

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-EZ**

· Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Do not enter Social Security numbers on this form as it may be made public.
 ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

. 20 2013, and ending A For the 2013 calendar year, or tax year beginning C Name of organization D Employer identification number B Check if applicable Address change Community Bible School dba The Homestead, Meadow Lake Community Church 91-1275574 Name change Number and street (or P.O. box, if mail is not delivered to street address) E Telephone number initial return 19028 Meadow Lake Rd 360-568-6512 Terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number ▶ Snohomish, WA 98290 Application pending Other (specify) ▶ ✓ Cash Accrual H Check ▶ ☐ if the organization is not G Accounting Method: required to attach Schedule B Website: ▶ www.homesteadretreats.com (Form 990, 990-EZ, or 990-PF). **□527** J Tax-exempt status (check only one) — ✓ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or K Form of organization: Corporation ☐ Trust Association Other L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ . . . 196989 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I V Check if the organization used Schedule O to respond to any question in this Part I 79372 Program service revenue including government fees and contracts 2 2 65038 3 3 4 12000 Investment income 5a Gross amount from sale of assets other than inventory 5a Less: cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . 5c 12725 Gaming and fundraising events Gross income from gaming (attach) Schedule G if greater than SCANNED WAR 1 Revenue Gross income from fundraising events for including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . 6b Less: direct expenses from gaming and fundraising events . . . Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d Gross sales of inventory, less returns and allowances 3630 2429 Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7с 1201 8 8 10258 9 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 180594 Grants and similar amounts paid (list in Schedule O) 10 35779 10 11 Benefits paid to or for members 11 12 Salaries, other compensation, and employee benefits 5308 12 13 13 Professional fees and other payments to independent contractors . 14 14 74086 15 15 Printing, publications, postage, and shipping 16 16 35557 17 17 Total expenses. Add lines 10 through 16 . 150730 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 29864 Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 19 325399 Other changes in net assets or fund balances (explain in Schedule O) 20 20 21 Net assets or fund balances at end of year. Combine lines 18 through 20 355263 21

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No. 106421

Form **990-EZ** (2013)

_	

Pa	t II Balance Sheets (see the instructions	for Part II)				
	Check if the organization used Schedule	O to respond to a	ny question in this		<u> </u>	<u>v</u>
				(A) Beginning of year	<u> </u>	(B) End of year
22	Cash, savings, and investments			250840	-	277363
23	Land and buildings			00000	23	05000
24 25	Other assets (describe in Schedule O) Total assets			80308 331148	25	85093 362456
26	Total liabilities (describe in Schedule O)			5749	26	7193
27	Net assets or fund balances (line 27 of column	(B) must agree witl	h line 21)	325399	27	355263
Par						
-	Check if the organization used Schedule	O to respond to a	ny question in this	Part III 🗹	(Rec	Expenses juired for section
Wha	is the organization's primary exempt purpose?	propagation and disse	emination of the gospe	el of Jesus Christ	501(c)(3) and 501(c)(4)
as m	ribe the organization's program service accompli- easured by expenses. In a clear and concise mons benefited, and other relevant information for ea	nanner, describe the			4947	inizations and section 7(a)(1) trusts, optional others.)
28	We helped 24 churches and ministries plan and facilitate					
	conferences We provided devotionals, Bible teaching, fa	acilities, meals, etc. Co	onferences included n	nen, women,	ļ	
	and youth groups	includes foreign gra	nte shook horo		28a	71400
29	(Grants \$ 0) If this amount We have Church Services every Sunday evening with ar				204	71402
29	teaching of the scriptures along with worship time, and w		••	expository		
	teaching of the scriptures along with worship time, and w	e noid vanous midwee	N DIDIO Studios			
	(Grants \$ 600) If this amount	includes foreign gra	ints, check here .	▶ □	29a	43549
30	We are involved with various ministries and individuals in					
	preaching the gospel of Jesus Christ in India, Nepal, Can					
	training and rescuing young destitute woman in Nepal as					
	(Grants \$ 35179) If this amount	includes foreign gra	ınts, check here .	▶ ☑	30a	35779
31	Other program services (describe in Schedule O)					
-00	<u> </u>	includes foreign gra			31a 32	
Par	Total program service expenses (add lines 28a t IV List of Officers, Directors, Trustees, and Key		one even if not com			150730
Lei	Check if the organization used Schedule					
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISO (if not paid, enter -0-)	(d) Health benefits, contributions to employ benefit plans, and	, 0	Estimated amount of other compensation
Gred	ory S Miller 19028 Meadow Lake Rd					
	nomish, WA 98290	60	0	0		0
Tere	sa A Miller 19028 Meadow Lake Rd	40				
Snol	nomish, WA 98290	40	0	0		0
Marl	D Barrett 8510 E Meadow Lake Drive	20				
Sno	nomish, WA 98290		0	0		0
			<u> </u>	 	+	
					<u> </u>	
					7	
				ļ	+	 .
				 	+	
				+	+	
					+-	
				1		

Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V) Check if the organization used Schedule O to respond to any question in this			
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	rait	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	163	~
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		v
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		~
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		V
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		~
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 27a 0	1		ł
b	Did the organization file Form 1120-POL for this year?	37b		~
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a	1	
b	If "Yes," complete Schedule L, Part II and enter the total amount involved		_	
39	Section 501(c)(7) organizations. Enter:	1		
а	Initiation fees and capital contributions included on line 9			1
b	Gross receipts, included on line 9, for public use of club facilities	1		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4915 ▶ 0 ; section 4955 ▶ 0			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been	401		
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		~
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		,
41	List the states with which a copy of this return is filed ► Washington State does not require filing this form			
42a		360-56		
		98290		
b	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)?	42b	Yes	No 🗸
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			_
c	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		'
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. 1	▶ □
	and office the difficulty of the exemption of the exempti		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		v
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		,
С	Did the organization receive any payments for indoor tanning services during the year?	44c		~
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		V
45a 45b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		7
	Total doo La (doo indiadalons)			

•								
Form 99	90-EZ (2013)			 			F	age 4
46	Did the organization engage, directly or in						Yes	No
Part	All section 501(c)(3) organization 50 and 51.	s only as must answer que	estions 47–49b and	52, and co		<u> </u>	for line	es
	Check if the organization used Sc	hedule O to respond	to any question in t	his Part VI	· · ·	· · ·		
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Par		section 501(h) electio				Yes	No
48 49a b	Is the organization a school as described in Did the organization make any transfers the "Yes," was the related organization a second transfer or the school as described in the organization as the school as described in the organization as the school as described in the organization as	n section 170(b)(1)(A)(i o an exempt non-cha	ii)? If "Yes," complete a critable related organiz	Schedule E ation?		. 48 . 49a		V
50	Complete this table for the organization's employees) who each received more than	s five highest comper	sated employees (oth	er than offic	ers, direct	ors, trust	ees an	
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health contributions to benefit plans, a compen	o employee and deferred	(e) Estimat other co		
Non	е							
								·
f 51	Total number of other employees paid ov Complete this table for the organization \$100,000 of compensation from the organization	's five highest compe	ensated independent	contractors	who each	received	l more	than
	(a) Name and business address of each independ	dent contractor	(b) Type of serv	ıce	(c)	Compensat	ion	
None								
					·			
					· · · · · · · · · · · · · · · · · · ·			
d 52	Total number of other independent control Did the organization complete Schedule	A? Note . All section 5	01(c)(3) organizations	and 4947(a)	(1)	one Vo		
Under p	nonexempt charitable trusts must attach enalties of penjury, I declare that I have examined this rect, and complete. Declaration of preparer (other than	return, including accompan	ving schedules and stateme	ents, and to the	best of my kn	► ✓ Yes		It is
Sign	Signature of officer		· · · · · · · · · · · · · · · · · · ·	Date	2/19/1	4		
Here		ILLER, F	PESI DENT				•.	
	Prot/Type preparer's name	Preparer's signature	Da	te	Ta	PTIN		

Pnnt/Type preparer's name

May the IRS discuss this return with the preparer shown above? See instructions

Firm's name

Firm's address ▶

Paid Preparer

Use Only

► ☐ Yes ☐ No

Check if self-employed

Firm's EIN ▶

Phone no

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Employer identification number 91-1275574 Community Bible School Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated d ☐ Type III–Non-functionally integrated **b** ☐ Type II e 🔲 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and No 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (iii) Type of organization (iv) is the organization (v) Did you notify (vii) Amount of monetary (i) Name of supported (ii) EIN (vi) Is the in col (i) listed in your the organization in col (i) of your organization in col (described on lines 1-9 organization governing document? above or IRC section (i) organized in the support? (see instructions)) No Yes No Yes (A) (B) (C) (D) (E)

Total

Part							
(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 unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support					,	,
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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.						<u> </u>
	on B. Total Support	, <u>.</u>	r 	,			
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4					ļ	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10					1	
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the						
C4:	organization, check this box and stop he			<u></u>		 	▶ 🛄
	on C. Computation of Public Suppor			1		144	- %
14 15 16a	Public support percentage for 2013 (line 6 Public support percentage from 2012 Sci 331/2% support test—2013. If the organic	nedule A, Part	II, line 14 .			14 15 7% or more, c	%
	box and stop here. The organization qua						
þ	331/3% support test—2012. If the organ check this box and stop here. The organ					9 15 is 33¹/3% 	or more,
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part IV how the organization meets the "forganization	ets the "facts- acts-and-circu	and-circumsta ımstances" tes	nces" test, che st. The organiza	eck this box ar ation qualifies	nd stop here. I as a publicly s	Explain in upported
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 "fact:	e "facts-and-ci s-and-circums	rcumstances" tances" test. Ti	test, check the he organization	nis box and st	op here.
18	Private foundation. If the organization di	d not check a	box on line 13	, 16a, 16b, 17a	, or 17b, chec	k this box and	see

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

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

	in the organization rails to quality	unaci tile tec	- IISCOU DOIC	yv, picase co	inpiete i ait i	1.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨 🏻	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")	55048	80331	68646	64617	79372	348014
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	91983	92975	79175	62241	65038	391412
3	Gross receipts from activities that are not an unrelated trade or business under section 513	264	923	7458	15824	25979	50448
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	o	0
6	Total. Add lines 1 through 5	147295	174229	155279	142682	170389	789874
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	6825	27420	20059	14331	18660	87295
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	7673	7829	3920	1461	1423	22306
C	Add lines 7a and 7b	14498	35249	23979	15792	20083	109601
8	Public support (Subtract line 7c from line 6.)						680273
<u>Secti</u>	on B. Total Support	····					
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	147295	174229	155279	142682	170389	789874
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	1789	4182	8297	23102	26600	63970
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	o	0	0
С	Add lines 10a and 10b	1789	4182	8297	23102	26600	63970
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on	3200	75	0	0	0	3275
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0
13	Total support. (Add lines 9, 10c, 11, and 12.)	152284	178486	163576	165784	196989	857119
14	First five years. If the Form 990 is for the organization, check this box and stop he	e organization	's first, second	d, third, fourth	or fifth tax ye	ear as a section	
Secti	on C. Computation of Public Suppor	t Percentage	9				
15	Public support percentage for 2013 (line 8			3. column (fl)		15	79 37 %
16	Public support percentage from 2012 Sch					16	79 36 %
	on D. Computation of Investment Inc			<u> </u>	<u> </u>	1 1	
	Investment income percentage for 2013 (v line 13 colun	an (fl)	17	7 47 %
17	Investment income percentage from 2012					18	4 57 %
18 19a	331/3% support tests—2013. If the organi 17 is not more than 331/3%, check this box	ization did not	check the box	on line 14, ar	nd line 15 is m	ore than 331/39	6, and line
_						-	
b	331/3% support tests—2012. If the organiz line 18 is not more than 331/3%, check this I	oox and stop h	ere. The organi	zation qualifies	as a publicly s	upported organi	ization 🕨 🗌
20	Private foundation, If the organization de	d not check a l	box on line 14.	. 19a. or 19b. c	heck this box	and see instruc	ctions 🕨 🗌

SCHEDULE L (Form 990 or 990-EZ)

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.

2013

Department of the Treasury

(8) (9) (10)

Open To Public

OMB No 1545-0047

Interna	Revenue Service	►Informatio	n about	Schedule L (Fon	m 990 oı	r 990-EZ	and its instr	uction	s is at www.irs.go	v/form	990.	Ĭr	spec	tion	
Name	of the organization			- -					Employ	er ide	ntificat	ion nu	mber		
Com	munity Bible Schoo	1									91-	12755	74		
Par	t I Excess B Complete	enefit Tran if the organ	saction	ns (section 501 answered "Ye	(c)(3) a s" on F	nd sect	ion 501(c)(d 0, Part IV, I	4) orga ine 25	anizations only). a or 25b, or For	m 99	0-EZ,	Part	V, line	40b.	
			- 1	(b) Relationship be	etween di	squalified	person and	Γ						(d) Cor	rected
1	(a) Name of disqua	Iffied person	- 1		organızat		•	ľ	(c) Description	n of trai	nsaction	n		Yes	No
(1)	NONE														
(2)															
(3)					-					-					
(4)			1												
(5)															
(6)														<u> </u>	
2	Enter the amou		ncurrec	•			-	qualifi	ed persons du	rıng t	he ye	ar			
	under section 4											▶ \$			
3	Enter the amou	int of tax, if	any, on	line 2, above,	reimbu	irsed by	the organi	ızatıor	1		!	▶ \$;		
Par	Complete	on reported	an ame	(c) Purpose of	990, Pa	art X, line an to or	e 5, 6, or 22	2. nal	38a or Form 99	T		(h) Ap	proved	(i) W	/ntten
		with org	anızatıon	loan		n the zation?	principal an	nount					oard or nittee?	agree	ment
	· · · · · · · · · · · · · · · · · · ·				То	From				Yes	No	Yes	No	Yes	No
(1)	Greg Miller	Director		To Earn	ļ	-	} 	20000.	120000		~	'	<u> </u>	1	—
(2)	Mark Barrett	Director		Interest	ļ	~	12	20000.	120000	 	~	~	 	~	ļ
(3)	· -					ļ						├─	 	\vdash	├
(4)					ł	 				 	\vdash	\vdash	\vdash		├─
<u>(5)</u> (6)					 	<u> </u>			· · · · · · · · · · · · · · · · · · ·	 	 -	 	 -		
(7)	 				 	<u> </u>				 		 	 	-	<u> </u>
(8)					<u> </u>			-			<u> </u>	 			
(9)					<u> </u>				•		<u> </u>	 			
(10)						<u> </u>	<u> </u>								
Tota	I						·	, ▶	\$ 240000		-		-		
Par				fiting Interest answered "Ye			0, Part IV, I	ıne 27							
(a) Name of interested p	person (b)		ship between inter and the organization		c) Amount	of assistance	(d) Type of assistanc	e	(e) Purpo	ose of a	ssistan	ice
(1)	NONE														
(2)															
(3)															
(4)								<u> </u>			<u> </u>				
(5)							 .	ļ			<u> </u>				
(6)	·							ļ			<u> </u>				
(7)								1			1				

Part IV	Business Transactions Involvi Complete if the organization an	ing Interested Persons. swered "Yes" on Form 99	0, Part IV, line 28a,	28b, or 28c.		
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	anng of zation's nues?
			1		Yes	No
(1) NON	E					
(2)				·		
(3)			ļ <u>-</u>			Ь
(4)						
(5)		ļ				├
<u>(6)</u> (7)						├
(8)						
(9)		 				
(10)						
Part V	Supplemental Information Provide additional information f	or responses to questions	on Schedule L (see	e instructions).		
Community	Bible School received a large donation	n of \$240,000 from an estate	ın 2011/12 to support	our ministries in Nepal		
It was decid	led by the board to invest this money a	and to use the earnings from t	he investment to supp	ort our ministries in Nepal		
Per our con	flict of interest policy, a committee of 1	8 members, which did not inc	lude any disqualifed p	ersons or persons with		
a conflict of	interest, unanimously voted to loan th	s money to Greg and Teresa	Miller and Mark and Ji	Il Barrett The terms of the loan		
were 5 year	rs, interest at 5%, payable monthly and	secured with a mortgage on	the residence and ren	tal property of Greg and Teresa Mille	er	
All docume	nts were prepared by our lawyer and re	ecorded with Snohomish Cou	nty in the State of Was	hington		<u>-</u>
	·····			·		
			·			

Community Bible School – 91-1275574 2013 Form 990 Substitute Schedule O - Page 1 of 3

Form 990 EZ Page 1 Part Line 5a - Gain or Loss from sale of assets:

Item Sold:	Price	Basis	Gain (Loss)
Doors Sold	\$ 150.	\$ 0.	\$ 150.
Kerosene Heater	\$ 30.	\$ 0.	\$ 30.
Brake Shear	\$ 200.	\$ 0.	\$ 200 .
Air Tank	\$ 20.	\$ 0.	\$ 20.
SS Table/Wheels	\$ 99.	\$ 0.	\$ 99.
Headboard (Fisher)	\$ 150.	\$ 0.	\$ 150.
Gas Buddy	\$ 200.	\$ 0.	\$ 200.
John Deere F932	\$2000.	\$ 0.	\$2000.
Cider Press	\$ 700.	\$ 0.	\$ 700.
2003 Chevy Astro	\$6300.	\$3288.	\$3012.
2003 Chevy Astro	\$6000.	\$3063.	\$2947.
2003 Chevy Astro	<u>\$6500.</u>	<u>\$3273.</u>	<u>\$3227.</u>
Totals	\$22,349.	\$9,624.	\$12,725.

Form 990 EZ Part I Page 1 Line 7 – Gain or Loss from sale of inventory:

	Price	<u>Basis</u>	Gain (loss)
Coffee, Jewelry, Bags from Nepal Firewood Vending - Cookbooks Vending - Candy/Soda	\$ 2702. \$ 350. \$ 169. \$ 409.	\$ 2283. \$ 0. \$ 63. \$ 83.	\$ 419. \$ 350. \$ 106. \$ 326.
Totals	\$ 3630.	\$ 2429.	\$ 1201.

Form 990 EZ Part I Page 1 Line 8 – Other Revenue

Rental Income	\$14600.
Utilities – Garbage Property Taxes Interest Repairs Depreciation – see Form 4562	\$ 566. \$ 1894. \$ 112. \$ 807. \$ 963.
Total Expenses	\$ 4342.
Net Rental Income	\$10258.

Community Bible School – 91-1275574 2013 Form 990 Substitute Schedule O Page 2 of 3

Form 990 EZ Part I Line 10 and Part II Line 30 - Grants and similar amounts paid

Grants To Individuals or Organizations that totaled more than \$5000.00 in 2013:

Rescue Training and Development Center - Nepal

\$16755.

This organization in Kathmandu, Nepal takes young, destitute women and provides room and board for 4 months and gives them an education, medical help, and trains them to sew as an occupation. We have no relationship with any of the students or individuals within the organization nor any legal relationship. We are likeminded however in our faith and the sharing the gospel of Jesus Christ through both words and deeds. Total students trained in 2013 were 30.

All other amounts given as Grants to individuals or Organizations were less than \$5000.00 per individual or organization.

Form 990 EZ Line 14 – Occupancy

Rent	\$ 62,652.
Utilities	\$ 3,893.
Property Taxes	\$ 5,751.
Building Repairs	\$ 1, 79 0.

Total of Occupancy

\$ 74,086.

Form 990 EZ Part 1 Page 1 Line 16 Other Expenses

\$ 380.
\$ 11003.
\$ 4,205.
\$ 120.
\$ 7,082.
\$ 576.
\$ 3,621.
\$ 1,645.
\$ 840.
\$ 1.232.
\$ 338.
\$ 1,868.
\$ 569.
\$ 2,078.

Total Other Expenses

\$35,557.

Community Bible School – 91-1275574 2013 Form 990 Substitute Schedule O Page 3 of 3

Form 990 EZ Page 2 Part II Balance Sheets Line 24 Other Assets

	12/31/2012	12/31/2013				
Inventory	\$ 1,436.	\$ 1,373.				
Equipment	\$114,506 .	\$ 120,568.				
Leasehold Improvements	\$ 80,965.	\$ 86,655.				
Less Accum. Depreciation/Amortization	<u>(\$116,599.)</u>	(\$123,503.)				
Total Other Assets	\$ 80,308.	\$ 85,093.				

Form 990 EZ Page 2 Part II Balance Sheets Line 26 Liabilities

Window Loan – PUD	\$ 4114.	\$ 3569.
Deposits on Retreats	<u>\$ 1635.</u>	<u>\$ 3624.</u>
Total Liabilities	\$ 5749 .	\$ 7193.

Form 990 EZ Part IV List of Officers, Directors - Column E - Housing Allowance

For the convenience of Community Bible School Greg and Teresa Miller receive use of the personal residence located on the property leased by Community Bible School. This property is where we hold our overnight Bible conferences and retreats as well as our church services. The appraised fair rental value of the housing is \$1400.00 per month. Water, sewer, and garbage is provided, all other utilities they pay.

Gregory S. Miller and Teresa A. Miller are husband and wife and lease to Community Bible School the facilities that Community Bible School uses for their Bible conferences, retreats, and church services. This property is 45 acres, which include two conference buildings, two residences, two - one bedroom apartments, shop building and lake property. The facilities are able to accommodate 60 people overnight with dining and kitchen facilities. The lease in 2013 was \$5221.00 per month.

Form 4562

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

OMB No 1545-0172 2013

Attachment Sequence No 179

Business or activity to which this form relates Identifying number Name(s) shown on return Community Bible School Form 990 - EZ Schedule O - Other Expenses 91-1275574 Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. Total cost of section 179 property placed in service (see instructions) . . . 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing (a) Description of property (b) Cost (business use only) 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 10 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2013 . . . 17 8778 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2013 Tax Year Using the General Depreciation System b) Month and year (c) Basis for depreciation (d) Recovery (e) Convention (f) Method (a) Classification of property placed in (business/investment use (g) Depreciation deduction period only-see instructions) 19a 3-year property 5-year property 11125 HY DDB 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real property Section C - Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year c 40-year Part IV Summary (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 11003 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

	4562 (2013)			<u> </u>													Page 2
Pai		Proper					tain ot	her v	ehicles	, ce	rtain	cor	nputer	s, and	prop	erty us	ed fo
		ainment, I <i>For any ve</i>					ctanda	nd mil	0000 m	to or	dodu	ctino	looso	040000	0.000	oloto o	abr 24-
		ror any ve dumns (a)											iease	expens	e, com	DIBLB OI	II y 240
	Section A			·									for na	ssenner	autom	obiles)	
24a	Do you have ev								□ No □					idence v			☐ No
	(a)	(b)	(c) Business/			T	(e)				(g)		T	(h)		- 0	
	of property (list rehicles first)	d) other basis	Basis for depreciation (business/investment use only)			Recove	Recovery Method/ period Convention			Depreciation			Elected section 179 cost				
25	Special depr											25					
26	Property use	d more tha			d busine	ss use	∋ :						· · · · · ·				
			 	%		<u> </u>				_			ļ				
				%		<u> </u>				-			 				
	December	d 500/ or		%				1		Щ.			<u> </u>				
_27	Property use	u 50% or		%	usiriess u	Se.		— т		5	/L –		T				
				%		 				I	/L -		 				
				6			•			-	<u>-</u> /L –		 	-			
28	Add amounts	s in colum	n (h), lines	25 through	n 27. En	ter he	re and	on line	21, pa	ge 1		28	<u> </u>				
29	Add amounts			_											29		
					ction B-												
	plete this section				•												ehicles
to yo	ur employees,	first answe	r the ques	tions in Sec	ction C to	see if	you me	et an e	xception	1 to C	ompie	ting	tnis sec	tion for	tnose ve	enicies.	
30	Total business/investment miles driven during the year (do not include commuting miles) .			(a) Vehicle 1			(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6		
31	Total commuti	ng miles dr	iven during	the year			Ī										
32	Total other miles driven	-	l (noncor	nmuting)													
33	Total miles			ear. Add			 		 					•		Ì	
	lines 30 throu													ŀ			
34	Was the veluse during of			•	Yes	No	Yes	No	Yes	N	0 ,	Yes	No	Yes	No	Yes	No
35	Was the vehi	cle used p	orimarily b	y a more			ļ		+-	-	\dashv			_	ļ		
	than 5% owr		•				ļ	<u> </u>		-			ļ	ļ		ļ	
_36	Is another veh				<u> </u>			L		ــــــــــــــــــــــــــــــــــــــ					<u></u>		L
A ===	ver these que			stions for												who ar	o not
	wer triese que: e than 5% owi						to con	pieuri	g Secuc	ж	ior ve	HICIE	s useu	by emp	noyees	will ar	9 not
	Do you main						s all pe	rsonal	use of	vehic	les i	neluc	dina co	mmutin	a by	Yes	No
٠.	your employe																
38	Do you main employees?	itain a writ															
39	_ ` -					-	-										\vdash
40		ide more 1	than five v	ehicles to	your en	nploye	es, obt	ain inf	formatic	n fro	m yo	ur er	nploye	es abou	it the	-	
41	Do you meet	•						demon	stration	use'	? (Se	e inst	ruction	s.) .			<u> </u>
••	Note: If your															-	
Pa	t VI Amori			·, ·-,												<u> </u>	
		,		(b)			(-)						(e) Amortiz				-
	(a Description	n of costs		Date amortiz begins			(c) rtızable ar			(d Code s	ection		percent	or	Amortiza	tion for th	ııs year
42	Amortization	of costs t	hat begins	during yo	our 2013	tax ye	ear (see	instru	ctions):				-				
							 					-					
	Amortization	-6 -c-+- +	hat b = = = =	boforo	ur 2012 :	tav un			l					43			
	Total. Add a								oort			•	•	44			
-44	rucai. Aud a	ALTICULIES II		.,. <u> 1116</u>		J. 10 10		0 10		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>			

Department of the Treasury ► See separate instructions.

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No 179

Internal Revenue Service (99) Identifying number Business or activity to which this form relates Name(s) shown on return Form 990 - EZ Schedule O - Rental Depreciation 91-1275574 Community Bible School **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 5 (a) Description of property (b) Cost (business use only) 6 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 9 Tentative deduction. Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 15 Property subject to section 168(f)(1) election . 16 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2013 17 929 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (b) Month and yea (c) Basis for depreciation (d) Recovery (e) Convention (f) Method (a) Classification of property (business/investment use (g) Depreciation deduction placed in penod only-see instructions) service 19a 3-year property 5-year property 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental 3191 9/13 property i Nonresidential real property Section C-Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year c 40-year Part IV Summary (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instructions 22 963 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Form	4562 (2013)															Page 2
Pai		d Propert ainment, r	•				taın ot	her ve	ehicles,	certa	in cor	nputer	s, and	prope	erty us	ed for
		For any ve olumns (a)										lease	expens	ө, сотр	olete or	ı ly 24a,
		- Depreci										for pas	ssenger	autom	obiles.)	
24a	Do you have e													vritten?		☐ No
Туре	(a) of property (list	(b)	(c) Business/ Investment use	(d)	Basis	(e) for depre ness/inves	stment	(f) Recovery period	Me	(g) ethod/ vention	Dep	(h) preciation		(ī) ected sec	tion 179
	Special dep		percentage	or qualifie	ad liete	d prop	use only)					-				
25	the tax year										25					
26	Property use	ed more tha	an 50% in a	a qualifie	d busin	ess use	e:									
			%							<u> </u>						
			%													
		1.500/	%	<u> </u>					,	ᆜ.—		L				
27	Property use	ed 50% or	less in a qu		ısıness	use:		— Т		5/L -		T				
		-	70						···	5/L -						
	· · · · · · · · · · · · · · · · · · ·	·	%		- · -					5/L -						
28	Add amount	ts in colum	<u> </u>		h 27. E	nter he	re and	on line	21, pag	e 1 .	28					
	Add amount													29		
		_							e of Vel					_		
	plete this sect															ehicles
to yo	ur employees,	, first answe	r trie questi	Uns in Sec	г		Τ .	· · · · · · · · · · · · · · · · · · ·			T		1		r	
30		Total business/investment miles driven during the year (do not include commuting miles).				a) icle 1	(b) Vehicle 2			(c) Vehicle 3		d) ide 4	(e) Vehicle 5		- (f) Vehicle 6	
	Total commun Total other	ting miles dr personal	iven dunng t	g the year												
33	miles driven Total miles		ing the ye	ar. Add										-		
•	lines 30 thro	•			Voc	T No	Yes	l No	Yes	No	Yes	No	Yes	No	Yes	No
	Was the ve	off-duty hou	ırs?		Yes	No	res	No	res	NO	res	NO	res	NO	res	NO
35	Was the veh than 5% ow															
36	is another vel				<u> </u>	<u> </u>			<u> </u>				<u> </u>	<u> </u>	L	<u> </u>
	wer these que than 5% ow	estions to d		you mee	t an ex	ception									who ar	e not
37	Do you mail		-	statemen			s all pe	rsonal	use of v	ehicles	, includ	ding co	mmutin	g, by	Yes	No
38	Do you main employees?	ntain a wrıt	tten policy	statemer	nt that	prohibit										
	Do you treat Do you prov	t all use of	vehicles by	employe	es as p	ersona	l use?									_
	use of the v	ehicles, and	d retain the	informat	ion rec	eived?										
41	Do you mee														<u> </u>	
Par	rt VI Amor		37, 38, 38	1, 40, or 4	I IS T	es, ao	not cor	пріете	Section	B for u	ne cove	rea vei	nicies.		L	
ı a	GVI AIIIOI	uzauon		(b)							Т	(e)				
	(a) (b) Description of costs (b) Date amortiz begins		ate amortiz	ation	(c) Amortizable amount		mount	(d) Code sectio				or	Amortiza	(f) ation for this year		
42	Amortization	of costs t	hat begins	during yo	ur 201	3 tax ye	ear (see	instruc	tions):							
											+					
40	Amortization	of costs t	hat bacar !	nafore vo	ur 2011	tay vo							43			
	Total. Add									• •			44			
	TOTAL AGU	amounts II	. Joiding (I)	. 000 1110	ou ac				<u> </u>	<u> </u>	<u> </u>	· ·	1	F	orm 456	32 (2013)