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Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2011

Open to Public Inspection

Form **990** (2011)

Cat No 11282Y

Department of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service July 1 June 30 For the 2011 calendar year, or tax year beginning 2011, and ending 20 12 C Name of organization MONTANA BIBLE COLLEGE D Employer identification number Check if applicable Doing Business As 81-0444020 Address change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change 406-586-3585 **3625 S 19TH AVENUE** Initial return City or town, state or country, and ZIP + 4 Terminated 837,943 **BOZEMAN, MT 59718** G Gross receipts \$ Amended return KEN FENNO F Name and address of principal officer H(a) is this a group return for affiliates? Yes Vo Application pending PO BOX 97, MANHATTAN, MT 59741 H(b) Are all affiliates included? Yes No If "No." attach a list (see instructions) **√** 501(c)(3) 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status **MONTANABIBLECOLLEGE.EDU** Website: ▶ H(c) Group exemption number ▶ M State of legal domicile MΤ L Year of formation Part I Briefly describe the organization's mission or most significant activities: MONTANA BIBLE COLLEGE EXISTS TO GLORIFY GOD THROUGH BIBLICAL HIGHER EDUCATION BY TRAINING MEN AND WOMEN FOR A LIFETIME OF DYNAMIC CHRISTIAN Governance LIVING AND SERVICE. 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 14 4 13 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 34 5 6 6 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 7366 Net unrelated business taxable income from Form 990-T, line 34 7b 6366 Current Year 113494 159944 Contributions and grants (Part VIII, line 1h). 8 640371 9 Program service revenue (Part VIII, line 2g) 652901 25334 25098 10 Investment income (Part VIII, column (A), lines 3 . 4. and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e). Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line) 11 0 0 799199 837943 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 39177 32625 Benefits paid to or for members (Part IX, column (A) [ine 4]). 0 14 15 Salaries, other compensation, employee benefits (Part IX, column (A); 465854 521944 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ 231125 259388 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 736156 813957 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 43043 23986 19 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year 20 2665602 2706782 Total assets (Part X, line 16) 70358 21 53768 Total liabilities (Part X, line 26) . . . 22 Net assets or fund balances. Subtract line 21 from line 20 2611834 2636424 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is glaration of <u>prepa</u>rer (other than officer) is based on all information of which preparer has any knowledge true, correct, and complet Sign Date Here Type or print name and title Pnnt/Type preparer's name Preparer's signature Date **Paid** Check I If self-employed Preparer Firm's EIN ▶ Firm's name **Use Only** Firm's address ▶ Phone no May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Part I				_
			Part III	<u> Ц</u>
1	Briefly describe the organization's missi		LUCUED EDUCATION DV TRAINING M	EN AND WOMEN
	MONTANA BIBLE COLLEGE EXISTS TO	**	HIGHER EDUCATION BY TRAINING M	EN AND WOMEN
	FOR A LIFETIME OF DYNAMIC CHRISTIA			
2	Did the organization undertake any sign			
	prior Form 990 or 990-EZ?			☐ Yes
_	If "Yes," describe these new services or			
3	Did the organization cease conducting			
	services?			∐ Yes ☑ No
4	Describe the organization's program se		of its three largest program services	as measured by
7	expenses. Section 501(c)(3) and 501(c)			
	grants and allocations to others, the tot			in anount of
	·		, ,	
4a	(Code:) (Expenses \$	464759 including grants of \$	32625) (Revenue \$	670633)
	MBC OFFERS FIVE COURSES OR STUDY			
	2012 SCHOOL YEAR SAW AN AVERAGE		UDENTS. IN CONNECTION WITH SPEC	FIC PROGRAM
	SERVICES, MBC RECEIVED DONATED FA	ACILITIES VALUED AT \$116,394.		
		••		
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)

		••••••••••••••••		
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
				••••••
4d	Other program services (Describe in Sc	hedule O.)		
	(Expenses \$ including		enue \$	
4e	Total program service expenses ▶	464759		

Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
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	3	✓	
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		<u>√</u>
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		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		į	
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			<u>✓</u>
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	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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	/	
b	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	1	
c	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		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	1	
e 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	√	✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	✓	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		✓
13 14 a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	✓	<u> </u>
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		<u>·</u>
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		✓
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		<u>·</u>
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		<u>√</u>
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		<u> </u>
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		<u> </u>
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	\vdash	√
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		✓
		For	n 990	(2011)

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

	0 (2011)			Page C
Part				
	Check if Schedule O contains a response to any question in this Part V	• •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 3	Γ		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	ſ		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	reportable gaming (gambling) winnings to prize winners?	1c	-	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		-	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 34			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	√	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	_	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	✓	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	١.		,
h	organization solicit any contributions that were not tax deductible?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	CL		
7	gifts were not tax deductible?	6b		
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		7
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	- 		
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
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		✓
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	l		l
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	ļ
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	-]	
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b] Section 501(c)(12) organizations. Enter:	-		
11	Gross income from members or shareholders]	
a b	Gross income from other sources (Do not net amounts due or paid to other sources	1	1	
	against amounts due or received from them.)	ļ		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		f
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	<u> </u>	\vdash	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	[
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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			
	the organization is licensed to issue qualified health plans]		
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓

b 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. S			
	Check if Schedule O contains a response to any question in this Part VI			. ☑
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 14			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 13			
2	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	✓	
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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		√
6	Did the organization have members or stockholders?	6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
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:			ì
_	The governing body?	8a	✓	
a b	Each committee with authority to act on behalf of the governing body?	8b	<u> </u>	1
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.) Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	1 63	1
ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	104		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	400		 J
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b		<u> </u>
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		,	
13	describe in Schedule O how this was done	12c	✓	1
14	Did the organization have a written whistleblower policy?	14		✓
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			<u> </u>
а	The organization's CEO, Executive Director, or top management official	15a	√	
b	Other officers or key employees of the organization	15b	✓_	<u> </u>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		1
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?			
Secti	on C. Disclosure	16b		
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
46	Own website Another's website Upon request		_	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o and financial statements available to the public during the tax year.	t inter	est p	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the		
_•	organization: ► MONTANA BIBLE COLLEGE 3625 S 19TH AVE 406-586-3585	J. 1110	•	

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- 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 no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ted any curren	t officer, director	, or trustee.
	(C)									
(A)	(B) Position (do not check more than one			(D)	(E)	(F)				
Name and Title	Average	werage box, unless person is both an			Reportable compensation	Reportable compensation from	Estimated amount of			
	hours per week					or/trust		from	related	other
	(describe hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ecto	utio	약	dus	e oyee	₫	(W-2/1099-MISC)	(11 2) 1000 111100)	organization
	organizations in Schedule	₹	nal tı		oye	~ 줡				and related organizations
	O)	st e	uste		(O	ens				5. 3 45
			8			ated				
44) IAMES II CADI CON										
(1) JAMES H CARLSON PRESIDENT	40	/		1				65887	o	3150
	40	- `	_	-	\vdash			63887		3130
(2) HARLAN DURGAN CHAIRMAN	1	1		1					o	0
(3) KEN FENNO		 		۲	┢			 		
SECRETARY/TREASURER	1	1		/				0	0	0
(4) MARK AMUNRUD	•	 		<u> </u>				<u> </u>		
DIRECTOR	1	1						0	o	0
(5) DON CHEEVER	 	Ì							_	
DIRECTOR	1 1	✓						0	o	0
(6) WILLIAM CURTIS							T			
DIRECTOR	1	1					1	0	o	0
(7) WILLIAM GRINDER										
DIRECTOR	1 1	✓						0	0	0
(8) JAMY LANDIS										
DIRECTOR	1	✓					<u></u>	0	0	0
(9) JEFF MACPHERSON										
DIRECTOR	1	✓						0	0	0
(10) NORMAN MILLIKIN]			ł	ļ					
DIRECTOR	1	✓					_	1536	0	0
(11) GRAHAME NICOLSON]									
DIRECTOR	1	✓						0	0	0
(12) JIM OWENHOUSE	1			1		Ì				
DIRECTOR	1 1	✓	<u> </u>	ļ	_	<u> </u>	L	0	0	0
(13) T.C. RICHARDSON	1	1				1				
DIRECTOR	1	✓	1	<u> </u>	lacksquare		_	0	0	0
(14) ARLEN TOFSLIE	_									
DIRECTOR	1	✓	<u> </u>			<u> </u>		0	0	0

	VII Section A. Officers, Directors, Trust (A) Name and title	(B) Average	(do n	ot ch	Pos neck as pe	c) ition more	than o	ne an	(D) Reportable compensation	(E) Reportabl	e	Est	(F) mated	
		week (describe hours for related organizations in Schedule O)	Individua or directo		Officer	_	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-M		comp fro orga and	ther ensation m the nization related nization	n d
(15)														
(16)														
(17)														
(18)														
(19)					-	_								
(20)						_								
(21)														
									1					
(25)														
1b c	Sub-total	VII, Sectio	n A		•			>	67423		0			3150
d 2	Total (add lines 1b and 1c)	t not limited						<u>►</u> e) w	rho received m		0 00,000	of		3150
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete</i>	ficer, direc							oloyee, or high	nest compe	nsated	3	Yes	No √
4	For any individual listed on line 1a, is the organization and related organizations individual												_	
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or inc	lividua 			-
Section	n B. Independent Contractors	<u>-</u>											1	
1	Complete this table for your five highest compensation from the organization. Repyear.													tax
	(A) Name and business add	iress	·						(B) Description of s	services		(C) Compen		
2	Total number of independent contractor received more than \$100,000 of compensations.							th	nose listed ab	ove) who				

Part	VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts ts	1a	Federated campaigns 1a					
ᄪ	b	Membership dues 1b					i
ا ق ت	С	Fundraising events 1c					
at te	d	Related organizations 1d					;
%. E	e	Government grants (contributions) 1e		i			
Signal Signal	f	All other contributions, gifts, grants,					
돌		and similar amounts not included above 1f	159944				
草豆	g	Noncash contributions included in lines 1a-1f: \$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a–1f		159944			
		Total / Ida in I	Business Code	100011			
- E	2a	TUITION	611310	434154	434154		· — — ·
ě	b	ROOM	611310	138159	138159		
e	C	STUDENT FEES	611310	45732	45732		
Š	d	TEXTBOOKS	611310	21229	21229		
Š		OTHER	611310	13627	13627		
Program Service Revenue		All other program service revenue .	011310	13027	13027		
_ <u>g</u>	g	Total. Add lines 2a–2f	▶	652901			
-	3	Investment income (including divident	ends interest	032901			
	•	and other similar amounts)		25098	17732	7366	
	4	Income from investment of tax-exempt be		23030	17732	7300	
	5	Royalties					
	•	(i) Real	(ii) Personal				
	6a	Gross rents	,,				
	b	Less: rental expenses		1			
	C	Rental income or (loss)					
	d	Net rental income or (loss)					, , ,
	7a	Gross amount from sales of (i) Securities	(II) Other				1
		assets other than inventory	``'				
	b	Less: cost or other basis					
	_	and sales expenses .					İ
	С	Gain or (loss)					
	d	Net gain or (loss)	•		-		
	u	14et gain of (1033)					
e e	8a	Gross income from fundraising					'
eu	-	events (not including \$					
ě		of contributions reported on line 1c).					
<u>بر</u>		See Part IV, line 18 a					
Other Reven	ь	Less: direct expenses b					
0		Net income or (loss) from fundraising	L	-			
		Gross income from gaming activities.				1	
		See Part IV, line 19 a					
	ь	Less: direct expenses b					
		Net income or (loss) from gaming acti			- 1		
		Gross sales of inventory, less					
		returns and allowances a					
	b	Less: cost of goods sold b					
	c	Net income or (loss) from sales of inv				-	
	Ť	Miscellaneous Revenue	Business Code				
	11a		1				
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a–11d	•				
	12	Total revenue. See instructions		837943	670633	7366	

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respons		n this Part IX	<u> </u>	
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	32625	32625		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	52525	52525		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	65887	13177	32944	19766
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	381502	241231	129249	11022
9	Other employee benefits [56977	31338	21651	3988
10	Payroll taxes	27412	15350	10139	1923
11	Fees for services (non-employees):				
а	Management				
b	Legal [
C	Accounting	11875		11875	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	16941	4235		12706
13	Office expenses	9280	4176	4176	928
14	Information technology	3795	1723	1498	574
15	Royalties				
16	Occupancy				
17	Travel	2008	1707	201	100
18	Payments of travel or entertainment expenses		1141		
-	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3265	1500	1765	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	75288	53938	21350	
23	Insurance				
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.)				
_	` ' '	20205	20205		
а	STUDENT HOUSING	32385	32385		
b	TEXTBOOKS	17938	17938	0000	
C	SUPPLIES	3440	860	2236	344
d	STUDENT SERVICES	16004	16004	2224	***
e	All other expenses	48465	23272	22701	2492
25	Total functional expenses. Add lines 1 through 24e	813957	495931	264183	53843
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)				

2 Savings and temporary cash investments	ľ	art X	Balance Sneet			
2 Savings and temporary cash investments						
Pledges and grants receivable, net Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(6)(3)(B), and contributing employees beneficiary organizations of section 501(c)(9) voluntary employees deneficiary organizations (see instructions) Receivables from other disqualified persons (as defined under section 4958(6)(1)), persons described in section 4958(6)(3)(B), and contributing employees deneficiary organizations of section 501(c)(9) voluntary employees beneficiary organizations of section 501(c)(9) voluntary employees beneficiary organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions) Receivables from other disqualified persons (as defined under section 4958(c)(3)(B), and contributing employees heneficiary organizations (see instructions) Receivables from other disqualified persons (as defined under section 4958(c)(3)(B), and contributing employees heneficiary organizations (see instructions) Receivables from other disqualified persons (as defined under section 4958(c)(3)(B), and contributing employees and equipment cost or other basis. Complete Part IV, line 11 1175 1175 1175 1175 1175 1175 1175		1	Cash-non-interest-bearing	89238	1	123527
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4956(f)(1)), persons described in section 4956(f)(18), and contributing employees beneficiary organizations of section 501(c)(8) voluntary employees beneficiary organizations (see instructions) 6 Postpole Part II of Schedule D 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 1100 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—publicly traded securities 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total sestes. Add lines 1 through 15 (must equal line 34) 16 Total sestes. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 20 Tax-exempt bond liabilities 21 Deferred revenue 22 Total liabilities including deteral income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 21 Total liabilities including deteral income tax payables to related third parties, and other liabilities for compensated employees, and disqualified persons. Complete Part X of Schedule D 23 Scuered mortgages and notes payable to urrelated third parties 24 Unsecured notes and loans payable to urrelated third parties 25 Other liabilities including deteral income tax, payables to related third parties, and other liabilities income tax, payables to related th		2		28226	2	28681
A Accounts receivable, net 11203 4 10852		3			3	
Proceivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		4		11203	4	10852
employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(0f(1)), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of seaton 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepatid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b Less: accumulated depreciation 10c Lond, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 11 Investments—publicly traded securities 11 Investments—publicly traded securities 12 Investments—program-related. See Part IV, line 11 13 Intangible assets 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Excover or ustodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 28 Other liabilities (including federal income tax, payables to related third parties 29 Complete Part II of Schedule L 20 Total liabilities. Add lines 17 through 25 21 Excomer outs and loans payable to unrelated third parties 22 Dorganizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. 21 Unrestricted net assets 21 Expensive that do not follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. 22 Permanently restricted net assets 23 Cap		5				
6 Receivables from other disqualified persons (as defined under section 4958(h(f)), persons described in section 4958(h(5)(b), and contributing employers and sponsoring organizations of section 501(c)(y) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part Vi of Schedule D 10a Land, buildings, and equipment cost or other basis. Complete Part Vi of Schedule D 10a Lond, buildings, and equipment of the securities of the securitie			employees, and highest compensated employees. Complete Part II of			
### 4958(f)(1), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 1010 Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10 Less: accumulated depreciation 10 Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 21 Tax-exempt bond liabilities 22 Other liabilities (including federal income tax, payables to related third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 20 Tay-favorable assets 21 Unrestricted net assets 22 Turrestricted net assets 23 Capital stock or trust principal, or current funds 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total assets for fund balances 24 Capital assets			Schedule L		5	
9 Prepaid expenses and deferred charges	S	6	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary		6	
9 Prepaid expenses and deferred charges	Se	7	Notes and loans receivable, net		7	
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b Less: accumulated depreciation 10b 464084 11600816 10c 1547049 11 Investments—publicly traded securities 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—publicly traded securities 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 10 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Cuther liabilities (including federal income tax, payables to related third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 26 Total liabilities. Add lines 17 through 25 27 Complete Part II of Schedule D 28 Total liabilities and the sasets 29 Permanently restricted net assets 30 Total restricted net assets 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Pataline dearnings, endowment, accumulated income, or other funds 32 Patalined earnings, endowement, accumulated income, or other funds 33 Paid-in or capital	As	8		9493	8	14124
10a		9	,	14104	9	7707
ther basis. Complete Part VI of Schedule D b Less: accumulated depreciation		10a	· · · · · · · · · · · · · · · · · · ·			
11						
11 Investments—publicly traded securities 11035 11 11758 12 Investments—other securities. See Part IV, line 11 13 13 14 14 15 14 15 15 14 15 15		ь	Less: accumulated depreciation 10b 464084	1600816	10c	1547049
12 Investments – other securities. See Part IV, line 11 765778 12 828834 13 Investments – program-related. See Part IV, line 11 13 14 Intangible assets 14 15 15 15 134250 15 Other assets. See Part IV, line 11 135709 15 134250 16 Total assets. Add lines 1 through 15 (must equal line 34) 2665602 16 2706782 17 Accounts payable and accrued expenses 35135 17 47132 18 Grants payable 18 18 19 Deferred revenue 18633 19 23226 10 Zerow or custodial account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 53768 26 70358 27 Organizations that follow SFAS 117, check here ▶ and complete lines 27 through 29, and lines 33 and 34. 28 Temporarily restricted net assets 96781 28 108253 29 Permanently restricted net assets 96781 28 108253 20 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 2611834 33 2636424 25 16 17 18 18 18 18 18 17 18 18 18 18 19 18 18 18 18 19 18 18 18 18 19 18 18 18 18 10 18 18 18 10 18 18 18 10 18 18 18 10 18 18 18 10 18 18 18 10 18 18 10 18 18 18 10 18 18 18 10		11	· · · · · · · · · · · · · · · · · · ·	11035	11	11758
14		12	· · · · · · · · · · · · · · · · · · ·	765778	12	828834
14		13	· · · · · · · · · · · · · · · · · · ·		13	
15 Other assets. See Part IV, line 11 135709 15 134250 16 2706782 17 Accounts payable and accrued expenses 35135 17 47132 18 Grants payable 18 18 18 19 Deferred revenue 18 18633 19 23226 20 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 24 24 25 25 26 27 27 28 29 29 29 29 29 29 29		14	· ·		14	
16		15	· · · · · · · · · · · · · · · · · · ·	135709	15	134250
17		16	· · · · · · · · · · · · · · · · · · ·	2665602	16	2706782
19 Deferred revenue		17		35135	17	47132
20 Tax-exempt bond liabilities		18	Grants payable		18	
21 Escrow or custodial account liability. Complete Part IV of Schedule D . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		19	Deferred revenue	18633	19	23226
22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		20	Tax-exempt bond liabilities		20	
employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25 Corganizations that follow SFAS 117, check here Inand complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 30 Organizations that do not follow SFAS 117, check here Inand complete lines 30 through 34. Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 Jean-Brane Land School Schoo		21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Unsecured notes and loans payable to unrelated third parties	oilities	22	employees, highest compensated employees, and disqualified persons.			
Unsecured notes and loans payable to unrelated third parties	ia	00	· · · · · · · · · · · · · · · · · · ·			
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	_					
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			, ,		24	
of Schedule D		25				
Total liabilities. Add lines 17 through 25					25	
Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets		26		53768		70358
lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets	_		Organizations that follow SFAS 117, check here ▶ □ and complete		<u> </u>	,,,,,
27 Unrestricted net assets	es				j	
28 Temporarily restricted net assets	2	27		2433529	27	2444647
Permanently restricted net assets	<u>a</u>				_	
Organizations that do not follow SFAS 117, check here I and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	<u>В</u>					
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	Š	-			- -	
30 Capital stock or trust principal, or current funds	ř					
31 Paid-in or capital surplus, or land, building, or equipment fund	S S	30	·		30	
32 Retained earnings, endowment, accumulated income, or other funds . 32 33 Total net assets or fund balances	set				-	
33 Total net assets or fund balances	As					
34 Total liabilities and net assets/fund balances	<u>e</u>			2611834	_	2636424
	Z		Total liabilities and net assets/fund balances	· · · · · · · · · · · · · · · · · · ·	_	2706782

orm	990	(2011)	

Pari	Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>			✓
1	Total revenue (must equal Part VIII, column (A), line 12)	1		83	37943
2	Total expenses (must equal Part IX, column (A), line 25)	 			3957
3	Revenue less expenses. Subtract line 2 from line 1	 		2	23986
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	 			1834
5	Other changes in net assets or fund balances (explain in Schedule O)	 			604
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))			263	36424
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," explain Schedule O.	in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	i	-
b	Were the organization's financial statements audited by an independent accountant?	-	2b	7	Ė
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign of the audit, review, or compilation of its financial statements and selection of an independent accountant	ght	2c	<u>,</u>	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	in			1
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year we issued on a separate basis, consolidated basis, or both:	ere			
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	in -			
	the Single Audit Act and OMB Circular A-133?		3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo t	L			<u> </u>
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3ь	[ļ
			Fom	990	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Inspection Employer identification number **MONTANA BIBLE COLLEGE** 81-0444020

Pa	rt I Reason f	or Public Cha	rity Status (All orga	nization	s must c	omplete	this par	t.) See ii	nstructio	ns.	
The	organization is not	a private founda	ition because it is: (Fo	r lines 1 t	hrough 1	1, check	only one	box.)			
1	A church, con	vention of churc	hes, or association of	churches	describe	ed in sec	tion 170(b)(1)(A)(i).		
2	A school desc	ribed in section	170(b)(1)(A)(ii). (Attac	ch Sched	ule E.)						
3			spital service organiza								
4		earch organizatione, city, and state	on operated in conjunct e:	ction with	a hospit	al descrit	oed in se	ction 170)(b)(1)(A)	(iii). Ente	er the
5		on operated for)(1)(A)(iv). (Com	the benefit of a colle plete Part II.)	ge or uni	versity ov	wned or	operated	by a go	vernment	al unit d	lescribed in
6 7	☐ An organization	n that normally	nment or government receives a substantia ((A)(vi). (Complete Par	al part of					it or fron	n the ger	neral public
8	☐ A community	trust described i	n section 170(b)(1)(A))(vi). (Cor	nplete Pa	ırt II.)					
9	receipts from support from	activities related gross investme	receives: (1) more that d to its exempt funct ent income and unrel fter June 30, 1975. Se	ions—sul lated bus	oject to d siness tax	ertain ex xable inc	ceptions ome (les	s, and (2) ss section	no more	than 3	31/3% of its
10 11	An organization purposes of open 509(a)(3). Che	on organized ar one or more pub ock the box that	I operated exclusively and operated exclusive licly supported organ describes the type of	ely for th nizations supportin	e benefit described ig organiz	t of, to p d in secti zation and	perform 1 ion 509(a d comple	the funct (1) or se	ions of, ection 50 1e throug	9(a)(2). S gh 11h.	See section
	_ a □ Type I		• •	☐ Type		•	•		_] Type II	
e			that the organization								
			ers and other than one	e or more	publicly	supporte	ed organi	izations c	lescribed	in section	on 509(a)(1)
_	or section 509			_			_				
f	organization, o	check this box								e III sur 	oporting
g	following pers	ons?	he organization accep					-			
			ndirectly controls, eithody of the supported of							nd 11g(i)	Yes No
		•	on described in (i) abo							11g(ii)
	, ,	•	a person described in	., .,						11g(iii)
<u>r</u>	Provide the fo	llowing informat	ion about the support	ed organi	zation(s).					·	
(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	the organ col. (i)	ou notify nization in of your port?	organizat (i) organi	s the tion in col zed in the S ?		Amount of upport
				Yes	No	Yes	No	Yes	No		
(A)											
(B)											
(C)											
(D)											
(E)											
Tota	al		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								

Part	Support Schedule for Organiza (Complete only if you checked th Part III. If the organization fails to	e box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu		
Secti	on A. Public Support	4		, ,		,		—
	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		T			,	T	_
	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
7	Amounts from line 4							_
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	•	•			12	= E01(a)(2)	_
13	First five years. If the Form 990 is for th organization, check this box and stop her	•			•			
Secti	on C. Computation of Public Suppor		· · · · ·		<u> </u>	· · · ·		Ш
14	Public support percentage for 2011 (line 6	· · · · · · · · · · · · · · · · · · ·		1. column (fl)		14		<u>~</u>
15	Public support percentage from 2010 Sch		-			15		%
16a	331/3% support test—2011. If the organization qual	ifies as a pub	licly supported	organization			▶	
b	331/3% support test—2010. If the organicheck this box and stop here. The organi					9 15 is 33 ¹ /3%	_	
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	inces" test, ch	eck this box ar	nd stop here. I	Explain in	
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizat Explain in Part IV how the organization me supported organization	ion meets the	e "facts-and-ci	ircumstances"	test, check th	nis box and st	top here.	
18	Private foundation. If the organization did instructions		box on line 13				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.)

Secti	on A. Public Support	under the te	ists listed bei	ow, piease co	omplete i art	11.,	
	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	(a) 2001	(2) 2000	(0) 2003	(4) 2010	(6) 2011	(i) Total
_	received. (Do not include any "unusual grants.")	<u> </u>					
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the					1	
	organization's tax-exempt purpose			<u> </u>			
3	Gross receipts from activities that are not an						-
	unrelated trade or business under section 513	<u>;</u>					
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year		ļ	<u> </u>			
С 8	Add lines 7a and 7b					-	
J	line 6.)						
Secti	ion B. Total Support		1 .	<u> </u>	·	l	1
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	(4) 200:	(2) 2000	(0) 2000	(4, 2010	(5, 25	(1) 1012.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop he	· ·	n's first, secor	•	•		, ,, ,
Secti	ion C. Computation of Public Suppor) =
15	Public support percentage for 2011 (line 8	B, column (f) c	livided by line	13, column (f))		15	%
16	Public support percentage from 2010 Sch		•			· · · · · · · · · · · · · · · · · · ·	%
Secti	ion D. Computation of Investment In	come Perce	entage				
17	Investment income percentage for 2011 (* *	-			%
18	Investment income percentage from 2010		•				%
19a	331/3% support tests—2011. If the organ						
_	17 is not more than 331/3%, check this box		_	•		-	_
Ь	331/3% support tests—2010. If the organiz						
00	line 18 is not more than 33½%, check this leads to the Private foundation. If the organization di		-	-	•		_
20	Fireate roundation. If the organization of	JU HOL CHECK 2	LUON OITHINE 14	r, 13a, UI 13D,	しいせしん いいろ ロロメ	and see mst	ructions 🕨 📗

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Open to Public Inspection

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

Employer identification number Name of the organization MONTANA BIBLE COLLEGE 81-0444020 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) . 2 3 Aggregate grants from (during year) . . Aggregate value at end of year 4 5 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 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area ☐ Preservation of a certified historic structure ☐ Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ► Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (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:

b Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

\$

Part	Organizations Maintaining								
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and ot	her records, che	ck any of the	e followi	ing that are a sig	gnificant	use c	of its
а	☐ Public exhibition		d 🗆 Loa	n or exchang	e progra	ame			
	☐ Scholarly research								
	•		e 🗆 Our	JI					-
_	Preservation for future generations Provide a description of the organizat		and explain how	they further	the oraș	nization's evem	nt nurno	ee in	Part
4	XIV.		•	•	_			30 111	ıaıı
5	During the year, did the organization								
	assets to be sold to raise funds rather	than to be mainta	ined as part of t	ne organizati	on's coll	lection?	☐ Ye	s 🗌	No
Part	IV Escrow and Custodial Arra line 9, or reported an amoun			ganization a	answere	ed "Yes" to For	m 990,	Part	ĪV,
1a	Is the organization an agent, trustee,			for contribut	ions or	other assets no			
	included on Form 990, Part X?						☐ Ye	s 🗆	No
b	If "Yes," explain the arrangement in Pa	art XIV and comple	ete the following	table:					
_	voo, orpianis area germen					An	nount		
С	Beginning balance				1c				
ď	Additions during the year				1d				
e	Distributions during the year				1e				
f	Ending balance				1f				—
	Did the organization include an amour						☐ Ye	<u>e </u>	No
2a b	If "Yes," explain the arrangement in Pa		art A, inte Z i : .				_ ··	у Ш	.,,
	V Endowment Funds. Complete	ate if the organiz	ation answere	d "Ves" to F	orm 99	n Part IV line	10		
rait	Endowment i unds. Comple	(a) Current year	(b) Pnor year	(c) Two year		(d) Three years back		vears b	ack
4	Designing of year balance	40000			40000	40000		,	
1a	Beginning of year balance	40000	4000	'	40000	40000			
b	Contributions								-
С	Net investment earnings, gains, and				l				
	losses			-					
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses						ļ		
g	End of year balance			<u> </u>	40000	40000			
2	Provide the estimated percentage of t			g, column (a)) held a	s:			
а	Board designated or quasi-endowmer	nt ▶	%						
b		00 %							
С	Temporarily restricted endowment ▶								
	The percentages in lines 2a, 2b, and 2	•							
3a	Are there endowment funds not in the	e possession of the	ne organization t	hat are held	and adn	ninistered for the	,		
	organization by:							Yes	No
	(i) unrelated organizations						3a(i)		✓_
	(ii) related organizations						3a(ii)		✓_
b	If "Yes" to 3a(ii), are the related organ						3b		
4	Describe in Part XIV the intended uses	s of the organizati	on's endowment	funds.					
Part	VI Land, Buildings, and Equip	ment. See Forn	n 990, Part X, li	ne 10.					
	Description of property	(a) Cost or o	1,,,	t or other basis (other)		ccumulated preciation	(d) Bool	k value	
1a	Land			405969				40	5969
b	Buildings			1331293		289046		104	2247
C	Leasehold improvements			193107		113341	-	7	9767
d	Equipment			74264		59964		1	4300
e	Other			6500		1733			4767
	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90. Part X. colun		D(c).)	•			7049

Part VII	Investments—Other Securities	See Form 990, Part X,	ine 12.	
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year n	
(1) Financial	derivatives			
	neld equity interests			
(3) Other				
(A) S-COR	PORATION STOCK		COST BASIS	
	TERM CERTIFICATES OF DEPOSIT	727103	COST	
(C)				
(D)				
(E)				
(F)				,
(G) (H)				·
(l)				
	h) must aqual Form 000. Part V. aal. (P) line 12.1	828834		
Part VIII	b) must equal Form 990, Part X, col. (B) line 12.) Investments — Program Related		line 13	
	a) Description of investment type	(b) Book value	(c) Method of va	histop
	a) Description of investment type	(b) Book value	Cost or end-of-year m	
(2)				
(3)				
(4)				
(5)				
(6)				
<u>(7)</u> <u>(8)</u>				
(9)				
(10)				
	b) must equal Form 990, Part X, col. (B) line 13)			
Part IX	Other Assets. See Form 990, Pa	rt X, line 15.		·
	(a) Description		(b) Book value
(1) LIBRAR	Y HOLDINGS			134251
(2)				
(3)	<u> </u>			
(4)				
_(5)				
_(6)				
(8)				
(9)				
Total (Colu	mn (b) must equal Form 990, Part X, co	ol (R) line 15)		134251
Part X	Other Liabilities. See Form 990,		· · · · · · · · · · · · · · · · · · ·	134231
1.	(a) Description of liability	(b) Book value		" 1
	income taxes	,,		
(2)				·
(3)				
(4)				
(5)				
(6)				
(7)		_		
(8)				
(9)]	
(10)				
(11)				
	b) must equal Form 990, Part X, col (B) line 25.)			
	SC 740) Footnote. In Part XIV, provide		the organization's financial stater	ments that reports the
organization	n's liability for uncertain tax positions u	nder FIN 48 (ASC 740).		

D	,
Page	•

Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udite	d Financial Stateme	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	837943
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	813957
3	Excess or (deficit) for the year. Subtract line 2 from line 1		—	3	23986
4	Net unrealized gains (losses) on investments			4	723
5	Donated services and use of facilities		<u> </u>	5	
6	Investment expenses			6	
7	Prior period adjustments		· · · · · · · ·	7	
8	Other (Describe in Part XIV.)			8	5639
9	Total adjustments (net). Add lines 4 through 8			9	6362
10	Excess or (deficit) for the year per audited financial statements. Combine			10	30348
Part					urn
1	Total revenue, gains, and other support per audited financial statements			1	951921
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				-
а	Net unrealized gains on investments	2a	723		
b	Donated services and use of facilities	2b	118894		
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d		1	
е	Add lines 2a through 2d			2e	119617
3	Subtract line 2e from line 1			3	832304
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b	5639	1	
С				40	5639
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	837943
Part	XIII Reconciliation of Expenses per Audited Financial Staten	nents	With Expenses pe	r R	eturn
1	Total expenses and losses per audited financial statements			1	932851
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	_			
а	Donated services and use of facilities	2a	118894		
b	Prior year adjustments	2b			
С	Other losses	2c]	
d	Other (Describe in Part XIV.)	2d]	
е	Add lines 2a through 2d			2e	118894
3	Subtract line 2e from line 1	· ·		3	813957
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<u></u>]	
b	Other (Describe in Part XIV.)	4b		J	
С	Add lines 4a and 4b			40	<u> </u>
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18.)		5	813957
Part	<u> </u>				
	lete this part to provide the descriptions required for Part II, lines 3, 5, and				
	, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII	I, lines	2d and 4b. Also comp	plete	e this part to provide
-	Iditional information.				
PART	V, LINE 4 EARNINGS ARE USED TO FURTHER THE EXEMPT PURPOSES OF	MONTA	ANA BIBLE COLLEGE.		***************************************
DADT	X, LINE 2: THE COLLEGE IS A NON-PROFIT ORGANIZATION AS DESCRIBED	IN 501	(C)(3) OF THE INTERN	ΔI C	PEVENUE CODE AND IS
	A, LINE 2. THE GOLLEGE IS A NOW! NOT IT ORGANIZATION AS DESCRIBED		(0)(0) 01 1112 111121111		
GENE	RALLY EXEMPT FROM INCOME TAXES PURSUANT TO SECTIONS 501(A) OF	THE C	ODE AS SUCH THE C	ะดบ	FGF IS SUBJECT TO
- OLIVE	NALL LACIN TROUBLE TAKES TO GOODING TO SECTIONS OF INTERPRETATIONS OF				
FEDE	RAL INCOME TAXES ON ANY NET UNRELATED BUSINESS INCOME UNDER 1	THE PR	OVISIONS OF SECTION	N 51	1 OF THE INTERNAL
REVE	NUE CODE. THE COLLEGE'S DETERMINATION OF TAX EXEMPT STATUS IS	ALSO (CONSIDERED TO BE A	TAX	(POSITION. AS A
MATT	ER OF LAW, THE COLLEGE IS SUBJECT TO EXAMINATION BY FEDERAL AN	D STA	TE TAXING AUTHORITI	IES.	AS REQUIRED UNDER
FASR	INTEDDDETATION NO 48 ACCOUNTING FOR LINCERTAINTY IN INCOME TA	YFS /F	ASR ASC 740 INCOME	ΤΔ	YES) THE COLLEGE'S

Schedule D (Form 990) 2011 Pa	age 5
Part XIV Supplemental Information (continued)	
POLICY IS TO EVALUATE THE LIKELIHOOD THAT ITS UNCERTAIN TAX POSITIONS WILL PREVAIL UPON EXAMINATION BASED ON THI	E
EXTENT TO WHICH THOSE POSITIONS HAVE SUBSTANTIAL SUPPORT WITH THE INTERNAL REVENUE CODE AND REGULATIONS,	
REVENUE RULINGS, COURT DECISIONS, AND OTHER EVIDENCE. ALTHOUGH MANAGEMENT BELIEVES THAT AMOUNTS REFLECTED	
IN THE COLLEGE'S TAX RETURNS COMPLY WITH THE APPLICABLE FEDERAL AND STATE TAX REGULATIONS, BOTH THE IRS AND TH	HE
VARIOUS STATE TAXING AUTHORITIES CAN TAKE POSITIONS CONTRARY TO OUR POSITION BASED ON THEIR INTERPRETATION OF	
THE LAW. IT IS THE OPINION OF MANAGEMENT THAT THE COLLEGE HAS NO UNCERTAIN TAX POSITIONS. THE ONLY TAX YEARS	
SUBJECT TO EXAMINATION BY MAJOR TAX JURISDICTIONS ARE THOSE WITHIN STATUTORY LIMITS.	
PART XI, LINE 8 BOOK TO TAX DIFFERENCE FOR S CORP STOCK	
PART XII, LINE 4B BOOK TO TAX DIFFERENCE FOR S CORP STOCK	
•••	

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

MONTANA BIBLE COLLEGE

Schools

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

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2011
Open to Public Inspection

Name of the organization

Part I

Employer identification number

81-0444020

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1_	*	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?			
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media	2	✓	
	during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please			
	describe. If "No," please explain. If you need more space, use Part II	3	✓	
	MBC'S NONDISCRIMINATORY POLICY IS INCLUDED IN THE CATALOG, APPLICATION PACKET RECEIVED BY POTENTIAL STUDENTS, SCHOLARSHIP APPLICATIONS AND THE WEBSITE			
4	Does the organization maintain the following?			
a b	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially	4a	✓	
_	nondiscriminatory basis?	4b	✓	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	1	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	√	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
_	***************************************			
5 a	Does the organization discriminate by race in any way with respect to: Students' rights or privileges?	5a		1
b	Admissions policies?	5b		✓
С	Employment of faculty or administrative staff?	5c		1
d	Scholarships or other financial assistance?	5d		✓
е	Educational policies?	5e		✓
f	Use of facilities?	5f		✓
g	Athletic programs?	5g		1
h	Other extracurricular activities?	5h		
	<u></u>			
6a b	Does the organization receive any financial aid or assistance from a governmental agency?	6a 6b	 	1
5	If you answered "Yes" to either line 6a or line 6b, explain on Part II.		 	
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through	-		

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Gove

Som

OMB No 1545-0047

ernments, and Individuals in the United States	.
plete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.	Open to Public
► Attach to Form 990.	Inspection
	Employer identification number

a BIB							81-0444020	1
Part I General Information on Grants and Assistance	on Grants and	Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	ain records to subs	stantiate the amou or assistance?	ınt of the grants or	assistance, the g	rantees' eligibility fo	r the grants or assistan	ice, and / Yes No	
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	nization's procedur	es for monitoring	the use of grant fu	nds in the United	States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Earn 900 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 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$600 check this box if no one recipient received more than \$600 check this box if no one recipient received more than \$600 check this box if no one recipient received more than \$600 check this box if no one recipient received more than \$600 check this property will be a second more than \$600 check the second more tha	ssistance to Go	vernments and	Organizations i	in the United Si	tates. Complete if	f the organization and recipient received management	swered "Yes" ore than \$5,000.	
Part II can be duplicated if additional space is needed	ated if additional	space is needed					•	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1)								
(2)				i				
(3)								
(4)								
(5)								
(9)								
(T)								
(8)								
(6)								
(10)						:		
(11)								
(12)							-	
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	n 501(c)(3) and govorganizations listed	rernment organiza	tions listed in the l	ine 1 table			A A	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	s for Form 990.		Ö	Cat No 50055P		Schedule I (Form 990) (2011)	2011)

Schedule I (Form 990) (2011)

Schedule I (Form 990) (2011) (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. FUNDS ARE APPLIED DIRECTLY TOWARD STUDENT TUITION EACH SEMESTER UPON SIGNING OF SCHOLARSHIP CONTRACT. IF CONTRACT STIPULATIONS OR APPLICATION SCHEDULE I, PART I, LINE 2: TUITION SCHOLARSHIPS ARE AWARDED TO STUDENTS BASED ON APPLICATION CRITERIA, FINANCIAL NEED, AND ACADEMIC PERFORMANCE. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. CRITERIA ARE NO LONGER FULFILLED, THE SCHOLARSHIP MAY BE REVOKED. SCHOLARSHIP AWARDS ARE BASED ON SCHOLARSHIP FUNDS AVAILABLE. (e) Method of valuation (book, FMV, appraisal, other) 0 (d) Amount of non-cash assistance 32625 (c) Amount of cash grant Part III can be duplicated if additional space is needed (b) Number of recipients 20 1 SCHOLARSHIPS FOR STUDENTS ATTENDING COL (a) Type of grant or assistance Part IV Part III 8 က Ŋ 4 9

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

Open To Public Inspection

Name of the organization

MONTANA BIBLE COLLEGE

Employer identification number 81-0444020

Part	Excess Benefit Transactions Complete if the organization an	(section swered	501(c)(3 "Yes" o	s) and section 501(c)(4 n Form 990, Part IV, I	4) organiz ine 25a o	zations only). or 25b, or For	m 99	D-EZ,	Part \	V, line	40b.		
1	(a) Name of disqualified person	(a) Name of disqualified person			(b) Description of transaction						(c) Corrected?		
	(a) Name of disqualified person				(5) = 555						Yes	No	
(1)													
(2)													
(3)													
(4)													
(5) (6)													
2	Enter the amount of tax imposed of	n the o	rganizat	ion managers or dis	gualified	persons du	rina t	he ve	ar	ļ			
_									<u>⊶</u> .				
3 Enter the amount of tax, if any, on line 2, above, reimbe			· · · · · · · · · · · · · · · · · · ·										
		-, -, -, -,	, , , , , , , , , , , , , , , , , , , ,	,					•				
Part	Loans to and/or From Interes Complete if the organization an			n Form 990, Part IV, I	ine 26, oı	r Form 990-E	Z, Pa	rt V, li	ine 38	Ba.			
(a) Name of interested person and purpose		(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due		(e) In default?		(f) Approved by board or committee?		(g) Written agreement?		
		То	From				Yes	No	Yes	No	Yes	No	
(1)													
(2)		1											
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Total		1	LL	▶ \$			3000					A 26	
Part	Grants or Assistance Benefiti	ng Intei	rested F	Persons.			CONTROL	SERVICE SERVICE					
	Complete if the organization an	swered	"Yes" o	n Form 990, Part IV, I	ine 27.								
	(a) Name of interested person	(b) Re	elationship	between interested person organization	and the	(c) A	Amount	and ty	pe of a	ssistan	СӨ		
(1)													
(2)													
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(7) (9)		+				ļ			-				
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(9) (10)		1											
(10)						I	-						

Business Transactions Involving Interested Persons.

	Complete if the organization a	inswered "Yes" on Form 99	0, Part IV, line 28a, 2	28b, or 28c.		
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
					Yes	No
. ,	FENNO	BOARD DIRECTOR	0	COLLEGE HAS SUBSTANTIAL CD		✓
(2)					\sqcup	
(3)					┼	
(4)					₩	
(5) (6)		 			-	
(7)					\vdash	
(8)						
(9)						
(10)						
Part V	Supplemental Information Complete this part to provide	additional information for re	esponses to question	ns on Schedule L (see instructions).	
				O AN OFFICER OF MANHATTAN ST	ATE	
	E COLLEGE HAS SUBSTANTIAL C					
	••••••					

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

MONTANA BIBLE COLLEGE

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

81-0444020

FORM 990, PART VI, SECTION A, LINE 2: DON CHEEVER IS GALE HEIDE'S FATHER-IN-LAW. KEN FENNO IS THE CEO OF MANHATTAN
STATE BANK, WHERE MBC INVESTS FUNDS.
FORM 990, PART VI, SECTION A, LINE 8B: COMMITTEE MINUTES ARE MAINTAINED DOCUMENTING ANY MAJOR DECISIONS THAT
AFFECT THE COLLEGE. THESE DECISIONS ARE THEN PRESENTED TO THE BOARD AND DOCUMENTED IN THE BOARD MINUTES.
FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS REVIEWED BY THE SECRETARY/TREASURER OF THE BOARD AND THEN
PRESENTED TO THE ENTIRE BOARD FOR APPROVAL PRIOR TO BEING FILED.
FORM 990, PART VI, SECTION B, LINE 12: CONFLICT OF INTEREST: ANY DIRECTOR WITH A POTENTIAL CONFLICT OF INTEREST ON A
PARTICULAR ISSUE SHALL NOTIFY THE BOARD AND REFRAIN FROM DISCUSSION EXCEPT AS QUESTIONED BY THE BOARD.
DIRECTORS WITH A POTENTIAL CONFLICT SHALL ABSTAIN FROM VOTING ON THOSE ISSUES. THE BOARD SHALL NOTE THE
THE POTENTIAL CONFLICT IN THEIR MINUTES AND SHALL TAKE EXTRA CAUTION IN ORDER TO PROTECT THE INTEGRITY OF THE
COLLEGE AS WELL AS THE INTEGRITY OF THE DIRECTORS. THIS EXTRA CAUTION SHALL INCLUDE COMPARING OTHER OPTIONS.
ADDITIONALLY, THE DIRECTORS REVIEW ANNUALLY IN MARCH ISSUES THAT HAD CONFLICT POTENTIAL AS FURTHER
MONITORING THAT THE POLICY IS FOLLOWED.
FORM 990, PART VI, SECTION B, LINE 15: ANNUAL COMPENSATION REVIEWS ARE DONE AT THE LAST BOARD OF DIRECTORS'
MEETING OF THE FISCAL YEAR. THE EXECUTIVE COMMITTEE HAS DIRECT DETERMINATION OF SALARIES WITH RESPECT TO THE
ANNUAL BUDGET, BUT FINAL APPROVAL IS GIVEN BY THE ENTIRE BOARD.
FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE COLLEGE'S PRESIDENT AND KEY EMPLOYEES IS APPROVED BY
THE BOARD BASED ON THE RECOMMENDATION FROM THE EXECUTIVE COMMITTEE. THIS COMMITTEE'S RECOMMENDATION IS BASED
ON REVIEWING THE RESPONSIBILITIES OF THE POSITION, THE COLLEGE'S RESOURCES, AND IF NEEDED, CONSULTING ABHE DATA TO
DETERMINE WHAT SIMILAR POSITIONS ARE BEING PAID IN SIMILAR SIZE SCHOOLS.
FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS: NET UNREALIZED GAINS ON INVESTMENTS: 604