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Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Service 2011 calender year, or tax year beginning 20 20 20 20 20 20 20 2		artment of mal Reven	the Treasury ue Service	► The organization may have to use a copy of this return to satisfy state reporting	ng require	ements	Inspection		
Address change Name chang	Ā	For the	2011 cale	ndar year, or tax year beginning , 2011, and ending			, 20		
Address change Name change Name change Name change Pote time (pr PO bot of that and delivered to street address) Recommend Street	В	Check if	applicable	C Name of organization Community Bible School		D Employ	er identification number		
Name change Institute return To Dood mail is not delivered to street address) Roon/Journal Tommosted							91-1275574		
Indicate return 19028 Mesiadow Lake Pid 360-558-6512			-			E Telephone number			
Terminated Cape frown, state or country, and 2IP + 4 Snohomsh, WA 98290-7273 Fall on the agroup return for efficient Ves No Application periodic Fall of the State of legal decided to the Policy No Application periodic Tax - swerring status 2016(e) Stotic) 1 fement no 4847(k)(1) c 527 Western 1 femont no			-	19028 Meadow Lake Rd			360-568-6512		
Appleation pending F Name and address of procept officer High Is that a group return for afficiants Ves No		Terminate	eď						
Application pending Fame and address of principal officer Greg Miller 19028 Meadrow Lake Rd Snohomsh, WA 99290 Moh) Are all affiliates in Carter No Tax-exempt status Soft(8) Soft(8		Amended	d return	Snohomish, WA 98290-7273	Į.	G Gross re	ceipts \$ 413191		
Tax-exempt status		Application	on pending		(a) Is this a	group return	for affiliates? Yes V No		
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Week home steparition Trait Association Other P Liver of formation 1985 Militate of legal domoire WA	ī	Tax-exen			If "No	o," attach a	list (see instructions)		
Summary Briefly describe the organization's mission or most significant activities: To propogate the gospel of Jesus Christ through having and facilitating Bible Conferences with like minded churches and organizations, holding Sunday evening church services with an emphasis on expository, teaching of the scriptures, having weekly Bible studies, and caring for the indigent in our community and in other countries. We are also movided in helping younger destitute women in Nepal by training and equipping them with sewing skills of the countries. We are also movided in helping younger destitute women in Nepal by training and equipping them with sewing skills of the countries. We are also movided in septiments of the governing body (Part VI, line 1a). 1 Number of voting members of the governing body (Part VI, line 1a). 2 Check this box P	J	Website:	. ► www		l(c) Group	exemption	number >		
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9					Prior Yea				
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 9c, 9c, 9c, 9c, 9c, 9c, 9c, 9c, 9	9								
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15 Salaries, other compensation, employee benefts (Part IX, column (A), line 1-1e) 10003 7562 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0 17 Other expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), line 11a-11d, 11f-24e) 109212 118083 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 153656 163852 19 Revenue less expenses. Subtract line 18 from line 12 24830 236724 20 Total assets (Part X, line 16) 110154 342478 21 Total liabilities (Part X, line 26) 12045 7643 22 Net assets or fund balances. Subtract line 21 from line 20 98109 334835 Part II Signature Block 12045 7643 Under penalties of penjury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer to based on all information of which preparer has any knowledge		4		d similar amounts paid (Part IX, Column (A), lines 1-3)					
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			Firm's ac		Phon	ne no	——————————————————————————————————————		
	Ma	y the IR	5 discuss	this return with the preparer shown above? (see instructions)			Yes No		

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Part		
	Check if Schedule O contains a response to any question in this Part III	<u>. U</u>
1	Briefly describe the organization's mission:	
	Our purpose is the propagation and dissemination of the gospel of Jesus Christ throughout the world by the promotion and support of evangelical endeavors and missionary activities as well as the strengthening of individual Christian's personal relationship with God. The	
	endeavors include Bible Conferences, Bible Studies, Church Services, Training programs, and Benevolence work	iese
	endeavois include blule Contretences, blule Studies, Charting and programs, and benevolence work	·
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	☑ No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	_
		✓ No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as meas expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 83467 including grants of \$0) (Revenue \$79175 We helped 33 different churches plan and facilitate 37 different Bible conferences 971 different people attended the conferences During	
	these conferences we provide devotionals, facilities, meals, bible teaching. Groups that attended include women's groups, men's groups	
	youth groups, church leadership, family camps, as well as mission groups	
		·
	•••••••••••••••••••••••••••••••••••••••	
4b	(Code:) (Expenses \$ 42093 including grants of \$0) (Revenue \$ See below	ı)
	We have a interdenominational Sunday Evening Service each week along with several Bible studies each week that are held in the home	
	of various individuals. Our Sunday Evening services average around 30 people with about 50 different people regularly attending. We a	lso
	have mid week bible studies for men and women held in various homes. We received \$33,996 in general offerings over the year which primarly came from our offerings received in our Sunday Evening Services along with revenue from some miscellaneous donors. Instruc	
	say not to include these amounts under Revenue since they were contributions	LIUIS
	Say not to module these amounts ander nevertee since they were contributions	
4c	(Code.) (Expenses \$ 38292 including grants of \$ 0) (Revenue \$ See below	,)
	We are involved with several ministries who are likeminded and are preaching the gospel of Christ in South Asia and in	,
	particular Nepal Part of our outreach in Nepal includes supporting children in orphanages, a rescue and training center for young	
	woman who are destitute and uneducated We support 10 young women at a time for a 4 month period and help them by providing food	
	and medical care along with training them to be seamstresses. Total woman trained in 2011 totalled 30. We have now taken 80 women	
	the program and most have become successful in having their own business and many have come to Christ In 2011 we recieved \$271,	
	in offerings to support these various ministries with the majority for our work in Nepal. Donations are large this year due to receiving a la	rge
	one time donation of \$237,000 from an estate in December of 2011. We also minister to the indigent in our community by giving direct cash assistant to single moms, elderly, and families who are struggling	
	The state of the s	
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 163852	
	100006	

Part	Checklist of Required Schedules			
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	Yes	No
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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	2	<u>v</u>	_
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? If "Yes," complete Schedule C, Part II	4		~
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		>
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		·
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		٧
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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		•
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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	11a	•	
	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	11b		~
	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		_
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	~	_
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11e		~
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		~
	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		~
14 a		14a		~
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	V	
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	,	
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		,
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		~
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		v
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
		Forr	n 990	(2011)

Part I	Checklist of Required Schedules (continued)			
	D. I. I		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		,
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		,
	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		,
	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		v
	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? <i>If</i> "Yes," <i>complete Schedule L, Part I</i>	24d 25a		v
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 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		,
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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		~
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		,
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		V
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		,
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		~
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		,
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		,
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		V
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		v
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,			
38	Part VI	37		_
	19? Note. All Form 990 filers are required to complete Schedule O	38 For	n 990	(2011)

-			-	
Part				
	Check if Schedule O contains a response to any question in this Part V	• •	Yes	No
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		103	110
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1		
b	Did the organization comply with backup withholding rules for reportable payments to vendors and	ł		
С	reportable gaming (gambling) winnings to prize winners?	1c	,	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	''		-
Za				Ì
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 5 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	,	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	<u> </u>	
20	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	i	·
3a _	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	 	<u> </u>
b 4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		 	
44	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: ▶			
b	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	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		V
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	aifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		~
ь	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		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	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		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
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	_		1
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		-	
a	Did the organization make any taxable distributions under section 4966?	9a	 	-
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		-
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a		1		1
b		┨		
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them.)		1	1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	}
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		·	<u> </u>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	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.			
b	Enter the amount of reserves the organization is required to maintain by the states in which	1	1	
	the organization is licensed to issue qualified health plans]		
c	Enter the amount of reserves on hand	<u> </u>		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
h	If "Yes " has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		

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. Schedule O contains a response to any question in this Part VI	See ins	struct	
Secti	ion 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 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.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	v	
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 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	5		V
6 7a	Did the organization have members or stockholders?	7a		v
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	7	-
ь 9	Each committee with authority to act on behalf of the governing body?	8b 9		,
Section	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		~
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	~	
b 12a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	> >	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c	~	
13	Did the organization have a written whistleblower policy?	13		~
14 15	Did the organization have a written document retention and destruction policy?	14		~
а	The organization's CEO, Executive Director, or top management official	15a		"
b	Other officers or key employees of the organization	15b		~
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	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		
Section	on C. Disclosure	,		1
17 18	List the states with which a copy of this Form 990 is required to be filed Mashington State does not require Fo Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.			
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.			olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: • Green Miller, 19038 Magdow Lake Rd Spohomish, Wa 98390, 360-568-1147	of the	,	

_	_
Page	-

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

ection 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	anv relate	d orga	anız	atio	n c	ompe	nsa	ited any curren	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per week	(do n box, t	ot ch unles er and	Pos neck sspe dad	tion more rson irecte	than o	one an ee)	(D) Reportable	(E) Reportable compensation from related	(F) Estimated
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Gregory S Miller, President, Treasurer	60	,		,				0	0	0
19028 Meadow Lake Rd, Snohomish, Wa (2) Teresa A Miller, Secretary	40	,		,				0	0	0
19028 Meadow Lake Rd, Snohomish, Wa (3) Mark D Barrett, Vice President 8510 E Meadow Lake Dr, Snohomish, WA	20	~		,				0	0	0
(4)										
(5)										
(6)										
(7)										
(8)										
(9)								_		
(10)		_								
(11)				_						
(12)		ļ								
(13)										
(14)	-									

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mplo	yees			lighe	st C	ompensated E	mployees (conti	nued)		
	(A) Name and title	Name and title Average hours per week (describe hours for related organizations in Schodule) Properties of the person is both and director/funded organizations in Schodule Properties of the person in Schodule Properties of the person is both and director and a director/funded organization from the organizations in Schodule Properties of the person is both and the person is both and the properties of the person is both and the properties person is both and director is both and director in the properties of the person is both and director is both and the properties person is both and director is both and director in the properties of the properties o	arr	(F) timated tount of									
		(describe hours for related organizations in Schedule	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations	com fro orga	other bensation om the anization I related nization	n I
(15)													
(16)													
(17)													
(18)											 		
(19)													
(20)											 		
(21)						,							
(22)							_				<u> </u>		
(23)											 		
(24)													
(25)											 		
1b c	Total from continuation sheets to Part	VII, Sectio				 	•	<u> </u>	0	0			0
d 2	Total number of individuals (including but	not limited	to th					e) w		<u> </u>	00 of		0_
3	Did the organization list any former of	ficer, direc	tor, o							est compensat	ed 3	Yes	No
4													v
5										ation or individu			~
	n B. Independent Contractors												
1													ax
		ress								ervices	(C) Compen		
None													
													
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who			

Part	VIII	Statement of Reve	enue	·				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats sta	1a	Federated campaigns	s . 1	a				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	10	b]	[
S, E	С	Fundraising events	1	c]			
ar L	d	Related organizations	s 10	d]			
S, E	е	Government grants (con	ntributions) 1	Э				
rior S	f	All other contributions, g	ıfts, grants,					
å å		and similar amounts not inc	cluded above 1	f 303364				
E O	g	Noncash contributions include	ded in lines 1a-1f:	\$ 2282		ľ		
<u>8 €</u>	h	Total. Add lines 1a-1	<u>f </u>	<u>. , ▶</u>	305646			
Ē				Business Code				•
Ver	2a	Bible Conferences		900099	79175	79175		
č	b							
ξ̈	С			-			p-,	
Se	ď							-
La La	е							
Program Service Revenue	f	All other program sen						
	g	Total. Add lines 2a-2	it	>	79175			 -
	3	Investment income and other similar amo						
	4	Income from investmen	•		39			39
	5	Royalties		•		<u> </u>		
		noyanies	(i) Real	(ii) Personal				
	6a	Gross rents .	1320	_ 				
	b	Less: rental expenses	494			ļ		
	С	Rental income or (loss)						
	d	Net rental income or (8258			8258
	7a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory		13941				
	b	Less cost or other basis	ļ					
		and sales expenses .		7398	i			
	C	Gain or (loss) .		6543				
	d	Net gain or (loss) .		. <u>, </u>	6543			6543
ō	0.	Grana innama from fu	andraioine					
en l	8a	Gross income from fu events (not including \$	inuraising					
Revenue		of contributions reporte	ed on line 1c)					
		See Part IV, line 18 .		a				
Other	b	Less: direct expenses	s	b				
U		Net income or (loss) fi		g events . >				
		Gross income from ga						
		See Part IV, line 19		a				
		Less: direct expenses		b				
		Net income or (loss) f						
	10a	Gross sales of in		•				
		returns and allowance				i		
		Less: cost of goods s		b 275	- -			
	С	Net income or (loss) fi		Business Code	915			915
	11a	iviscellarieous n		Dualited Could				
	b							
	C					-		
	d	All other revenue .						
	е	Total. Add lines 11a-						
	12	Total revenue. See in		<u>.</u> . ▶	400576	79175		15755

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).

1044	red to complete columns (B), (C), and (D).				
	Check if Schedule O contains a respons				
	ot include amounts reported on lines 6b, 7b, b, 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	0		-
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	7452	7452		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the		Ì		
	United States. See Part IV, lines 15 and 16	30755	30755		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
	trustees, and key employees	0	. 0	None	None
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				Ì
	persons described in section 4958(c)(3)(B)	0	0		
7	<u>- 1</u>	6613	6613		
7 8	Other salaries and wages	0013	0013		
0	section 401(k) and 403(b) employer contributions		_		
_	<u> </u>	0	0		
9	Other employee benefits	0	0		
10	Payroll taxes	949	949		<u> </u>
11	Fees for services (non-employees):	_			
a	Management	0	0	.	
b	Legal	0	0		<u> </u>
C	Accounting	85	85		
đ	Lobbying	0	0		
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0	0		
g	Other	0	0		
12	Advertising and promotion	0	0		
13	Office expenses	1162	1162		
14	Information technology	0	0		
15	Royalties	0	0		
16	Occupancy	84028	84028		
17	Travel	287	287		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0		
19	Conferences, conventions, and meetings .	0	0		
20	Interest	0	0		
21	Payments to affiliates	0	0_		
22	Depreciation, depletion, and amortization .	11074	11074		
23	Insurance	2647	2647		
24	Other expenses Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column	1			
	(A) amount, list line 24e expenses on Schedule O)				
а	Groceries - Conferences	8623	8623		
b	Phone	2109	2109		
С	Supplies	2186	2186		
d	Repairs- Equipment	2806	2806		
е	All other expenses Other Miscellaneous	3076	3076		
25	Total functional expenses. Add lines 1 through 24e	163852	163852		
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				
	following SOP 98-2 (ASC 958-720)				1

Part 2	Balance Sheet	1	· · · · · · · · · · · · · · · · · · ·	
		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	29698	1	254028
2	Savings and temporary cash investments	1101	2	1127
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	•		
2	employees' beneficiary organizations (see instructions)		6	
7	Notes and loans receivable, net		7	
ξ 8	Inventories for sale or use	1701	8	1547
9	Prepaid expenses and deferred charges		9	
10a				
	other basis. Complete Part VI of Schedule D 19719	3		
l t	Less: accumulated depreciation 10b 11141	7 77654	10c	85776
11	Investments—publicly traded securities		11	
12	Investments—other securities See Part IV, line 11		12	
13	Investments-program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	110154	16	342478
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	· · · · · · · · · · · · · · · · · · ·
21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
<u>8</u> 22	Payables to current and former officers, directors, trustees, key			
	employees, highest compensated employees, and disqualified persons.			
22	Complete Part II of Schedule L		22	
- 20	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties	8545	24	4643
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	2000
26		3500 12045	25 26	3000 7643
26	Total liabilities. Add lines 17 through 25		20	7,040
<u> </u>	lines 27 through 29, and lines 33 and 34.	·		
27	Unrestricted net assets	İ	27	
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
5 29	Organizations that do not follow SFAS 117, check here ▶ ☑ and		 	
-	complete lines 30 through 34.			
5 2 30	Capital stock or trust principal, or current funds	-	30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
27 28 29 30 31 32 33	Retained earnings, endowment, accumulated income, or other funds.	98109	32	334835
33	Total net assets or fund balances	98109	33	334835
34	Total liabilities and net assets/fund balances	110154	34	342478

om 9	90 (2011)				Pa	ıge IZ
Par	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI		<u> </u>	<u> </u>	<u>.</u> .	
		,				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			40	0576
2	Total expenses (must equal Part IX, column (A), line 25)	2			16	3852
3	Revenue less expenses. Subtract line 2 from line 1	3			23	672 <u>4</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			9	8109
5	Other changes in net assets or fund balances (explain in Schedule O)	5	(Roun	dıng)		+2
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,					
_		6			33	<u>4835</u>
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		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting the prior of the prior	ain 1	n			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		. 1	2a		~
b	Were the organization's financial statements audited by an independent accountant?		. [2b		~
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	rsigh	ıt [
	of the audit, review, or compilation of its financial statements and selection of an independent account	ant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, expl Schedule O.	aın ı	n [
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year issued on a separate basis, consolidated basis, or both:	wer	e			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth i	n			
-	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 underg	o th	e l			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audit	lits	[3ь		
				Form	990	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Employer identification number Name of the organization 91-1274474 Community Bible School 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 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: 5 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) ☑ An organization that normally receives. (1) more than 331/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 c Type III-Functionally integrated d Type III-Other **b** Type II e 🔲 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) If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . 11g(ni) Provide the following information about the supported organization(s). (ii) EIN (iv) Is the organization (v) Did you notify (vii) Amount of (i) Name of supported (iii) Type of organization (vi) Is the the organization in col (i) of your (described on lines 1-9 organization governing document? (i) organized in the above or IRC section support? (see instructions)) Yes No Yes No Yes (A) (B) (C) (D) (E) **Total**

Schedu	ile A (Form 990 or 990-EZ) 2011						Page 2
Part	Support Schedule for Organiza	tions Desc	ribed in Sect	ions 170(b)(1)(A)(iv) and	170(b)(1)(A)(v	i)
	(Complete only if you checked the						alıfy under
	Part III. If the organization fails to	qualify und	er the tests lis	sted below, p	<u>lease comple</u>	ete Part III.)	
	on A. Public Support	41000	7.2000	1 (1000	1 1 2 2 2 2 2	1 () 22(1	
	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	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						
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.						
	on B. Total Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4			<u> </u>	<u> </u>		
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						
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for th	•	•		•		on 501(c)(3)
 	organization, check this box and stop her			· ·	<u> </u>		
<u> 14</u>	on C. Computation of Public Suppor Public support percentage for 2011 (line 6			1 column (fl)		14	%
15	Public support percentage from 2010 Sch					15	<u> </u>
16a	331/3% support test—2011. If the organiz	ation did not	check the box	on line 13, and	d line 14 is 33¹		
	box and stop here. The organization qual						▶ ┌
b	331/3% support test—2010. If the organ check this box and stop here. The organi	ization did no	ot check a box	on line 13 or	16a, and line	e 15 is 33¹/3% 	or more,
17a	10%-facts-and-circumstances test – 20 10% or more, and if the organization meet Part IV how the organization meets the "fa organization	ets the "facts-	and-circumsta	nces" test, che	eck this box ar	nd stop here. E	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization m	ion meets the eets the "fact	e "facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check th he organizatio	nis box and st in qualifies as a	op here a publicly
	supported organization						. ▶ [

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

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 II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

Cardi	in the organization rails to quality	under the tes	sts listed bek	w, please co	inplete Fart i	1.)	
	on A. Public Support	(-) 0007 T	(L) 0000	(-) 0000	(4) 0040	(-) 0011	/O Total
_	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						
2	received (Do not include any "unusual grants") Gross receipts from admissions, merchandise	61948	55321	55048	80331	** 68646	321294
2	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	69438	102946	91983	92975	79175	436517
3	Gross receipts from activities that are not an	1		i			
	unrelated trade or business under section 513	589	916	264	923	7458	10150
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	o	0	0	0	. 0	0
6	Total. Add lines 1 through 5	131975	159183	147295	174229	155279	767961
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	27527	25079	6825	27420	20059	106910
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	1036	10094	7673	7829	3920	30552
С	Add lines 7a and 7b	28563	35173	14498	35249	23979	137462
8	Public support (Subtract line 7c from						
	line 6.)	į					630499
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	131975	159183	147295	174229	155279	767961
10a	Gross income from interest, dividends,						
	payments received on secunties loans, rents,						
	royalties and income from similar sources .	67	84	1789	4182	8297	14419
b	Unrelated business taxable income (less		-				
	section 511 taxes) from businesses						
	acquired after June 30, 1975	o	0	ol	0	ol	00
С	Add lines 10a and 10b	67	84	1789	4182	8297	14419
11	Net income from unrelated business					·	
	activities not included in line 10b, whether						
	or not the business is regularly carned on	5948	4688	3200	75	0	13911
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	О	0	o	0	0	0
13	Total support. (Add lines 9, 10c, 11,			•			
	and 12.)	137990	163955	152284	178486	163576	796291
14	First five years. If the Form 990 is for the	e organization	's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop her	re					▶ □
Secti	on C. Computation of Public Suppor	t Percentage	е				
15	Public support percentage for 2011 (line 8	3, column (f) di	vided by line 1	3, column (f))		15	79 18 %
16	Public support percentage from 2010 Sch	edule A, Part	III, line 15 .		<u></u>	16	77 08 %
Secti	on D. Computation of Investment Inc						
17	Investment income percentage for 2011 (17	1 81 <u>%</u>
18	Investment income percentage from 2010					18	73_%
19a	331/3% support tests-2011. If the organi	zation did not	check the box	on line 14, ar	nd line 15 is m	ore than 331/39	%, and line
	17 is not more than 331/3%, check this box						
b	331/3% support tests - 2010. If the organiz						
	line 18 is not more than 331/3%, check this t						
20	Private foundation. If the organization die	d not check a l	box on line 14	, 19a, or 19b, c	heck this box	and see instru	ctions 🕨 🗌

Part IV	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
** PAGE 3 I	LINE 1 - Unusual Grants - On December 2, 2011 we recieved a one time contribution from an estate in the amount of \$237,000 00 which ha
	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions). GE 3 LINE 1 - Unusual Grants - On December 2, 2011 we received a one time contribution from an estate in the amount of \$237,000.00 when included in the amount shown on Line 1 Part III.
	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions). PAGE 3 LINE 1. Unusual Grants - On December 2, 2011 we received a one time contribution from an estate in the amount of \$237,000.00 w of been included in the amount shown on Line 1 Part III.
Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions). PAGE 3 LINE 1 - Unusual Grants - On December 2, 2011 we received a one time contribution from an estate in the amount of \$237,000.00 not been included in the amount shown on Line 1. Part III.	
	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions). PAGE 3 LINE 1. Unusual Grants - On December 2, 2011 we received a one time contribution from an estate in the amount of \$237,000 00 who been included in the amount shown on Line 1 Part III.
Instructions). **PAGE 3 LINE 1 - Unusual Grants - On December 2, 2011 we received a one time contribution from an estate in the amount of \$237,000.00. **not been included in the amount shown on Line 1 Part III. **Note: The image is a state of the amount shown on Line 1 Part III. **Note: The image is a state of the amount shown on Line 1 Part III. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount of \$237,000.00. **Note: The image is a state of the amount o	
Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any add instructions). ***PAGE 3 LINE 1 - Unusual Grants - On December 2, 2011 we received a one time contribution from an estat not been included in the amount shown on Line 1 Part III	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

Open to Public Inspection

Employer identification number

Community Bible School 91-1275574 Part I 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) . . 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 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 Part II 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 an historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space 2 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 a Total number of conservation easements 2a 2b **b** Total acreage restricted by conservation easements . . c 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 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 170(h)(4)(B) 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. Part III 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 (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: **b** Assets included in Form 990, Part X .

Page	2

Part	III Organizations Maintaining C	ollections of	Art, His	torical T	reasures,	or Ot	her Similar A	ssets (c	ontinued)
3	Using the organization's acquisition, ac collection items (check all that apply):	cession, and of	ther reco	rds, chec	k any of the	e follow	ring that are a	significan	nt use of its
	_			<u> </u>					
a	Public exhibition				or exchang				
b	Scholarly research		e	□ Otriei					
С 4	Preservation for future generations Provide a description of the organization	n'e collections	and eval	ain how t	hav furthar	the ora	anization's eye	mnt nur	ose in Part
4	XIV.	or s conections	and expir	alli ilow ti	ney luitilei	ine org	allization 5 exc	anpt purp	ose iii i ait
5	During the year, did the organization s	olicit or receive	donation	s of art,	historical tr	easures	s, or other simi	lar	
	assets to be sold to raise funds rather the								es 🗌 No
Part	IV Escrow and Custodial Arran	gements. Co	mplete i	f the org	anization a	answer	ed "Yes" to F	orm 990	, Part IV,
	line 9, or reported an amount								
1a	Is the organization an agent, trustee, or								
	included on Form 990, Part X?							· 📙 Y	'es 🗌 No
Ь	If "Yes," explain the arrangement in Par	t XIV and compl	ete the fo	ollowing to	able:				
							,	Amount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount	on Form 990, P	art X, line	21? .				. 🔲 Y	es 🗌 No
b	If "Yes," explain the arrangement in Par	t XIV.		-					
Par	V Endowment Funds. Complet								
		(a) Current year	(b) Pn	or year	(c) Two year	s back	(d) Three years ba	ck (e) Fou	ır years back
1a	Beginning of year balance								
b	Contributions								
C	Net investment earnings, gains, and		1						
	losses							_	
þ	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance		<u> </u>		L				
2	Provide the estimated percentage of the		nd baland	e (line 1g	i, column (a)) held a	as:		
а	Board designated or quasi-endowment		%						
ь	Permanent endowment ▶	%							
С	Temporarily restricted endowment ▶	%	2001						
•	The percentages in lines 2a, 2b, and 2c				الملمط مسماح		ministered for t	ho	
3a	Are there endowment funds not in the organization by.	possession of the	ne organi	zation tri	at are neid	and au	ministered for i	ıı i e	Yes No
	•							. 3a(i)	
	(i) unrelated organizations							3a(ii	
	(ii) related organizations	tions listed as a	· · ·	 on Sahad	 ulo P2			3b	'
ь 4	Describe in Part XIV the intended uses							. 00	
Part									
Ган	Description of property	(a) Cost or o		T	or other basis	(c) /	Accumulated	(d) Bo	ok value
	Description of property	(investr			ther)		epreciation	(4) 50	
1a	Land			1					
b	Buildings			ļ					
С	Leasehold improvements		_	ļ <u></u>	80075		15179		64896
d	Equipment				117118		96238		20880_
<u>e</u>	Other		20.5	<u> </u>	(D) !! ::	37.11			
<u>Total.</u>	Add lines 1a through 1e. (Column (d) mu	ist equal Form 9	90, Part	x, columr	n (B), line 10)(c).) .			85776

Part VII Investments—Other Securities	See Form 990. Part X. lir	ne 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other	-	
(A)		· · · · · · · · · · · · · · · · · · ·
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(1)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12) ▶		
Part VIII Investments—Program Related	J. See Form 990, Part X, II	ne 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX Other Assets. See Form 990, Pa	ort X line 15	
	a) Description	(b) Book value
(1)	· . · . ·	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, c		
Part X Other Liabilities. See Form 990,		
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) Deposits on upcoming conferences	1900	
(3) Mobile Home Rental Deposit	1100	
(4) (5)		
(6)		
(7)	 	
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)	3000	
		e organization's financial statements that reports the
organization's liability for uncertain tax positions u		- · · · · · · · · · · · · · · · · · · ·

	•	
Schodu	le D (Form 990) 2011	Page
	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Staten	
	Total revenue (Form 990, Part VIII, column (A), line 12)	1
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		L
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains on investments	
b	Donated services and use of facilities	
C	Recoveries of prior year grants	-
d	Other (Describe in Part XIV.)	-
e	Add lines 2a through 2d	
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
-	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
a	Other (Describe in Part XIV.)	-
b	Add lines 4a and 4b	- _{4c}
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	
Part		
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:	
a	Donated services and use of facilities	
b	Prior year adjustments	7
c	Other losses	7
d	Other (Describe in Part XIV.)	†]
e	Add lines 2a through 2d	7 2e
3	Subtract line 2e from line 1	, 3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIV.)	7
c	Add lines 4a and 4b	7 4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
Part		
Comp Part V	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; 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 conditional information.	Part IV, lines 1b and 2b; nplete this part to provide
-		

Schedule D (For	orm 990) 2011	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, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Comm Par	t I General Information Form 990, Part IV, line		es Outside	the United States. Comp	olete if the organiza		274474 ered "Yes" to
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?	organization gibility for the				vard the	☑Yes □No
2	For grantmakers. Describe assistance outside the Unite		he organizati	on's procedures for monit	toring the use of		
3	Activities per Region. (The fo	llowing Part	l, line 3 table o	can be duplicated if addition	nal space is needed	i .)	
	(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 listed in a program servic describe specificity service(s) in regi	n (d) is ce, ppe of	(f) Total expenditures for and investments in region
(1)	South Asia - Nepal	0	0	Grants - missions work	Indigent Families		2325
(2)	South Asia - Nepal	0	0	Grants - missions work	Orphan's Education		12310
(3)	South Asia - Nepal	0	0	Grants - missions work	Train Indigent Wome	en	15220
(4)	South Asia - Nepal	0	0	Grants - missions work	Orphanage		900
(5)					.,,,,,		
(6)							
(7)							
(8)							
(9)		'					
(10)							· · ·
(11)							
(12)					<u> </u>	-	.
(13)						-	
(14)							
(15)							
(16)							
(17)							
	Sub-total	0	0				30755
D	Total from continuation						

30755

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ▶ □ Schedule F (Form 990) 2011
Part || Grants a

]									ĺ				}
	(f) Method of valuation (book, FMV, appraisal, other)															•	
	(h) Description of non-cash assistance																
	(g) Amount of non-cash assistance	0	0														
	(f) Manner of cash disbursement	Wire Transfers	Wire Transfers														
	(e) Amount of cash grant	15220	006														
pace is needed.	(d) Purpose of grant	Training Indigent	Care of orphans														
Part II can be duplicated it additional space is needed.	(c) Region	South Asia	South Asia														
an be duplica	(b) IRS code section and EIN (if applicable)																
Part II c	1 (a) Name of organization	£	(2)	(2)	(4)	(9)	(9)	(2)	(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

Enter total number of other organizations or entities

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Schedule F (Form 990) 2011

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Schedule F (Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

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(h) Method of valuation (book, FMV, appraisal, other)																			Schedule F (Form 990) 2011
(g) Description of non-cash assistance																			Sch
(f) Amount of non-cash assistance	0	0																	
(e) Manner of cash disbursement	Wire Transfers	Wire Transfers																	
(d) Amount of cash grant	12310	2325																:	
(c) Number of recipients	4	2																	
of grant or assistance (b) Region (c) Number of recipients	South Asia	South Asia																	
(a) Type of grant or assistance	(1) Orphan College Tutton	(2)Money to Indigent families	(3)	(4)	(5)	(9)	(1)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	

Page	1

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Schedule	F IFOM	990)	201	

art	le F (Form 990) 2011 IV Foreign Forms		Page
ui t	1 Grough 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
2	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
4	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
5	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
6	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

Schedule F (Form 990) 2011

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 provide any additional information (see instructions).

Part I Line 1- Monitoring of funds - Our primary method of monitoring the funds is through field trips. One or two times a year people from our ministry
visit the organizations that we support as well the individuals which we help financially. These visits usually include all the individuals and
organizations that we help support. Field visits include the graduation ceremonies of the destitute woman that have been taught to sew
in the four month training course along with attending the baptisms of those who become followers of Christ. These visits are usually 3 weeks long
and involve the visiting of past graduates from the training school. We also receive annual financials from the organizations and the verification
of them receiving funds each month
Part II - Grants and Other Assistance - Line 1(d) - Cash Method - This organization takes 10 destitute, uneducated young women from villages and trains
them to be seamstresses over a period of 4 months. This training includes room and board, medical help, classroom instruction, Bible lessons.
basic math and some business skills. They then return to their villages and support themselves through failoring work. The second organization
that we send funds too is an orphanage. We paid for school costs and school uniforms for eight of the children that are in their home
Part III - Grants and Other Assistance to Individuals - Line 1(d) - Cash Method - We provide tuition for 4 young adults who were once in an orphanage
and are now attending university. We also help the family who took in these four children after the orphanage they had been in was closed and we
also send a small amount of money to a family which is extremely very poor
Part I, II, III - Selection of Organizations and Individuals We Support
The organizations which we send money directly too have leadership which are followers of Christ and agree with our purpose, mission
and doctrinal statement. Someone from our ministry must have also personally met these individuals while being in Nepal before we ever consider
supporting them These leaders did not seek out our financial support but rather were presented to the board from various individuals from our
ministry who have visited Nepal on a regular basis and could testify that they were dedicated followers of Christ. The individual orphans which
we pay tuition for are also known personally as well as the family which took them in after the orphanage they were in, closed. The parents are
committed followers of Christ and the father pastors part time. Our emphasis is finding individuals who are committed followers of Christ rather
than finding certain kinds of organizations. This follows our main purpose of disseminating the gospel of Christ through various avenues

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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OMB No 1545-0047

Open to Public Inspection

Employer identification number

%□ (h) Purpose of grant or assistance 0 to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. ✓ Yes 91-1275574 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) • Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table Part II can be duplicated if additional space is needed (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance (<u>0</u> 1 (a) Name and address of organization -----or government Community Bible School (1) None Part II Part 1 <u></u> 2 8 € 3 9 Ε (8) <u></u> (10)

Schedule I (Form 990) (2011)

Cat No 50055P

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

Schedule (Form 990) (2011)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

			!		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Direct Bill Paying Assistance to Indigent	2	3902			
2 Direct Cash Rent Assistance to Indigent	-	3550			
4					
ro.					
9					
7					
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	te this part to pre	ovide the information	n required in Part I,	line 2, and any other ado	litional information.
Part I Line 1& 2 - Montoring of funds - All individuals receiving dire	ng direct cash assist	ince are indigent and atte	and our Sunday Evening	Church Services and are appr	ect cash assistance are indigent and attend our Sunday Evening Church Services and are approved by the governing board prior
to receiving any direct cash assistance. These approvals are then recorded in the special board minute meetings. Moneys given are for specific purposes and paid directly for that purpose in	e then recorded in the	special board minute mo	eetings Moneys given	are for specific purposes and pa	iid directly for that purpose in
most cases. Governing board members along with other people in		e involved personally with	h the individuals on a w	eekly basis and are completely	the ministry are involved personally with the individuals on a weekly basis and are completely aware of each individuals
financial situation which is our primary method of monitoring. Direct bill paying is by itself a one time monitored event	Direct bill paying is	by itself a one time monit	tored event		
		1 1 1 1 1 1 1 1 1 1			
Part III Line 1- Direct bill paying is where the indigent individual has certain bills which need to be paid in order for them to financially survive. Money is not given directly to the individual but	ual has certain bills w	hich need to be paid in o	rder for them to financia	ly survive Money is not given	drectly to the individual but
paid directly to whomever the bill is owed to. Both recipients were one time events in the year 2011	s were one time even	s in the year 2011			
٠					
Part III Line 2 - Direct Cash Assistance to Indigent - This money is	ney is paid directly to	paid directly to the individual and designated as partial payment of monthly rent	nated as partial paymen	of monthly rent	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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.

2011 Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Community Bible School

990 or 990-EZ. Inspection

Employer identification number

91-1275574

Form 990 Page 6 Part VI Section A Governing Body and Management - Line 2
Greg Miller (officer/director) and Teresa Miller (officer/director) - family relationship Mark Barrett (officer/director), Greg Miller (officer/director) and
Teresa Miller (officer/director) along with another individual (who is not part of the organization or related in any manner to any of the officers) are in a
business relationship
Form 990 Page 6 Part VI Section B - Policies - Line 11 a, b - A copy of Form 990 is presented to each board member for review A special
board meeting is then convened for the purpose of having the return approved by the board. The treasurer goes over the return explaining each item
and answers any questions during that meeting and If any corrections are needed to be made, they are done at which time the board approves the
return and it is recorded in the board minutes. In addition the financial statements used in preparing the return are reviewed and approved by the
board prior to the return being filled out
Form 990 Page 6 Part VI Line Section B Line 12a, b, c - Our Conflict of interest policy includes officers, board members, and any related
party of those individuals, whether by family relation or business relation, who may potentially benefit financially from a decision being made
by that officer or board member. Any officer or board member who finds himself or herself in a position of a conflict of interest must excuse themselves.
from that decision making process Any conflicts of interest are to be addressed as they occurr and the governing board be made aware of
these from the individuals at that point in time. Because we are a small organization and know each other personally, any conflict of
Interest issues are always known by all the members of the board
Form 990 Page 6 Part VI Section C - Disclosure Line 19 - Upon request, we provide a copy of our form 1023, form 990, conflict of interest policy and
our annual financial statements. We also present to our Sunday Evening Church Service our annual financial statements each year
Form 990 Page 7 Section A Officers, Directors, Trustees, Key Employees, and Highly Compensated Employees Line 1 Column B
Estimated hours do not include any hours for any related organizations since we do not have any
Form 990 Page 9 Part VIII Statement of Revenue Line 1f - This amount includes a one time gift from an estate in December 2011 for \$237,000 00

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization	Employer identification number
Community Bible School	91-1275574
Form 990 Page 9 Part VIII Line 2a - Business Code 900099 - We partner with various churches and other ministric	es which are likeminded by hosting
these groups at our facilities for gospel meetings, Bible conferences, missionary training, leadership meetings, and	evangelistic meetings. We work
with these groups in spreading the gospel of Christ (37 different churches and ministries in 2011) by providing facili	ties, sleeping quarters, meals,
devotionals, and Bible teachings requested by each of these groups. Our program service includes education, faci	lities, administrative help, meals,
and evangelism I could not find any single category that seemed to include all of these	
Form 990 Part IX Statement of Functional Expenses - Column C - Since all of our expenses are directly related to	running our program services we
did not include any amounts in Column C All wages are directly related to our program services	
Form 990 Page 11 Part X Balance Sheet Line 1 - Cash - Non-interest-bearing - We received a one time substantial	deposit from an estate in
December 2011 of \$237,000 which is the reason for the substantial difference in Cash balances from the beginning	ng of the year to the end of the year
Form 990 Page 11 Part X Balance Sheet Line 32 - Retained Earnings, Endowments, Accumulated Income, or othe	r funds
This amount includes the one time gift we received in December 2011 for \$237,000 00 from an estate and this is the	ne reason that the amount
nas substantially increased from the beginning of the years	
	····

Form **4562**

Depreciation and Amortization(Including Information on Listed Property)

OMB No 1	1545-0172
20	11

Department of the Treasury Internal Revenue Service (99)

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No 179

Name	(s) shown on return		Busine	ess or activity to w	hich this form relat	es	Ident	ifying number
Comr	nunity Bible School		Form	990 Part IX Stat	ement of Function	onal Expenses Line 22		91-1275574
Par	t I Election To	Expense Cer	tain Property Un	der Section	179			
	Note: If you	have any liste	d property, compi	ete Part V be	efore you con	nplete Part I.		
1	Maximum amount (s	see instructions	s)				1	
2	Total cost of section	179 property	placed in service (se	ee instructions	3)		2	
3	Threshold cost of se	ection 179 prop	erty before reduction	on in limitation	(see instruction	ons)	3	
4	Reduction in limitati	on. Subtract lin	ne 3 from line 2. If ze	ero or less, ent	ter -0		4	
5	Dollar limitation for						, 🗀	
	separately, see instr	uctions					5	
6	(a) De	scription of propert	у	(b) Cost (busi	ness use only)	(c) Elected cost		
•		· · · · · ·	-					
7	Listed property. Ent	er the amount t	from line 29		7			
	Total elected cost of					7	8	
9	Tentative deduction						9	
10	Carryover of disallov						10	
11	Business income limit	11						
	Section 179 expens	12						
	Carryover of disallover Do not use Part II					13	•	
Par	t II Special Depr	reciation Allov	wance and Other	Depreciation	(Do not incl	ude listed property.	(See i	nstructions.)
	Special depreciatio							
	during the tax year (14						
15	Property subject to	15						
16	16							
	t III MACRS Der					ons.)		<u></u>
					`		-	
				Section A				
	MACRS deductions	for assets place	ced in service in tax		ng before 2011		17	7713
17	MACRS deductions			years beginnir			<u> </u>	7713
17	MACRS deductions If you are electing t asset accounts, che	o group any a		years beginnir vice during the	e tax year into		<u> </u>	7713
17	If you are electing tasset accounts, che	o group any aseck here	ssets placed in sen	years beginning the	e tax year into		d .	
17 18	If you are electing tasset accounts, che	o group any aseck here	ssets placed in sen	years beginning the control of the c	e tax year into	one or more general ▶ □	on Syst	
17 18	If you are electing t asset accounts, che Section B	o group any aseck here Assets Place (b) Month and year	ssets placed in sen ed in Service Durir (c) Basis for depreciation	years beginning the control of the c	e tax year into	one or more general	on Syst	em
17 18 (a) (If you are electing to asset accounts, che Section B Classification of property 3-year property	o group any aseck here	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions)	years beginning the control of the c	e tax year into	one or more general	on Syst	em Depreciation deduction
17 18 (a) (19a	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property	o group any aseck here	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use	years beginning the control of the c	e tax year into	one or more general	on Syst	em
17 18 (a) (19a b	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property 7-year property	o group any aseck here	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions)	years beginning the control of the c	e tax year into	one or more general	on Syst	em Depreciation deduction
17 18 (a) (19a b	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property 7-year property 10-year property	o group any aseck here	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions)	years beginning the control of the c	e tax year into	one or more general	on Syst	em Depreciation deduction
17 18 (a) (19a b	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property	o group any aseck here	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions)	years beginning the control of the c	e tax year into	one or more general	on Syst	em Depreciation deduction
17 18 (a) (19a b c d	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property	o group any aseck here	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions)	years beginning years beginning years beginning the years and years are determined. (d) Recovery period.	e tax year into	General Depreciati (f) Method DDB	on Syst	em Depreciation deduction
17 18 (a) (b) 19a cc dd ee	If you are electing to asset accounts, check Section B Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property 25-year property	o group any aseck here	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions)	years beginning vice during the vice during th	e tax year into	one or more general General Depreciation (f) Method DDB S/L	on Syst	em Depreciation deduction
17 18 (a) (b) 19a cc dd ee	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental	o group any aseck here	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions)	years beginning the control of the c	e tax year into cear Using the (e) Convention HY	one or more genera General Depreciati (f) Method DDB S/L S/L	on Syst	em Depreciation deduction
17 18 19a b c c d e f f	If you are electing to asset accounts, che Section B Section B Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property	o group any aseck here Assets Place (b) Month and year placed in service	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions) 16788	years beginning the vice during the vice durin	e tax year into ear Using the (e) Convention HY MM MM	one or more general Depreciation (f) Method DDB S/L S/L S/L S/L	on Syst	Pepreciation deduction 3357
17 18 19a b c c d e f f	If you are electing to asset accounts, che Section B Section B Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real	o group any aseck here	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions)	years beginning the control of the c	e tax year into ear Using the (e) Convention HY MM MM MM	one or more general Depreciation (f) Method DDB S/L S/L S/L S/L S/L	on Syst	em Depreciation deduction
17 18 19a b c c d e f f	If you are electing to asset accounts, che Section B Section B Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property	o group any aseck here Assets Place (b) Month and year placed in service	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions) 16788	years beginning the vice during the vice durin	e tax year into ear Using the (e) Convention HY MM MM MM MM MM	one or more general Depreciation (f) Method DDB S/L S/L S/L S/L S/L S/L S/L	on Syst	Perm Depreciation deduction 3357
17 18 19a b cc dd ee ff	If you are electing to asset accounts, check Section B Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C—	o group any aseck here Assets Place (b) Month and year placed in service	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions) 16788	years beginning the vice during the vice durin	e tax year into ear Using the (e) Convention HY MM MM MM MM MM	General Depreciation (f) Method DDB S/L S/L S/L S/L S/L S/L S/L S/	on Syst	Perm Depreciation deduction 3357
17 18 (a) (19a b) c c d d e f f	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C— Class life	o group any aseck here Assets Place (b) Month and year placed in service	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions) 16788	years beginning yield during the control of the con	e tax year into ear Using the (e) Convention HY MM MM MM MM MM	S/L	on Syst	Perm Depreciation deduction 3357
17 18 (a) (19a bb cc dd ee f f g h	If you are electing to asset accounts, che Section B Section B Classification of property 3-year property 5-year property 10-year property 12-year property 25-year property 25-year property Residential rental property Nonresidential real property Section C— Class life 12-year	o group any aseck here Assets Place (b) Month and year placed in service	ssets placed in sen ed in Service Durir (c) Basis for depreciation (business/investment use only—see instructions) 16788	years beginning the vice during the vice durin	e tax year into ear Using the (e) Convention HY MM MM MM MM MM MM Ar Using the A	General Depreciation (f) Method DDB S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	on Syst	Perm Depreciation deduction 3357
17 18 (a) (19a bb cc dd ee ff g h	If you are electing to asset accounts, che Section B Section B Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C— Class life 12-year 40-year	o group any aseck here Assets Place (b) Month and year placed in service 12/2011 -Assets Place	ssets placed in service During (c) Basis for depreciation (business/investment use only—see instructions) 16788 3460 d in Service During	years beginning yield during the control of the con	e tax year into ear Using the (e) Convention HY MM MM MM MM MM	S/L	on Syst	Perm Depreciation deduction 3357
17 18 19a b c d e f f g h	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C— Class life 12-year 40-year IV Summary (5)	o group any aseck here Assets Place (b) Month and year placed in service 12/2011 -Assets Place See instruction	ed in Service Durin (c) Basis for depreciation (business/investment use only—see instructions) 16788 3460 d in Service During	years beginning the vice during the vice durin	e tax year into ear Using the (e) Convention HY MM MM MM MM MM MM Ar Using the A	General Depreciation (f) Method DDB S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	(g) D	Perm Depreciation deduction 3357
17 18 19a b c d e f f g h	If you are electing to asset accounts, chee Section B Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C— Class life 12-year 40-year t IV Summary (S Listed property. Ent	o group any aseck here Assets Place (b) Month and year placed in service 12/2011 -Assets Place See instructioner amount from	ed in Service During (c) Basis for depreciation (business/investment use only—see instructions) 16788 3460 d in Service During ns.)	years beginning the control of the c	e tax year into ear Using the (e) Convention HY MM MM MM MM MM MM MM MM MM	S/L	(g) D	Perm Depreciation deduction 3357
17 18 19a b c d e f f g h	If you are electing to asset accounts, chee Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C— Class life 12-year 40-year t IV Summary (S Listed property. Ent Total. Add amounts	o group any aseck here Assets Place (b) Month and year placed in service 12/2011 -Assets Place See instruction or from line 12, liii	ed in Service During (c) Basis for depreciation (business/investment use only—see instructions) 16788 3460 d in Service During ns.) n line 28 nes 14 through 17, li	years beginning the control of the c	e tax year into ear Using the (e) Convention HY MM MM MM MM MM Ar Using the A MM In column (g),	General Depreciation (f) Method DDB S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	(g) D	depreciation deduction 3357 4 stem
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17 18 19a b c d d e f f g h	If you are electing to asset accounts, chee Section B Classification of property 3-year property 5-year property 10-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C— Class life 12-year 40-year t IV Summary (S Listed property. Ent Total. Add amounts	o group any as eck here Assets Place (b) Month and year placed in service 12/2011 -Assets Place See instruction or amount from line 12, lines of your repove and places	ed in Service During (c) Basis for depreciation (business/investment use only—see instructions) 16788 3460 d in Service During ns.) n line 28 nes 14 through 17, lineturn. Partnerships ared in service during	years beginning the control of the c	e tax year into ear Using the (e) Convention HY MM MM MM MM MM MM MM MM MM	General Depreciation (f) Method DDB S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	(g) D	Pepreciation deduction 3357 4 stem

		ainment, r				•											
		For any ve		,		_			_			_	lease (expens	e, com	plete or	i ly 24a,
		olumns (a)											fa			ashilas \	
240	Section A Do you have ev	—Depreci							□ No					lence wi		☐ Yes	□ No
240	(a)	(b)	(c)	usiness/inves	Surient us	Ciairrie	(e)	1 163			(g)		the evic	(h)	itteri:	<u> </u>	
	e of property (list vehicles first)		Business/ investment u percentage	se Costoro	d) ther basis		for depre ness/inves use only)	stment	Recove		Meth Conve	od/		oreclation duction	E	lected sectors	
25	Special dep																
26	Property use							e (see	IIISUUC	LIONS) .	25					
20	Property use	Thore the		% quaime	J DUSIN	355 USE	.				-						
		-		%		-											
				%													
27	Property use	ed 50% or I	r		ısiness	use:				- 1-							
	· · · · · ·			%						_	/L -						
				% %							/L - /L -				\dashv		
28	Add amount	s in column			h 27 F	nter he	re and	on line	21 pa			28			\dashv		
	Add amount									-					29		
				Sec	tion B	-Infor	mation	on Us	se of V	ehicle	es			•	•		
	plete this section employees,																ehicles
					(6			b)		(c)		(6			(e)		f)
30	the year (do not include commuting miles) .								2 Vehicle 3			Vehicle 4		Vehicle 5		Vehicle 6	
	Total commutir	-	_				ļ		1							ļ	
32	Total other p	-	ncommut · ·	ing) miles													
33	Total miles di 30 through 32	_	the year														
34	Was the veh during off-dut		le for per	sonal use	Yes	No	Yes	No	Yes	N	0	Yes	No	Yes	No	Yes	No
35	Was the veh than 5% own		-	y a more									-				
36	Is another veh	nicle availab	le for pers	onal use?													
				stions for													
more	wer these que e than 5% ow	ners or rela	ated pers	ons (see in	structio	ns).											
37	Do you mair your employ		ten policy	y statemen	t that p	rohibit:	s all pe	rsonal 	use of	vehic	cles, i 	nclud	ing coi 	mmutir · ·	ng, by	Yes	No
38	Do you main employees?														y your 		
39	Do you treat																
40	Do you provuse of the ve							taın ın	formation	on fro	om yo 	ur en	nployee 	es abou	ut the		
41	Do you mee													s.) .			
Pai	rt VI Amor	tization															
		a) on of costs		(b) Date amortiza begins	ation	Amo	(c) rtizable ar	mount			d) section		(e) Amortiza period percent	or	Amortiz	(f) ation for th	nis year
42	Amortization	of costs tha	at begins	during your	2011 ta	x year	(see inst	tructio	ns)·					-			
				_					-			+					
43	Amortization	of costs th	nat begar	hefore vo	ur 2011	tax ve	ar							43			
	Total. Add		_	-		_								44			
																Form 456	52 (2011)

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasury

Attachment

Internal Revenue Service		, 00	e separate instruction		·····	your tax return.	!	•		
Name(s) shown on ret	lum		Busine	ss or activity to w	hich this form rela	tes	Identi	fying number		
Community Bible S						- Rental Expenses		91-1275574		
			rtain Property Uned property, complete			nplete Part I.				
1 Maximum a	1 Maximum amount (see instructions)									
2 Total cost of										
	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0									
5 Dollar limita										
separately,	separately, see instructions									
6 (a) Description of property			ty	(b) Cost (busi	ness use only)	(c) Elected cost				
	•									
7 Listed prop	erty Ent	er the amount	from line 29		7					
					c), lines 6 and	7	8			
			aller of line 5 or line				9			
10 Carryover o	of disallov	wed deduction	from line 13 of your	2010 Form 45	562		10			
-			smaller of business in				11			
				•		ne 11	12			
			to 2012 Add lines 9			13				
Note: Do not use	e Part II d	or Part III belov	w for listed property.	Instead, use i	Part V.					
Part II Spec	ial Depr	reciation Allo	wance and Other	Depreciation	(Do not inc	lude listed property.)	(See i	nstructions.)		
14 Special de	preciatio	n allowance f	or qualified propert	y (other than	listed prope	rty) placed in service				
during the t	ax year ((see instruction	ns)				14			
15 Property su	15 Property subject to section 168(f)(1) election									
16 Other depre	eciation (including ACR	IS)	<u>.</u>			16			
Part III MAC	RS Dep	preciation (D	o not include liste	d property.)	(See instruct	ions.)				
				Section A						
17 MACRS de	ductions	for assets pla	ced in service in tax	years beginni	ng before 201	1	17	800		
	one or more general	İ								
Se	ection B			g 2011 Tax Y	ear Using the	General Depreciation	ı Syst	em		
(a) Classification of	property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	1,00	epreciation deduction		
19a 3-year pro	operty					1	(9)			
b 5-year pro							(g) U			
c 7-year pro	operty						(g) D			
o r year pri							(g) D			
d 10-year pro	operty						(9)			
	operty operty						(g) U			
d 10-year pro	operty operty operty					•	(g) U			
d 10-year pro e 15-year pro f 20-year pro g 25-year pro	operty operty operty operty						(9)			
d 10-year pro e 15-year pro f 20-year pro g 25-year pro h Residential	operty operty operty operty						(9)			
d 10-year pro e 15-year pro f 20-year pro g 25-year pro h Residential property	operty operty operty operty operty rental						(9)			
d 10-year pro e 15-year pro f 20-year pro g 25-year pro h Residential property i Nonresider	operty operty operty operty operty rental						(9)			
d 10-year pro e 15-year pro f 20-year pro g 25-year pro h Residential property i Nonresider property	operty operty operty operty operty rental									
d 10-year pro e 15-year pro f 20-year pro g 25-year pro h Residential property i Nonresider property	operty operty operty operty operty rental	-Assets Place	d in Service During	2011 Tax Ye	ar Using the	Afternative Depreciati		stem		
d 10-year pro e 15-year pro f 20-year pro g 25-year pro h Residential property i Nonresider property	operty operty operty operty operty rental	-Assets Place	ed in Service During	2011 Tax Ye	ar Using the	Alternative Depreciati		stem		
d 10-year pro e 15-year pro f 20-year pro g 25-year pro h Residential property i Nonresider property Sec 20a Class life b 12-year	operty operty operty operty operty rental	-Assets Place	d in Service During	2011 Tax Ye	ar Using the	Alternative Depreciati		stem		
d 10-year pro e 15-year pro f 20-year pro g 25-year pro h Residential property i Nonresider property Sec 20a Class life b 12-year c 40-year	operty operty operty operty operty rental otion C			2011 Tax Ye	ar Using the	Alternative Depreciati		stem		
d 10-year pro e 15-year pro f 20-year pro g 25-year pro h Residential property i Nonresider property Sec 20a Class life b 12-year c 40-year Part IV Sum	operty operty operty operty operty operty operty rental ottion C— mary (5	See instruction	ons.)	2011 Tax Ye	ar Using the	Afternative Depreciati	on Sy:	stem		
d 10-year pro e 15-year pro f 20-year pro g 25-year pro h Residential property i Nonresider property Sec 20a Class life b 12-year c 40-year Part IV Sum 21 Listed prop	operty operty operty operty operty operty operty rental ottion C mary (S eerty. Ent	See instruction	ons.) n line 28					stem		
d 10-year pro e 15-year pro f 20-year pro g 25-year pro h Residential property i Nonresider property Sec 20a Class life b 12-year c 40-year Part IV Sum 21 Listed prop 22 Total. Add	operty operty operty operty operty operty rental ottion C mary (\$\frac{1}{2}\$ merty. Ent amounts	See instructions amount from the from line 12, is	ons.) n line 28	nes 19 and 20	in column (g),	and line 21 Enter here	on Sys			
d 10-year pro e 15-year pro f 20-year pro g 25-year pro h Residential property i Nonresider property Sec 20a Class life b 12-year c 40-year Part IV Sum 21 Listed prop 22 Total. Add and on the a	poperty poperty poperty poperty poperty rental ntial real etion C— mary (Secrety Entity amounts appropna	See instruction in the second	ons.) n line 28	nes 19 and 20	in column (g),	and line 21 Enter here	on Sy:	stem 800		

	4500 (0014)																	Page 2
	4562 (2011) rt V Liste	d Propert	v (Inc	ude auto	mobile	es.	cert	ain ot	her v	ehic	cles.	certa	in cor	nputer	s, and	prop	erty us	
		ainment, r												•	·		•	
		For any ve												lease	expens	e, com	plete o i	n iy 24a
		olumns (a)																
		- Depreci								_							_	
<u>24a</u>	Do you have e	T	pport the t	business/inve	estment	use ci	aime	(e) <u>(e)</u>	Yes			1		s the evi		itten /	<u> </u>	∐ No
	Type of property (list Date placed Business/ (Basis for depreciation (business/investment use only)			stment	Red	(f) (g) Recovery Method/ Convention		thod/	(h) Depreciation deduction			(i) Elected section 179 cost			
25	Special dep												25					
26	Property use	ed more tha	an 50% i	n a qualifie	ed busi	ness	use	:				- -		1				
				%								-		├ ──				
		ļ <u> </u>		%		\dashv						+		-				
27	Property use	ed 50% or	lees in a	% gualified b	ıı ıeınaeı	6 1166	<u>. </u>					<u> </u>		<u> </u>	<u> </u>			
	r roperty us	00 70 01	1633 111 4	%	usii ics	3 430			Ī			S/L -		Π				
				%					h		5/L -							
				%								S/L -						
	Add amoun												28					
29	Add amoun	ts in colum	n (i), line										· ·	• •		29		
Com to yo	plete this sect our employees	ion for vehic , first answe	cles used or the que	by a sole p	ction E roprieto ection C	or, pa	artne	r, or oth	er "mo	re th	han 5°	% own	er," or i pleting	elated p	erson tion for	f you p those v	rovided v ehicles.	vehicles
	-			- · · -		(a)			b)		(c	;)		(d)		(e)		(f)
30	Total business/investment miles driven during the year (do not include commuting miles) .			Ve	Vehicle 1 Vehicle 2		icle 2		Vehicle 3 V		Veh	hicle 4 Vehicle 5		iicle 5	5 Vehicle 6			
	Total commuting miles driven during the year Total other personal (noncommuting) miles driven																	
33	Total miles d	-	the year	Add lines			•											
34				Yes	N	40	Yes	No	`	es	No	Yes	No	Yes	No	Yes	No	
35	Was the vehicle used primarily by a more than 5% owner or related person?																	
<u>36</u>	ls another ve							L		1	1						<u> </u>	
	wer these que than 5% ov	estions to d	letermine	-	et an e	хсер	tion						-				who a	re not
	Do you mai	ntaın a writ	•					all pe	rsonal	use	of v	ehicles	, ınclu	ding co	mmutir	ng, by	Yes	No
38	Do you mai employees?	ntaın a wrı														y your		
39 40	Do you provide more than five vehicles to your employees, obtain information from your employees about the																	
41	use of the vehicles, and retain the information received?																	
Pэ			57, 30, 3	5, 40, UI 41	13 105	, uc	, 1101	COMPR			, 6 101	416 00		01110103	•		<u> </u>	
T CI	(a) Description of costs				ation (c) Amortizable amount			mount		(d) Code section						(f) rtization for this year		
42	Amortization	of costs the	at begins	during you		tax y	ear (see insi	truction	ns):				percen	tage			
					i						_							

43 Amortization of costs that began before your 2011 tax year
44 Total. Add amounts in column (f). See the instructions for where to report .

43 44