	Estimated	
	hours per		officer and a director/trustee)				compensation	compensation from			
	week (describe	요글	2	Q	7	9.∓	77	from the	related organizations	other compensation	
	hours for	물통	<u>#</u>	Officer	و ا	등등	Former	organization	(W-2/1099-MISC)	from the	
	related	C a	ğ	7	힐	ye c	٦	(W-2/1099-MISC)		organization	
	organizations in Schedule	7 हूं	함		Key employee	Į				and related organizations	
	O)	Individual trustee or director	Institutional trustee		"	ens				J. g	
			96			Highest compensated employee					
(1) Joel P. Coppinger											
Trustee/director/Treasurer	35	1		1	1	1		16,132	0		0
(2) Les Spitler		<u> </u>		Ť	Ť	<u> </u>		10,102			Ť
Trustee/President	0	✓		1				о	0		0
(3) Claude Vice											
Trustee/Secretary	0	✓		✓				0	0		0
(4) Chris Crumly											
Trustee/Vice President	0	✓		✓				0	0		0
(5)											
(6)					_						_
(7)											_
(8)							-				
(0)		ļ	<u> </u>		_		<u> </u>			<u> </u>	
(9)											
(10)											_
(11)											_
(12)											
(13)							 -				
(14)							_				

Part	Section A. Officers, Directors, Trust		mpio	/ees	(0	na F C) ition	lignes	st C			CONTINU			
	(A) Name and title	(B) Average hours per	box,	unles	eck s pe	more rson	than one that the that the that the the the the the the the the the th	an	(D) Reportable compensation	(E) Reportable compensation from		(F) Estimated amount of		
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-M		comp from organ and	ther ensation m the nization related sizations	
(15)								<u> </u>						
(16)														
(17)													<u></u>	
(18)														
(19)														
(20)														
(21)					_			-						
(22)											$\overline{}$			
(23)														
(24)									,					
(25)						_								
1b c	Sub-total	VII, Sectio	n A			•	•	>	16,132		0			0
<u>d</u>	Total (add lines 1b and 1c)	t not limited	d to th					▶ e) w	ho received m	'	0 0,000	of		0
3	Did the organization list any former of employee on line 1a? If "Yes," complete to	ficer, direc	tor, c					emp	bloyee, or high	nest compe	nsated	3		No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual													1
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or ind		5		✓
Section	n B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repyear.													x
	(A) Name and business add	iress						-	(B) Description of s	ervices		(C) Compens	ation	
NONE														
2	Total number of independent contractor	•	_					th	nose listed ab	ove) who		-		

Part	VIII	Statement of Revenue				
,	· · · · · · ·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts s	1a	Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b				
S, G	С	Fundraising events 1c	1			
ar /	đ	Related organizations 1d				,
s, C	е	Government grants (contributions) 1e				;
rSI	f	All other contributions, gifts, grants,				
the		and similar amounts not included above 1f 379,083	1			
d d	g	Noncash contributions included in lines 1a-1f: \$				
	h	Total. Add lines 1a–1f	379,083			
ЭŬЕ		Business Code	_			1
3Ver	2a					
ě.	b					
Zič	С					
Sel	d					
ram	e	All				
Program Service Revenue	f	All other program service revenue .				
	3	Total. Add lines 2a–2f			 	;
		and other similar amounts)	7			
	4	Income from investment of tax-exempt bond proceeds ▶			 	
	5	Royalties				
		(i) Real (ii) Personal				
	6a	Gross rents				
	ь	Less: rental expenses				
	С	Rental income or (loss)				,
	d	Net rental income or (loss) ▶				
	7a	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory				
	b	Less: cost or other basis				
	1	and sales expenses .				
	С	Gain or (loss)				
	d	Net gain or (loss)				
<u>o</u>						
Ju.	8a	Gross income from fundraising events (not including \$				
Other Revenu		of contributions reported on line 1c).				
Œ		See Part IV, line 18 a				
ţ	ь	Less: direct expenses b				
0	1	Net income or (loss) from fundraising events . ►				~
		Gross income from gaming activities.				
		See Part IV, line 19 a				
	ь	Less: direct expenses b			i '	
	С	Net income or (loss) from gaming activities ▶				
	10a	Gross sales of inventory, less				
	}	returns and allowances a				
	b	Less: cost of goods sold b				
	С	Net income or (loss) from sales of inventory ▶				
	<u> </u>	Miscellaneous Revenue Business Code				
	11a				<u> </u>	
	b					
	С					
	d	All other revenue			<u> </u>	
	12	Total. Add lines 11a-11d				
	12	Total revenue. See instructions ▶	379,090		I	I

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a response to any question in this Part IX										
Do no 8b, 9b	t include amounts reported on lines 6b, 7b, , 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 United States. See Part IV, line 21	0									
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0									
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	306,687	306,687								
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	16,132		1,613	14,519						
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 8	Other salaries and wages										
9	Other employee benefits	5,499		550	4,949						
10	Payroll taxes	1,875		188	1,687						
11	Fees for services (non-employees):										
а	Management		Ī								
b	Legal		-								
С	Accounting										
d	Lobbying										
е	Professional fundraising services See Part IV, line 17				•						
f	Investment management fees										
g	Other										
12	Advertising and promotion										
13	Office expenses	1,358		1,358							
14	Information technology	2,249	· · · · · · · · · · · · · · · · · · ·	112	2,137						
15	Royalties										
16	Occupancy	6,348		635	5,713						
17	Travel	8,320			8,320						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				0,020						
19	Conferences, conventions, and meetings .										
20	Interest										
21	Payments to affiliates										
22	Depreciation, depletion, and amortization .	751		75	676						
23	Insurance	413		41	372						
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If										
	line 24e amount exceeds 10% of line 25, column	}			ļ						
	(A) amount, list line 24e expenses on Schedule O.)			İ	,						
а	Printed teaching material	1,089	1,089		1						
b	Shipping	19,692	19,692								
C	Workers compensation insurance	490		49	441						
ď	Licenses and fees	220	· · · · · · · · · · · · · · · · · · ·	220							
e	All other expenses	14,033	390	13,643							
25	Total functional expenses. Add lines 1 through 24e	385,156	327,858	18,484	38,814						
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	333,100	22.7500	1.07.034	33,314						

Р	art X	Balance Sheet			<u></u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	28,454	1	25,021
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	-	3	
	4	Accounts receivable, net		4	-
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			•
		employers and sponsoring organizations of section 501(c)(9) voluntary			_
)ts		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
⋖	8	Inventories for sale or use	5,750	8	5,100
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			•
		other basis. Complete Part VI of Schedule D 10a 3,044			
	b	Less: accumulated depreciation	2,480		2,293
	11	Investments—publicly traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13 14	Investments—program-related. See Part IV, line 11		13	
	15	Intangible assets		14 15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	36,684	16	32,414
	17	Accounts payable and accrued expenses	507	17	2,303
	18	Grants payable	307	18	2,303
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
ģ	22	Payables to current and former officers, directors, trustees, key			
Liabilities		employees, highest compensated employees, and disqualified persons.			
Ē		Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	-	24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	507	26	2,303
ģ		Organizations that follow SFAS 117, check here ▶ ☐ and complete			
ည		lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets		27	
ä	28	Temporarily restricted net assets		28	
or Fund Balances	29	Permanently restricted net assets		29	
Œ		complete lines 30 through 34.			
ō	30	-			
šet	31	Capital stock or trust principal, or current funds		30	· · · · · · · · · · · · · · · · · · ·
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds.		31 32	
et	33	Total net assets or fund balances	36,177		20 414
Z	34	Total liabilities and net assets/fund balances	36,177	34	30,111 30,111
			30,177	<u>~</u>	30,111

				, ,	ye -	
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1 1		37	9,090	
2	Total expenses (must equal Part IX, column (A), line 25)	2		38	5,156	
3	Revenue less expenses. Subtract line 2 from line 1	3				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3	6,177	
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0	
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,					
	column (B))	6		3	0,111	
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other				1	
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in				
	Schedule O.			~]	
2a	in the singuistre in the state of the state					
b	Were the organization's financial statements audited by an independent accountant?		2b		✓	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or					
	of the audit, review, or compilation of its financial statements and selection of an independent accounts to the selection of an independent accounts to the selection of the se		2c		ļ	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain in				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the ye	ar were	ĺ		٠	
	issued on a separate basis, consolidated basis, or both:					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		ŀ			
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		1	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo the			١	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3ь			
			Forr	n 990	(2011)	

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 200 or Form 200 E7 h See concerts inchrications

OMB No 1545-0047
2011
Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Publi ons. Inspection Employer identification number

NOR	ELD BIBLE SCHOOL	L OF TULARE CO	UNTY	_					77-023	6056		
Pai	t I Reason f	or Public Cha	rity Status (All orga	nizations	s must c	omplete	this par	rt.) See i	nstruction	าร.		
he d 1 2 3 4	☐ A church, con☐ A school desc☐ A hospital or a	vention of churc cribed in section a cooperative ho	ation because it is: (Fo hes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjunc	churches h Schedu ition desc	describe ule E.) cribed in s	ed in sec section 1	tion 170(70(b)(1)((b)(1)(A)(i (A)(iii).	-	ii). Ente	r the	
5	☐ An organization	ne, city, and state on operated for a b)(1)(A)(iv). (Comp	the benefit of a collec	ge or uni	versity ov	vned or	operated	by a go	vernmenta	l unit d	escrib	ed in
6 7	☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
8 9	☐ A community ☐ An organization receipts from support from	trust described in that normally activities related gross investme	n section 170(b)(1)(A) receives: (1) more that to its exempt function in the income and unrelater June 30, 1975. See	(vi). (Con an 33 ¹ / ₃ % ions—sul ated bus	of its su oject to c siness tax	apport fro certain ex cable inc	ceptions ome (les	s, and (2) ss sectio	no more	than 33	31/3%	of its
10 11	☐ An organization ☐ An organization ☐ An organization ☐ An organization ☐ Purposes of comparison ☐ 509(a)(3). Che ☐ Type I	on organized and on organized are on more public the box that the box the bo	I operated exclusively and operated exclusive blicly supported organ describes the type of structure.	to test for the hizations of supporting Type	or public s le benefit described lg organiz	safety. Set of, to post in section and interesting and interes	ee section perform to ion 509(and dicomple tegrated	n 509(a)(the funct a)(1) or se te lines 1	tions of, o ection 509 11e through d	(a)(2). S n 11h. Type II	ee se I-Oth	ction er
e f	other than for or section 509 If the organiz	undation manage 9(a)(2). ation received a	that the organization ers and other than one a written determination	e or more	publicly	supporte	ed organ	izations o	described i	in section	on 509	9(a)(1)
g	•		he organization accep	 oted any	gift or co	 ontributio	 n from a	 Iny of the				
			ndirectly controls, eith						d in (ii) and	d 11g(i)	Yes	No
h	(iii) A 35% co	ntrolled entity of	on described in (i) abo a person described in ion about the supporte	(i) or (ii) a	above?.					11g(ii) 11g(iii)		
(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) is the o in col. (i) is governing	rganization sted in your document?	the organ col (i) supp	ou notify nization in of your port?	organizat (i) organi U.	Is the tion in col ized in the S.?		mount pport	of
A)				Yes	No	Yes	No	Yes	No			
B)												<u>.</u>
C)											,	
D)												
E)												
			}						1			

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 or if the organization failed to qualify unde
	Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	436,698	334,167	482,877	311,951	379,083	1,944,776
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	436,698	334,167	482,877	311,951	379,083	1,944,776
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						1,944,776
Section	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	436,698	334,167	482,877	311,951	379,083	1,944,776
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			159	22	7	188
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>					1,944,964
12	Gross receipts from related activities, etc.	•	•			12	NONE
13	First five years. If the Form 990 is for the	_			_		
04	organization, check this box and stop her				· · · · ·		· · P [
	on C. Computation of Public Suppor			4 (0)	 	44	20.0000.0/
14 15	Public support percentage for 2011 (line 6 Public support percentage from 2010 Sch		-		• • • •	14 15	99.9903 %
16a	33 ¹ /3% support test—2011. If the organization	•	•				
	box and stop here. The organization qual			•		-	
b	331/3% support test—2010. If the organ check this box and stop here. The organic	nization did no	t check a box	on line 13 or	16a, and line		_
17a	10%-facts-and-circumstances test—2011. 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 18	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization m supported organization	tion meets the leets the "facts	"facts-and-ci -and-circumst	rcumstances" ances" test. T	test, check the organizatio	nis box and st on n qualifies as a	op here. a publicly .
	instructions		-				

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 or if the organization failed to qualify under Part	Ш
If the organization fails to qualify under the tests listed below, please complete Part II \	

Secti	on A. Public Support			• •			
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the	-					
	organization's benefit and either paid		1				
	to or expended on its behalf		ļ				
5	The value of services or facilities					<u> </u>	
	furnished by a governmental unit to the				1		
	organization without charge		İ		}		
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						<u> </u>
	received from disqualified persons .						
ь	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.)				1		
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business				<u> </u>	•	
	activities not included in line 10b, whether						
	or not the business is regularly carned 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,	· · · · · · · · · · · · · · · · · · ·					
.5	and 12.)				ĺ		
14	First five years. If the Form 990 is for the	ne organization	a's first secon	d third fourth	or fifth tax :	par as a coatio	501(a)(2)
• •	organization, check this box and stop he	_			•		• • • •
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2011 (line 8			3. column (fl)		15	 %
16	Public support percentage from 2010 Sch					16	// %
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2011 (v line 13. colu	mn (fl)	17	%
18	Investment income percentage from 2010					18	//
19a	331/3% support tests-2011. If the organ						
	17 is not more than 331/2%, check this box	and stop here .	The organization	on qualifies as	a publicly supp	orted organizat	ion . ▶ 🖂
b	331/3% support tests - 2010. If the organiz						
	line 18 is not more than 331/3%, check this I	oox and stop h	ere. The organi	ization qualifies	as a publicly s	upported organ	ization
20	Private foundation. If the organization di						
				·			

Schedule A (I	chedule A (Form 990 or 990-EZ) 2011						
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. Also complete this part for any additional information. (See instructions).						
*							
*- 							
							
							
	······································						
- 							
							
		•••					

SCHEDULE D (Form 990)

Supplemental Financial Statements

201

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

Name of the organization Employer identification number WORLD BIBLE SCHOOL OF TULARE COUNTY 77-0236056 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 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . . Aggregate value at end of year 4 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 6 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 ☐ Yes ☐ No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat 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 Total number of conservation easements 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ 5 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 6 7 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 170(h)(4)(B) 8 9 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. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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.
- **b** If the organization elected, as permitted under SFAS 116 (ASC 958), 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:
- 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 (ASC 958) relating to these items:

Part	Organizations Maintaining	Collections of	Art, Hist	orical T	reasures,	or Ot	her Similar A	ssets (con	tinued)
3	Using the organization's acquisition, a collection items (check all that apply):								
а	☐ Public exhibition		d	Loan	or exchang	e prog	rams		
b	☐ Scholarly research		е	Other	r				
C	☐ Preservation for future generations	i							
4	Provide a description of the organizat XIV.	ion's collections	and expla	in how t	hey further	the org	anization's exe	mpt purpos	e in Part
5	During the year, did the organization assets to be sold to raise funds rather								□ No
Part	IV Escrow and Custodial Arra								
ı aı c	line 9, or reported an amoun	_	•	_	jui lizudori c	21 13 VV C	100 100 107	O 050, 1	aitiv,
1a	Is the organization an agent, trustee,				or contributi	ione or	other assets r	not	
Id	included on Form 990, Part X?								
								☐ Yes	□ NO
b	If "Yes," explain the arrangement in Pa	art XIV and comp	ete the to	llowing t	abie:			Amount	
						<u> </u>		Amount	
С	Beginning balance					10	 		
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amour		art X, line	21? .			.	. 🗌 Yes	☐ No
	If "Yes," explain the arrangement in Pa	art XIV.							
Par	V Endowment Funds. Comple		zation ar	swered					
		(a) Current year	(b) Pro	or year	(c) Two year	s back	(d) Three years ba	ck (e) Four ye	ears back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships		 						
e	Other expenditures for facilities and		<u> </u>						
•	programs		1]				,
f	Administrative expenses		 						
	End of year balance		 		 				
g		ha aumant year e	od bolono	a /lina 1a		\\ bald			
2	Provide the estimated percentage of the	ne current year e	nu balano	e (line 19	j, column (a))) neid i	as.		
a	Board designated or quasi-endowmer	N	90						
þ	Permanent endowment	%							
С	Temporarily restricted endowment ▶	%							
_	The percentages in lines 2a, 2b, and 2								
3a	Are there endowment funds not in the organization by:	e possession of the	ne organi	zation th	at are nelo a	ana aa	ministered for t		
	· ·								es No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organi						. .	. 3b	
4	Describe in Part XIV the intended uses						· · · · · · · · · · · · · · · · · · ·		
Part	VI Land, Buildings, and Equip	ment. See For	n 990, P	art X, lin	e 10.				
	Description of property	(a) Cost or o (investr			or other basis other)		Accumulated epreciation	(d) Book	/alue
1a	Land								
b	Buildings								
С	Leasehold improvements		-					-	
d	Equipment				3,044		751		2,293
e	Other								
Total.	Add lines 1a through 1e. (Column (d) m	nust equal Form 9	90. Part	C. column	n (B), line 10	(c).)			2,293

Part VII	Investments - Other Securities	. See Form 990, Part X	, line 12.	
(3	a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
	ıl derivatives			
	held equity interests			
(3) Other				
(A)				
(B)				
(C)			<u> </u>	
(D)			 .	
(E)	·····		 	
(F)				· · · · · · · · · · · · · · · · · · ·
(G) (H)				<u> </u>
(I)				
	(h) must sound Form 000, Part V, and (P) line 10)		 	 _
Part VIII	(b) must equal Form 990, Part X, col. (B) line 12.) ► Investments—Program Related	See Form 990 Part	Y line 13	
Fait VIII	(a) Description of investment type	(b) Book value	(c) Method of valua	ton.
	(a) Description of investment type	(b) Book value	Cost or end-of-year mark	
(1)	 			
(2)				
(3)			-	
(4)				
(5)				
(6)		.		
(7)			-	
(8)				
(10)				
	(b) must equal Form 990, Part X, col. (B) line 13.)			-
Part IX	Other Assets. See Form 990, Pa	art X. line 15.		
		a) Description		(b) Book value
(1)				
(2)				
(3)				-
(4)				
(5)				
(6)				
_(7)				
(8)		<u> </u>	<u></u>	
(9)				
(10)	(h)t (DOC Dest V	-1 (D) (in - 45)		·
Part X	umn (b) must equal Form 990, Part X, c		· · · · · · · · · · · · · · · · · · ·	
1.	Other Liabilities. See Form 990, (a) Description of liability	(b) Book value		
	I income taxes	(b) Book value		
(2)	Timoonie taxes		-	
(3)			_	
(4)			-	
(5)			-	
(6)			-	
(7)			-	
(8)			┥	
(9)			┥	
(10)			_	
(11)			┥	
	(b) must equal Form 990, Part X, col. (B) line 25.)		_	
	ASC 740) Footnote. In Part XIV, provide	the text of the footnote to	o the organization's financial stateme	nts that reports the
organizatio	n's liability for uncertain tax positions u	nder FIN 48 (ASC 740).		

Page

Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents	
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. Combine lines 3 and 9	10	
Part			um
1	Total revenue, gains, and other support per audited financial statements	1	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1
а	Net unrealized gains on investments		
b	Donated services and use of facilities	1	
С	Recoveries of prior year grants	1	1
d	Other (Describe in Part XIV.)	1	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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 4a		
b	Other (Describe in Part XIV.)	1	
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Re	eturn
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	_[
b	Prior year adjustments		
C	Other losses	_	
d	Other (Describe in Part XIV.)	_	
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	4	
b	Other (Describe in Part XIV.)		
_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	
Part			
Part V	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; I i, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also com dditional information.		
- 			

Schedule D (Fò		Page 5
Part XIV	Supplemental Information (continued)	
•••		
••••		

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" to Form 990,

2011 Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions. Inspection

	of the organization	COUNTY					dentification number
WORLD BIBLE SCHOOL OF TULARE COUNTY Part I General Information on Activities Outside the United States. Complete if the organic Form 990, Part IV, line 14b.						7-0236056 swered "Yes" to	
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?	organization					
2	For grantmakers. Describe assistance outside the Unite		the organizati	on's procedures for moni	toring the use o	of its gran	ts and other
3	Activities per Region. (The fo	ollowing Part	l, line 3 table o	can be duplicated if additio	nal space is need	ied.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity liste a program se describe specifi service(s) in	ervice, ic type of	(f) Total expenditures for and investments in region
(1)	Sub-Saharan Africa	NONE	none	Program services	Teaching Bible		157,656
(2)	South Asia	NONE	NONE	Program services	Teaching Bible		149,031
(3)		-					
(4)							
(5)							:
(6)							
(7)							
(8)	· · · · · · · · · · · · · · · · · · ·						
_(9)							
(10)							
(11)							
(12)						· ·	
(13)							
(14)							
(15)							
(16)							
(17)							
3a	Sub-total						306,687
b	Total from continuation sheets to Part I						

c Totals (add lines 3a and 3b)

306,687

Schedule F (Form 990) 2011

Part IV, Part III (a) Name of organization	, line 15, for ar can be duplica (b) IRS code section and EIN	Grants and Other Assistance to Organizations or El Part IV, line 15, for any recipient who received more th Part II can be duplicated if additional space is needed. The of the organization (c) Region (d) Purpose of grant	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answers Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed. The official can be duplicated if additional space is needed. The official can be duplicated if additional space is needed. The organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organization and EIV in the organizatio	ies Outside the L	or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, re than \$5,000. Check this box if no one recipient received more than \$5,000 ▶ ☐ ded. Ided. (a) Amount of (b) Manner of (a) Amount of (b) Description (cash grant cash grant cash grant (b) Method of (b) Amount of (b) Method of (b) Amount of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) M	nplete if the orgar ipient received mo (9) Amount of non-cash	ization a	ation answered "Yes than \$5,000 (h) Description of non-cash assistance
E	(if applicable)				disbursement	assistance	5	
(2)								
(3)								
(4)								
(5)								
(9)								
(7)								
(8)								
(6)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

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

3 Enter total number of other organizations or entities

8

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Part III

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash dlsbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Preacher support	Sub - Saharan Africa	29	62,700	62,700 Electronic trans	0	0 N/A	N/A
(2) Travel for preachers	Sub - Saharan Africa	မ	21,335	21,335 Check/on-line	0	0 N/A	N/A
(3) Taxis -become self support	Sub - Saharan Africa	10	57,525	57,525 Electronic trans	0	0 N/A	N/A
(4) Preacher support	Sub - Saharan Africa	10	7,050	7,050 Check	0	O N/A	N/A
(5) Postage	Sub - Saharan Africa	10	421	421 Western Union	0	0 N/A	N/A
(6) Disaster relief, orphanage	South Asia	275	155,256	155,256 Electronic trans	0	N/A	N/A
(7) Travel for preacher	South Asia	1	2,400	2,400 Check	0	O N/A	N/A
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)		_	-				
						Sot	Schedule F (Form 990) 2011

Part I	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
_	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	☐ Yes	☑ No
	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	☐ Yes	☑ No
	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	☐ Yes	☑ No
	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	☐ Yes	☑ No

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (i) (secounting method; amounts of investments vs. expenditures per region); Part II, line 1, daccounting method; and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).	Part V	Supplemental Information
		Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to
	*	
		······································

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Employer identification number

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

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

WORLD BIBLE SCHOOL OF TOLARE COUNTY	77-0236056
Part VI, Section A, Item 2	
Joel Coppinger and Claude Vice are brother-in-laws	
······································	·
Part VI, Section B, Item 11b	
A copy of Form 990 for the year 2011 was provided to each member of it's governing body for the	neir review, prior to filing the Form. Each
member read through the FORM 990 and any questions were discussed and resolved prior to fil	ing.
Part VI, Section B, Item 15	
The compensation of the director / treasurer is reviewed and approved by the other members of	the governing body. No other officers
are compensated and there are no other employees.	
Part VI, Section C, Item 19	
Form 990 and financial statements are made available to the public upon request.	

WORLD BIBLE SCHOOL OF TULARE COUNTY

Form 990, Year 2011

EIN: 77-0236056 Schedule 1

Form 990, Part III, Question 1

ORGANIZATIONS MISSION:

Our purpose and function is teach the Bible to anyone who is interested in learning it.

Form 990, Part III, Question 4a

ACHIEVEMENTS:

We achieve our "Mission" by printing, assembling, packaging, and shipping Bible correspondence courses, free of charge, to any person who is interested in studying the Bible. We assist them by grading the lessons and answering their questions. We also train and support preachers and follow up workers in foreign countries to further assist them in their studies.

During the year 2011 we accomplished the following:

Thousands of Bible correspondence courses were sent to students in foreign countries. The lessons are graded by our volunteer teachers. We have one church group in South Carolina whose teachers grade and mail out nearly 100,000 Bible correspondence courses annually.

Thousands of people learned and accepted what the Bible says regarding salvation and were baptized.

We work with a program in India and Ghana West Africa where preachers are becoming self supporting by operating taxis purchased with funds from our contributors.