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Form **990**

SCANNED MAY 3 1 2013

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

Department of the Treasury

benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

<u> </u>	For the	2012 calc	ander year or toy year beginning 2012 o	od onding		· · ·	, 20						
=		or the 2012 calendar year, or tax year beginning , 2012, and ending , 20 neck if applicable C Name of organization WORLD BIBLE SCHOOL OF TULARE COUNTY D Employer identification number											
В				————	- 								
님	Address	-	Doing Business As		77-0236056								
	Name ch	nange	Number and street (or P O box if mail is not delivered to street address)	Į€	Telepho	ne number							
Ц	Initial ret	tum	P.O. BOX 3700				559-967-0913						
	Terminat	ted	City, town or post office, state, and ZIP code										
	Amende	d return	VISALIA, CA 93278 - 3700		G	Gross re	eceipts \$	573,327					
	Applicati	ion pending	roup return	for affiliates? Yes	☑ No								
	JOEL COPPINGER P.O. BOX 3700, VISALIA, CA 93278 H(b) Are all affiliates included? Yes No												
1	Tax-exempt status: ✓ 501(c)(3) □ 501(c) () (insert no.) □ 4947(a)(1) or □ 527 If "No," attach a list (see instructions)												
J	J Website: ▶ H(c) Group exemption number ▶												
K			✓ Corporation Trust Association Other ► L Yea	ar of formation			of legal domicile:	CA					
_	art I	Summ		a	1332	111 01210	or regar dornions.	<u> </u>					
_	1		escribe the organization's mission or most significant activities:			-1 1-	As Assah Aba Dib						
	'												
9			tho is interested in learning it. We achieve this by printing, assemb										
ā			free of charge, to any person who is interested in studying the Bib	le. We also	train and su	pport p	reachers and fo	llow up					
Activities & Governance	١ ـ		n foreign countries to further assist them in their studies.										
Š	2		is box $ ightharpoonup$ if the organization discontinued its operations or dis	sposed of	more than 2	25,% of	its net assets.						
8	3		of voting members of the governing body (Part VI, line 1a)			3		4					
es	4	Number	of independent voting members of the governing body (Part VI,	, line 1b)		4		4					
¥	5		nber of individuals employed in calendar year 2012 (Part V, line	2a) .		5		1					
Ę	6	Total nur	nber of volunteers (estimate if necessary)			6	•	6					
•	7a		elated business revenue trom-Part VIII, column (C), line 12			7a							
	Ь		lated business taxable income from Form 990 T, line 34			7b		0					
	T		(a)v 1 4 2013 [Y]		Prior Year		Current Ye	ear					
_	8	Contribut	tions and grants(Part VIII, line 1h) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		379,083		E72 21E						
훒	9		service revenue (Part VIII) line 2g)	· ·		379,063		573,315					
Revenue	10		int income (PartiVIII, columni(A), lines, 3,44, and 7d)				12						
æ				• • -			-						
	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .										
	12		enue — add lines 8 through 11 (must equal Part VIII, column (A), lin		3	379,090		573,327					
	13		nd similar amounts paid (Part IX, column (A), lines 1-3)	· · _	3	306,687		518,065					
	14		paid to or for members (Part IX, column (A), line 4)	· ·									
S	15		other compensation, employee benefits (Part IX, column (A), lines	5–10)		23,506		24,856					
Expenses	16a	Profession	onal fundraising fees (Part IX, column (A), line 11e)			-							
ğ	b	Total fund	draising expenses (Part IX, column (D), line 25) ▶	36,366				i					
Щ	17	Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)			54,963		36,842					
	18	Total exp	enses. Add lines 13-17 (must equal Part IX, column (A), line 25	s) . [385,156		579,763					
	19		less expenses. Subtract line 18 from line 12			-6,066		-6,436					
- S	1				ginning of Curre		End of Ye						
Net Assets or Fund Balances	20	Total ass	ets (Part X, line 16)	<u> </u>	- - "	32,414							
& B	21		lities (Part X, line 26)	· ·				24,600					
5.5	22		ts or fund balances. Subtract line 21 from line 20	· ·		2,303		925					
	art II		ture Block	· • .		30,111		23,675					
Un	der pena	lties g≸ perju	ry, I declare that I have examined this return, including accompanying schedules etc. Declaration of property (other than officer) is based on all information of which	s and stateme ch preparer h	ents, and to the as any knowled	best of n	ny knowledge and	belief, it is					
Sig He	-	V To	el Coppinger Director/Treasurer	•	Date	5	9-13						
<u> </u>		17.	pe preparer's name Preparer's signature	Date			PTIN						
Pa]			Check [self-emp	_] # [
	epare				<u></u>	<u> </u>	,	 -					
Us	e Onl					EIN ►							
NA.			ddress >		Phone	on e							
ivia	y the IH	io discuss	s this return with the preparer shown above? (see instructions)	· · ·			· · L Yes	□ No					

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form **990** (2012)

Form 99	0 (2012) Pa	je 2
Part		_
1	Check if Schedule O contains a response to any question in this Part III	<u>U</u>
•		
	Schedule # 1	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	lo
_	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	_
	services?	0
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	hv
-	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth the total expenses, and revenue, if any, for each program service reported.	ers,
	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
-14	Schedule # 1	
	Jenedule # 1	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses	

Part	Checklist of Required Schedules			aye o
•			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	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		/
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
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
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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 and XII is optional.	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		1	V
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)	16	•	1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	17		
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	18		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		1
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		*

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		√
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
	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? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		1
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, highest 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	Ü	✓
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 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	29 30		1
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, Part II, III, or IV, and Part V, line 1	34		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R,</i>			
38	Part VI	37	√	✓
	· · · · · · · · · · · · · · · · · · ·			

Part				_
	Check if Schedule O contains a response to any question in this Part V			<u> </u>
10	Enter the number reported in Day 2 of Four 1000 Fator 0 if not contact.		Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1	i I		
C	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	, [
•	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		<u> </u>	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	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		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			١,
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		√
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	CL		
7	Organizations that may receive deductible contributions under section 170(c).	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		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		•
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		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			
_	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 10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
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	[l	
	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	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	· ·	<u>····</u>	V							
	on a describing 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.										
b 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	√								
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		✓							
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓							
6 7a	Did the organization have members or stockholders?	6 7a		√							
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:	70									
а	The governing body?	8a	1	الـــــا							
b	Each committee with authority to act on behalf of the governing body?	8b	1	 							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	•								
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		nde l								
	The state of the country of the state of the		Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		1							
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		<u> </u>							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	<u> </u>							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		_							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		1							
c	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		1							
14	Did the organization have a written document retention and destruction policy?	14		1							
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			,							
а	The organization's CEO, Executive Director, or top management official	15a	1	J							
b	Other officers or key employees of the organization	15b									
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?	46-									
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		✓							
Б	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									
Secti	on C. Disclosure	.00		—							
17 18	List the states with which a copy of this Form 990 is required to be filed ► 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.	ı 501(c)(3)s	only)							
19	Own website Another's website Upon request Other (explain in Schedule O) 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.	f inter	est p	olicy,							
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: Local P. Coppinger, 1130 Days Dr. Visalia, Ca 93291 559,967,0913	of the	:								

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employee	es, 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 org	aniz	atic	n c	ompe	nsa	ited any curren	t officer, director	r, or trustee.	
				(C)						_
(A)	(B)			neck		than o		(D)	(E)	(F)	
Name and Title	Average hours per	office	oox, unless person is both an officer and a director/trustee)					Reportable compensation	Reportable compensation from	Estimated amount of	
	week (list any hours for				•			from the	related organizations	other compensation	
	related organizations	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization	
	below dotted	호환	onal		Ploy	₩ C		(44-22 1093-141130)		and related	
	line)	ıstee	trust		%	pens				organizations	
			8			ated					
(1) Inc. D. Compings											
(1) Joel P. Coppinger Trustee / Director / Treasurer	35	/		1	1	1		18,180	0		0
(2) Les Spitler	0	Ť		Ť	Ť			10,100	-		
Trustee / President	† -	1		1				0	o		0
(3) Claude Vice	0										
Trustee / Secretary		✓		✓				о	o		0
(4) Chris Crumly	0										_
Trustee / Vice President		✓		✓				0	o		0
(5)											_
(6)											_
(7)											_
(8)											_
					<u> </u>						_
(9)											
(10)											
(11)											_
(12)				_	<u></u>		ļ				_
(14)											
(13)											_
(14)											-

Part	Section A. Officers, Directors, Trust	ees, Key E	mplo	yee:	s, aı	na F	lighes	st C	ompensated E	mployees (contin	ued)		
•	(A) Name and title		box,	unles	Pos neck ss pe	rson	e than o is both or/trust	an ee)	(D) Reportable compensation from	(E) Reportation compensation related	n from	am	(F) imated ount of other	
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizati (W-2/1099-N	ons	comp fro orga and	pensation om the inization related nization:	1
(15)														
(16)								_						
(17)								_						
(18)			ļ <u>-</u>					-						
(19)												•		
(20)						ļ.,		_						
(21)				_				-						
(22)														
(23)														
(24)														
(25)				-								·		
1b	Sub-total		<u> </u>	L	<u></u>	L.	L	▶	18,180		0			0
C	Total from continuation sheets to Part	VII, Sectio	n A					>	10,100					
d		<u></u>						<u> </u>	18,180		0			0
2	Total number of individuals (including but reportable compensation from the organi			ose	e list	ted a	above	e) w	ho received m	ore than \$1	00,00	0 of		
	Did the examination but any farmer of		.						J Link			- <u> </u>	Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete s							emp 	oloyee, or nigh	est compe	ensate	a		1
4	For any individual listed on line 1a, is the	sum of re	portal	ble (con	nper	nsatio					е 🗀		- `
	organization and related organizations individual	greater that	an \$1	150,	000)? II	f "Yes	5, "	complete Sch	edule J fo	or suci	1		
5	Did any person listed on line 1a receive of									ation or inc	 dividua	4 al		✓
Soction	for services rendered to the organization on B. Independent Contractors	? If "Yes," c	ompl	ete	Sch	nedu	ıle J f	or s	uch person	<u> </u>		5		✓
1	Complete this table for your five highest of compensation from the organization. Replyear.													ах
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compens		
										-				
	Total number of independent contracts	no (moludio	a h	+ -	ot 1	ım:i+	od *=	41-	one listed sha	מלייו (מיי				
~	Total number of independent contractor received more than \$100,000 of compens							u 1	ose iisteu adt	ve) wild				

Part VIII		Statement of Revenue									
		Check if Schedule O contains a response to any	ques				<u> </u>				
				(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 t	1a	Federated campaigns 1a					<u> </u>				
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership dues 1b									
A S	С	Fundraising events 1c									
a g	ď	Related organizations 1d									
3, <u>F</u>	е	Government grants (contributions) 1e									
er S	f	All other contributions, gifts, grants,				į					
듗똳			3,315			•					
g g	g	Noncash contributions included in lines 1a-1f \$				1					
	h	Total. Add lines 1a–1f	P Condo	573,315							
Program Service Revenue		Business	-oae								
eve	2a						· · · - · ·				
8	Ь										
ڲٙ	d										
Š	e										
ī	•	All other program service revenue .									
Po	g	Total. Add lines 2a–2f	ightharpoonup			I					
	3	Investment income (including dividends, inte	rest,	,	·						
		and other similar amounts)	▶	12							
	4	Income from investment of tax-exempt bond proceed	ds▶	-	· · · · · · · · · · · · · · · · · · ·						
	5	Royalties	▶								
		(i) Real (ii) Perso	nal								
	6a	Gross rents]				;				
	b	Less: rental expenses									
	С	Rental income or (loss)									
	_ d	Net rental income or (loss)	>								
	7a	Gross amount from sales of (i) Securities (ii) Other	er								
		assets other than inventory									
	b	Less cost or other basis and sales expenses .									
		Gain or (loss)									
	C d	Net gain or (loss)									
		Thet gain or (loss)			· · · · · · · · · · · · · · · · · · ·						
ne	8a	Gross income from fundraising									
Other Reven		events (not including \$									
æ		of contributions reported on line 1c).					,				
ē		See Part IV, line 18 a									
돛	ь	Less: direct expenses b					ı				
			▶								
	9 a	Gross income from gaming activities.									
		See Part IV, line 19 a									
		Less: direct expenses b									
		Net income or (loss) from garning activities									
	10a	Gross sales of inventory, less									
	_	returns and allowances a					1				
		Less: cost of goods sold b				ļ					
	C	Net income or (loss) from sales of inventory Miscellaneous Revenue Business (_		· · · · · · · · · · · · · · · · · · ·	<u> </u>					
	11a		,Jue				· · · · · · · · · · · · · · · · · · ·				
) ia										
	C										
	d	All other revenue									
		Total. Add lines 11a-11d	•		*						
	12	Total revenue. See instructions		573,327		<u> </u>					

Dart IY	Stateme	ant of	Eunctional	Expenses
raitin	Stateilit	31 IL U1	runcuona	EXPENSES

_	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	ll other organization	s must complete colu	ımn (A).
	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	0			-
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	518,065	518,065		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	18,180		1,818	16,362
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	3,7,50			
7 8	Other salaries and wages				
9	Other employee benefits	6,134		613	5,521
10	Payroll taxes	542		54	488
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting				
þ	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	1,606		1,606	
14	Information technology	2,445		122	2,323
15	Royalties				
16	Occupancy	5,569		557	5,012
17	Travel	5,863			5,863
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	468		47	421
23	Insurance	418		42	376
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)		İ		
а	Printed teaching material	1,160	1,160		
b	Shipping	4,985	4,985		
C	Bank charges - wire outs	705	705		
d	Credit card fees	758	758		
е	All other expenses	12,865		12,865	
25	Total functional expenses. Add lines 1 through 24e	579,763	525,673	17,724	36,366
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Р	art X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X	(🛘
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	25,021	1	18,407
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
rA.	6	Loans and other 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 employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
ets	,	- · · · · · · · · · · · · · · · · · · ·		7	
Assets	8	Notes and loans receivable, net		8	4.000
	9	Prepaid expenses and deferred charges	5,100	9	4,200
	10a	Land, buildings, and equipment: cost or	<u> </u>	9	
	b	tess: accumulated depreciation 10b 3,212	2,293	10c	1,993
	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)	32,414	16	24,600
	17	Accounts payable and accrued expenses	2,303	17	925
	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	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
ab.		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	2,303	26	925
Net Assets or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.			
ane	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	
ᅙ	29	Permanently restricted net assets		29	
בַּ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and □			
6		complete lines 30 through 34.			
ţ	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
t A	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ne	33	Total net assets or fund balances	30,111	33	23,675
	34	Total liabilities and net assets/fund balances	32,414	34	24,600

orm 95	30 (2012)				Ра	ge 12
Pari	X Reconciliation of Net Assets					90
•	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			57	3,327
2	Total expenses (must equal Part IX, column (A), line 25)	2				9,763
3	Revenue less expenses. Subtract line 2 from line 1	3				6,436
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		-		0,111
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10			2	3,675
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," ex	olaın	ın			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled o	or		l	
	reviewed on a separate basis, consolidated basis, or both:					
_	Separate basis Consolidated basis Both consolidated and separate basis					
b	The state of game and the state of the state		.	2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	d on	a			
	separate basis, consolidated basis, or both:			- 1		1
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over the suitable of the forestell extraords and calculate a first suitable of the forestell extraords and calculate a first suitable of the forestell extraords and calculate a first suitable of the forestell extraords and calculate a first suitable of the forestell extraords and calculate a first suitable of the forestell extraords and calculate a first suitable of the forestell extraords.					
	of the audit, review, or compilation of its financial statements and selection of an independent accounts the audit and accounts the audit and accounts the audit and accounts the audit accounts the audit and accounts the audit accounts the a		L	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain	ın			

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?......
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2012)

3b

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

Employer identification number

	LD BIBLE SCHOOL							7.7-		36056
			rity Status (All orga						nstructio	ons.
The	_	· -	ation because it is: (Fo		-		-	-		
1	_		hes, or association of			ed in sec	tion 170(b)(1)(A)(i))-	
2			170(b)(1)(A)(ii). (Attac		· ·					
3	•	•	spital service organiza							
4	_	-	on operated in conjun	ction with	a hospit	al descri	oed in se	ction 170)(b)(1)(A)	(iii). Enter the
_	•	ne, city, and stat								
5		on operated for o)(1)(A)(iv). (Com	the benefit of a colle- plete Part II.)	ge or uni	versity ov	wned or	operated	by a go	vernment	tal unit described in
6 7	An organizati	on that normally	nment or government receives a substantia i (A)(vī). (Complete Par	al part of					it or fron	n the general 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	receives: (1) more that d to its exempt funct ent income and unre- lifter June 30, 1975. Se	ions-sul lated bus	oject to d siness ta	certain ex xable inc	ceptions	s, and (2) ss section	no more	than 331/3% of its
10	☐ An organization	on organized and	l operated exclusively	to test fo	r public s	safety. Se	e sectio :	n 509(a)(4).	
11	An organization	on organized ar one or more pub	nd operated exclusive olicly supported organ describes the type of	ely for th	e benefi describe	t of, to p	perform to on 509(a	the functi i)(1) or se	ions of, ection 50	9(a)(2). See section
	a 🗌 Type I	b Type	II c ☐ Type II	I-Functio	nally inte	grated	d □ -	Type III-N	lon-funct	ionally integrated
e	By checking to other than for	this box, I certify undation manage	that the organization ers and other than one	is not co	ntrolled d	irectly or	ındırectl	y by one	or more	disqualified persons
_	or section 509			_			_			
f	organization,	check this box	a written determination							e III supporting
g	Since August following pers		he organization accep	pted any	gift or co	ontributio	n from a	ny of the		
	• • •	-	ndirectly controls, eithody of the supported		-		-	described	d in (11) ar	nd Yes No
		-	on described in (i) abo	-						11g(ii)
		•	a person described in							11g(iii)
h			on about the support							1.00.01
(i)	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	rganization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organiz	s the ion in col zed in the S ?	(vii) Amount of monetary support
				Yes	No	Yes	No	Yes	No	1
A)										
B)										
C)										
D)										
E)										
rata										
			•						,	1

Schedule A (Form 990 or 990-EZ) 2012 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2008 (d) 2011 **(b)** 2009 (c) 2010 (e) 2012 (f) Total Gıfts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 379,083 334,167 482,877 311,951 573,315 2,081,393 2 Tax levied revenues the for 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	334,167	482,877	311,951	379,083	573,31	5 2,081,393
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.						2,081,393
	on B. Total Support						
_	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	334,167	482,877	311,951	379,083	573,31	5 2,081,393
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		159	22	7	1	2 200
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						2,081,593
12	Gross receipts from related activities, etc					12	NONE
13	First five years. If the Form 990 is for the						
Secti	organization, check this box and stop he on C. Computation of Public Support	t Percentage	<u> </u>	· · · · · ·			· · · · ·
14	Public support percentage for 2012 (line			1 column (fl)		14	99.9904 %
15	Public support percentage from 2011 Sci					15	99.9903 %
16a	331/3% support test-2012. If the organi						
	box and stop here. The organization qua						
b	33 ¹ / ₂ % support test—2011. If the organ check this box and stop here. The organ					15 is 33¹/3% 	
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part IV how the organization meets the "forganization	ets the "facts-a acts-and-circu	ınd-cırcumstar mstances" tes	nces" test, che t. The organiza	ck this box an	d stop here.	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization or Explain in Part IV how the organization or supported organization	tion meets the leets the "facts	"facts-and-cir -and-circumst	cumstances" ances" test. TI	test, check th ne organization	is box and s n qualifies as	stop here. a publicly
18	Private foundation. If the organization di						
	instructions						
							90 or 990-EZ) 2012

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.)

Cost!	on A Public Support	under the te	ists listed Delo	ow, piease co	implete Part	11.)	
	on A. Public Support	(a) 0000	(h) 0000	(=) 0010	(d) 0044	(0) 0010	(A Total
Calen 1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 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						
с 8	Add lines 7a and 7b						
Secti	on B. Total Support		<u>,</u>		•		
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6		ļ				<u></u>
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						
C	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.)						1
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 her		n's first, secon		_		
	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line 8						%
16	Public support percentage from 2011 Sch			<u> </u>	<u> </u>	16	<u> </u>
	on D. Computation of Investment Inc						···
17	Investment income percentage for 2012 (I						<u>%</u>
18	Investment income percentage from 2011					18 231 n	% and line
19a	331/3% support tests—2012. If the organi 17 is not more than 331/3%, check this box						
b	331/3% support tests—2011. If the organiz		_			_	
U	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization did		-				

Schedule A (I	Form 990 or 990-EZ) 2012	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
*======		
	······································	
	······································	-
	······································	
• • • • • • • • • • • • • • • • • • • •		
••		
	······································	
·····		
•••••		
·		
····		
	······	

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047 2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number **WORLD BIBLE SCHOOL OF TULARE COUNTY** 77-0236056 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose 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 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Total number of conservation easements 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 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 violations, and enforcement of the conservation easements it holds? 6 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 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIII, 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 XIII, 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: 2 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:

_	
Page	4

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection terms (check all that apply): a	Part	II Organizations Maintaining	Collections of	Art, His	torical T	reasures	, or Ot	her Similar As	ssets (continued)
b	3			ther recor	ds, chec	k any of th	e follov	ving that are a s	significant use of its
c	а	☐ Public exhibition							
A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collections'	b			e	Other	r			
XIII.	C	☐ Preservation for future generation:	S						
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	4		tion's collections	and expla	ain how t	hey further	the org	ganization's exe	mpt purpose in Part
Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV. line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No Yes No If "Yes," explain the arrangement in Part XIII and complete the following table: Beginning balance	5								
line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table: Beginning balance	Part								
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	جندهم					,u	u	.00 .00 .00	,
included on Form 990, Part X?	1a	Is the organization an agent, trustee	. custodian or oth	ner interm	nediary fo	or contribu	tions or	other assets n	ot
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance		included on Form 990. Part X?							☐ Yes ☐ No
C Beginning balance	ь								
C Beginning balance	_	ii 103, explain the artangement iii i	art Am and comp		nowing a	abio.			mount
d Additions during the year Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line 21? Did the organization include an amount on Form 990, Part X, line 21? Endowment Funds. Complete if the explanation has been provided in Part XIII. Check here if the explanation has been provided in Part XIII. The part XIII. Check here if the explanation has been provided in Part XIII. The part XIII. Check here if the explanation has been provided in Part XIII. The part XIII. Check here if the explanation has been provided in Part XIII. The part XIII. Check here if the explanation has been provided in Part XIII. The part XIII. Check here if the explanation has been provided in Part XIII. The part XIII. T	_	Reginning balance					10	· · · · · · · · · · · · · · · · · · ·	
e Distributions during the year f Ending balance. 20 Did the organization include an amount on Form 990, Part X, line 217	_								
1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 217							ļ		
Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (al)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations f "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Description of property (a) Cost or other basis (chier) (b) Cost or other basis (chier) (c) Accumulated depreciation (d) Book value (d) Book value d Equipment a Land b Buildings c Leasehold improvements d Equipment 4 Other 1 1,219 1,993									
b if "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Seginning of year balance (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back	_								□ Voc □ No
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.		_							
1a Beginning of year balance (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back									
Beginning of year balance	rai	Endowment Funds. Comp							
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations 3a(ii) 5 If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (c) Accumulated depreciation (d) Book value depreciation (d) Book value depreciation (d) Book value (e) Cost or other basis (investment) (other) (d) Book value (e) Cost or other basis (other) (e) Accumulated (d) Book value (e) Cost or other basis (other) (e) Accumulated (d) Book value (e) Cost or other basis (other) (e) Accumulated (d) Book value (e) Cost or other basis (other) (e) Accumulated (d) Book value (e) Cost or other basis (other) (e) Accumulated (d) Book value (e) Cost or other basis (other) (e) Accumulated (d) Book value (e) Cost or other basis (other) (e) Accumulated (d) Book value (e) Cost or other basis (other) (e) Accumulated (e) Accumulated (e) Cost or other basis (other) (e) Accumulated (e) Accumul	4 -	Danissis a structure balance	(a) Current year	(0) [1]	or year	(c) (wo year	us back	(u) Three years Date	(e) rour years back
c Net investment earnings, gains, and losses			<u> </u>	 		-			
d Grants or scholarships Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment d Equipment 3,212 1,219 1,993 e Other				 					
d Grants or scholarships e Other expenditures for facilities and programs	С								
e Other expenditures for facilities and programs	_			ļ					<u> </u>
f Administrative expenses	d	•							
g End of year balance	е								
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶ % Permanent endowment ▶ % Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations . 3a(i) (ii) related organizations . 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . 3b Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's continue basis (investment) (cither) (d) Book value depreciation (d) Book value depreciation (d) Book value (d) Book value (d) Book value (d) Equipment . 3,212 1,219 1,993 e Other . 3,212 1,219 1,993	f	Administrative expenses		ļ					
a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	g	End of year balance							
b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	2				e (line 1g	j, column (a	a)) held	as:	
b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	а	Board designated or quasi-endowme	nt ▶	%					
The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	b	Permanent endowment ▶	 %						
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	С								
organization by: (i) unrelated organizations		The percentages in lines 2a, 2b, and 2	2c should equal 10	00%.					
(i) unrelated organizations	3a	Are there endowment funds not in the	e possession of the	he organı	zation the	at are held	and ad	lministered for t	he
(ii) related organizations		organization by:							Yes No
(ii) related organizations		(i) unrelated organizations							3a(i)
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (e) Accumulated depreciation (other) (III The pass (other) (II									3a(ii)
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (e) Accumulated depreciation (other) (III The pass (other) (II	b	If "Yes" to 3a(ii), are the related organ	izations listed as i	required o	on Sched	ule R? .			3b
Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value	4	Describe in Part XIII the intended use	s of the organizati	on's endo	wment f	unds.			
tall Land (investment) (other) depreciation b Buildings	Part	VI Land, Buildings, and Equip	ment. See Forr	n 990, P	art X, lin	e 10.		-	
b Buildings		Description of property							(d) Book value
b Buildings		Land	_		<u> </u>				
c Leasehold improvements	_			·	<u> </u>	· ,	<u> </u>		
d Equipment		-			 		 -		
e Other	-		•	<u> </u>	 	2 212	 	1 210	1 002
						3,212	 	1,213	1,393
			nust equal Form 9	90 Part	X colum	1 (B) line 1	0(c) 1		1 002

Part VII	Investments - Other Securities	. See Form 990, Part X,	line 12.	
(1	Description of security or category (including name of security)	(b) Book value	(c) Method of valor Cost or end-of-year m	
	l derivatives			
	held equity interests			
(3) Other		_	<u> </u>	
(A) (B)				
(C)		-		
(D)				· · · · · · · · · · · · · · · · · · ·
(E)				
(F)				• •
(G)				
(H)				
(1)				
	(b) must equal Form 990, Part X, col. (B) line 12.)		<u>L</u>	
Part VIII	Investments – Program Related			
	(a) Description of investment type	(b) Book value	(c) Method of val Cost or end-of-year m	
(1)			Cost of and or your in	and value
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	(b) must equal Form 990, Part X, col. (B) line 13) ▶			
Part IX	Other Assets. See Form 990, Pa			<u></u>
	(;	a) Description		(b) Book value
(1)				
(2)				
(3)		·		
(4) (5)				
(6)				<u> </u>
(7)				· · · · · ·
(8)				
(9)	_			
(10)				
	ımn (b) must equal Form 990, Part X, c			
Part X	Other Liabilities. See Form 990,			
1.	(a) Description of liability	(b) Book value	4	
	income taxes		4	
(2)				
(4)			4	
(5)			4	
(6)			-∤	
(7)			1	
(8)			1	}
(9)			1	ļ
(10)	-		1	
(11)			1	
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25)		1	
2. FIN 48 (AS	SC 740) Footnote. In Part XIII, provide the	text of the footnote to the org	ganization's financial statements that	reports the organization's
liability for ui	ncertain tax positions under FIN 48 (ASC 7	'40). Check here if the text of	the footnote has been provided in P	art XIII

art	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	<u> </u>
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:		
а	Net unrealized gains on investments		
b	Donated services and use of facilities]	
C	Recoveries of prior year grants]	
d	Other (Describe in Part XIII.)	1	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		· · · · ·
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
art	Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Retu	m
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	1 1	
b	Prior year adjustments]	
C	Other losses]	
d	Other (Describe in Part XIII.)]	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	1	
b	Other (Describe in Part XIII.)	7	
С	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
ırt	Supplemental Information		
mp	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F	Part IV, Ir	nes 1b and 2b;
t V	line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	o provide	e any additional
rm	ation.		
			•••••

m 990) 2012	Page 5
Supplemental Information (continued)	
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	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.

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection Employer identification number

OMB No 1545-0047

WORI	D BIBLE SCHOOL OF TULARE					77-0236056
Par	General Information Form 990, Part IV, line		ies Outside	the United States. Com	plete if the organization ar	nswered "Yes" to
1	For grantmakers. Does the					
	assistance, the grantees' eli				n criteria used to award th	
	grants or assistance?					∐Yes
2	For grantmakers. Describe assistance outside the Unite		the organizati	on's procedures for moni	toring the use of its gra	nts and other
_3	Activities per Region. (The fo	ollowing Part	I, line 3 table	can be duplicated if additio	nal space is needed.)	
	(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 (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	South Asia	NONE	NONE	Program services	Teaching the Bible	247,853
(2)	Sub-Saharan Africa	NONE	NONE	Program services	Teaching the Bible	270,212
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)	· · · · · · · · · · · · · · · · · · ·		!		-	-
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17) 3a	Sub-total					518,065
b	Total from continuation sheets to Part I					310,003
С	Totals (add lines 3a and 3b)					518,065

Schedule	F (Form	990)	2012	

Page 2

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
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)									
)									
0)									
1)									
2)			· · · · · · · · · · · · · · · · · · ·						
3)									
4)									
5)									
6)									

art III Grants and Other A Part III can be duple	Assistance to Individu cated if additional spar	u als Outside t ce is needed.	he United State	s. Complete if the	organization ans	wered "Yes" to Form 99	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Travel for preacher	South Asia	1	4,500	Check		N/A	N/A
(2) Orphans, Patients, Student	South Asia	25,265	243,353	Electronic trans	0	N/A	N/A
(3) Preacher/followup support	Sub-Saharan Africa	32	69,360	Electronic trans		N/A	N/A
(4) Volunters office expenses	Sub-Saharan Africa	32	3,640	Electronic trans		N/A	N/A
(5) Travel for preachers	Sub-Saharan Africa	11	9,209	Check		N/A	N/A
(6) Chemo treatment	Sub-Saharan Africa	1	700	Check	o d	N/A	N/A
(7) Vehicles-become self suppo	Sub-Saharan Africa	8	149,900	Electronic trans		N/A	N/A
(8) Preacher/followup support	Sub-Saharan Africa	37	28,303	Electronic trans		N/A	N/A
(9) Cookware, sewing machines	Sub-Saharan Africa	10	700	Electronic trans		N/A	N/A
(10) Preacher/followup support	Sub-Saharan Africa	15	8,400	Electronic trans	<u></u>	N/A	N/A
(11)							
(12)							
(13)							
(14)							
(15)							
16)							
17)							
(18)			·				

Schedule F (Form 990) 2012

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PODE	-

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
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) 2012 Pa
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 provide any additional information (see instructions).
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	Employer identification number
WORLD BIBLE SCHOOL OF TULARE COUNTY	77-0236056
Paralli Gardi A. N. A.	
Part VI, Section A, Item 2	
Joel Coppinger and Claude Vice are brother-in-laws	
Part VI, Section B, Item 11b	
A copy of Form 990 for the year 2012 was provided to each member of it's governing body for review	v, prior to filing the Form. Each
member read through the Form 990 and any questions were discussed and resolved prior to filing.	
Part VI, Section B, Item 15	
The compensation of the director / treasurer is reviewed by the other members of the governing boo	ly. No other officers are compensated
and there are no other employees.	
Part VI, Section C, Item 19	
Form 990 and financial statements are made available to the public upon request.	
1 01111 330 and impricial statements are made available to the public upon request.	
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Schedule C (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization •	Employer identification number
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WORLD BIBLE SCHOOL OF TULARE COUNTY

Form 990, Year 2012

EIN: 77-0236056

Schedule 1

Form 990, Part III, Question 1

ORGANIZATIONS MISSION:

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

Form 990, Part III, Question 4a

ACHIEVEMENTS:

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

During the year 2012 we accomplished the following:

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

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

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