

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**

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see the separate instructions. DAA

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

2014
Open to Public Inspection

A	For the 20	014 calendar year, or tax year beginning	, and ending			_	
В	Check if applica	able C Name of organization				D Employer	identification number
\Box	Address chang	e INTERNATIO	NAL BIBLE ASSOCIATIO	N			
\exists	_	Doing business as				1 75-2	966357
님	Name change	Number and street (or P O box if mail is not delivered	to street address)		Room/suite	E Telephone	
	Initial return	4740 S. BUCKNER BLVD.				214-	388-5111
	Final return/ terminated	City or town, state or province, country, and ZIP or for					
	Amended retur	DALLAS	TX 75227			G Gross rece	expts \$ 647,497
Ξ		r Name and address of principal officer			H(a) is this an	roup return for su	rbordinates? Yes X No
Ш	Application per	· CITOIL II. DIVINIUM	_		_		
		4740 S. BUCKNER BLV			, ,	bordinates inclu	
		DALLAS	TX 75227		If "No	o," attach a list (see instructions)
	Tax-exempt s		(insert no) 4947(a)(1) or	527			
<u>J</u>	Website · 🕨	WWW.INTERNATIONALBIBLE	ASSOCIATION.C			emption number	
K	Form of organ	ization X Corporation Trust Association	Other	L Ye	ar of formation	2001	M State of legal domicile TX
<u>_</u> P	art I	Summary					
	1 Brie	fly describe the organization's mission or most significant	gnificant activities				
ø	I	NTERNATIONAL BIBLE ASSOCIATI	ON (IBA) HAS PRINTED	BIBLE	S IN SEV	ERAL	
ိုင္ဆာ	I	ANGUAGES AND PRINTS AND MAIL	S MIRACLES & MISSION	S DIGES!	T. IBA D	ISTRIBU	ITES
Œ	F	REE BIBLES INTO PRISONS AND	OFFERS FREE TRACTS F	OR DIST	RIBUTION	i.	
آھِ اھي	2 Che	eck this box 🕨 🧻 if the organization discontinue	d its operations or disposed of more	e than 25% o	of its net asse	ts	
ভ ভ	3 Nun	nber of voting members of the governing body (Pa	art VI, line 1a)			3	3
cs.	4 Nun	nber of independent voting members of the gover				4	1
E	5 Tota	al number of individuals employed in calendar yea	=			5	0
\ \$	6 Tota	al number of volunteers (estimate if necessary)	•			6	9
	7a Tota	al unrelated business revenue from Part VIII, colu	mn (C), line 12			7a	0
	b Net	unrelated business taxable income from Form 99	7b	0			
Reventing A PA NETA CAS FLIES & Covering A			= 		Prior Y		Current Year
₩	8 Cor	ntributions and grants (Part VIII, line 1h)		L	2(4,640	227,587
<u>چ</u>	9 Pro	gram service revenue (Part VIII, line 2g)					399,314
eve	10 Inve	estment income (Part VIII, column (A), lines 3, 4,	and 7d)	L	21	.9,584	<u>851</u>
œ	11 Oth	er revenue (Part VIII, column (A), lines 5, 6d, 8c,	9c, 10c, and 11e)			30,424	19,745
	12 Tota	al revenue – add lines 8 through 11 (must equal F	Part VIII, column (A), line 12)		39	3,800	647,497
	13 Gra	nts and similar amounts paid (Part IX, column (A)), lines 1–3)				0
	14 Ben	efits paid-to-or-for members (Part-IX, column (A),	line 4)				0
S		anes, other compensation, employee benefits (Pa	293,961				
Expenses		fessional fundralsing fees (Part IX, column (A), lin					0
ĕ	b Tota	al fundraising expenses @an IX @fumn (B), line	25) ▶	0			•
ñ	17 Oth	er expenses (Part IX, column (A), lines 112411d,	11f–24e)	Γ	57	79,352	631,402
	18 Tota	al expenses Add-lines 13-17 (must equal Part IX	, column (A), line 25)	Γ		50,798	925,363
	19 Rev	venue less expenses. Subtract line 18 from line 12			-46	66,998	-277,866
Net Assets or	3				Beginning of C		End of Year
sets	20 Tota	al assets (Part X, line 16)			4,9	L0,915	5,013,951
A A	21 Tota	al liabilities (Part X, line 26)				0	110
影	22 Net	assets or fund balances Subtract line 21 from lin	ne 20		4,91	10,915	5,013,841
_ <u>F</u>	Part II	Signature Block					
U tr	Inder penaltue, correct,	ies of perjury, I declare that I have examined this return and complete Declaration of preparer (atter than office	n, including accompanying schedules a cer) is based on all information of which	and statement h preparer has	s, and to the b s any knowledg	est of my kno ge	wledge and belief, it is
		whim the	<u> </u>			7	777-15
Sig	որ	Signature of officer	-			Date	
He	- 1 .	JACK SKINNER		MANAGE	!R		
	'`]	Type or print name and title					
	Pr	nnt/Type preparer's name	Preparer's signature		Date	Check	If PTIN
Pai	اید	SHLEY DAVIS, CPA	ASHLEY DAVIS, CPA			3/15 self-em	□"
	Darer F		PC		1 30/1	Firm's EIN	75-1706222
	e Only	333 WEST CAMPB		0		, am 3 E1N F	
-	- 1	DICHARDOOM MY				Phone no	972-231-9060
Mar		iscuss this return with the preparer shown above	*			FILLIO IIO	Yes No

Form 990 (2014)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form	1 990 (2014) INTERNATIONAL BIBLE ASSOCIATION 75-2966357		P	age 3
Pa	art IV Checklist of Required Schedules		,	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	<u> </u>
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			.
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
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,	_ !		х
_	Part III	5		^
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			x
_	"Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			x
_	complete Schedule D, Part III	8		_
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			x
40	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	40		x
44	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
_	VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	11a		х
.	complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	11a		-
D	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	116		x
_	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	1115		
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	1,10		
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1		-
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	1		
	Schedule D, Parts XI and XII	12a		x
b				
-	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X

20a

20b

_ P	in iv Checklist of Required Schedules (continued)			
04	D. 10		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	24		x
22	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		x
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	- 22		
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		х
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	25		 -
240	\$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 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
·	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		\vdash
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	274		
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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 pnor Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	<u> </u>		
	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		х
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
-	Schedule L, Part IV	28b	•	x
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		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
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		Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	192 Note. All Form 990 filers are required to complete Schedule O	38		X

Pa	Int V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			\Box
	onout in outload to contain a respondent to any line in the contain a		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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			İ
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1		x
_	account)?	4a	 	
D	If "Yes," enter the name of the foreign country. ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			1
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-	-
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. Did a donor advised fund maintained by the	8		
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	-		1
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter.			
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			1
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	ļ	ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		_	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	 - -	
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans 13b			
C	Enter the amount of reserves on hand Did the assessment of reserves on hand	440	 	x
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes." has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b	┼	├ ^
U	n rea, nos umega ronn rzo to report mese paymenta, ir 140, broside an exhibitation in objective o	, , , , ,		1

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 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. 1b 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 X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 X Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10a 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 X 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 b X Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12a 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such aπangements? Section C. Disclosure NONE 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 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records JACK M SKINNER 4740 S BUCKNER BLVD.

TX 75227

DALLAS

	ONAL BIE									Page 1
•		Dire	cto	rs, '	Trus	stee	s, I	Key Employees, High	nest Compensated E	mployees, and
Independent Co				_	_			and the tests and	/11	П
								any line in this Part \		
								Compensated Employees		<u> </u>
la Complete this table for all persons organization's tax year										
 List all of the organization's curt compensation. Enter -0- in columns (I 									regardless of amount of	
 List all of the organization's cur 	rent key employ	ees,	ıf any	y. Şe	e ins	struct	ions	for definition of "key employ		
 List the organization's five curre who received reportable compensation organization and any related organization 	n (Box 5 of Form tions.	1 W-2	2 and	l/or E	Box 7	of F	orm	1099-MISC) of more than \$	6100,000 from the	
 List all of the organization's form \$100,000 of reportable compensation 									received more than	
• List all of the organization's for	ner directors o	r tru:	stee	s tha	t rec	eive	đ, in	the capacity as a former dir		
organization, more than \$10,000 of re List persons in the following order and										
compensated employees, and former		or un	COIO	13, 111	Sulu	liona	· u·u·	stees, omocrs, key employe	cs, riighest	
Check this box if neither the organ	nızation nor any ı	relate	ed or	ganı	zatio	n cor	nper	nsated any current officer, d	rector, or trustee	
(A)	(B)				>)			(D)	(E)	(F)
Name and Title	Average hours per	(d	o nat d	Pos check		than o	ne	Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any			,		s both r/truste		from the	related organizations	other compensation
	hours for	L					•	organization	(W-2/1099-MISC)	from the
	related organizations	dividu	nstitutional	Officer	Көу еп	ghest	Former	(W-2/1099-MISC)		organization and related
	below dotted line)	호호	on <u>a</u> l		employee	8 8	·			organizations
	iiio)	Individual trustee or director	trustee		8	Highest compensated employee		1		
		1	*			ited				
(1) JACK SKINNER										
	40.00				İ					
PRESIDENT	0.00	X		X				65,000	0	2,181
(2) TAHIANA RAJOELIN										
VIOR DDECIDENM	10.00 0.00	x		x				o	0	0
VICE PRESIDENT (3) JOANNA HARTER	0.00	^	\vdash	^						
(3) COMMA IMMIEN	10.00									
SECRETARY	0.00	x						o	0	0
(4)										
(5)		⊢	-	_	_					
(5)										
(6)										
			$ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ld}}}}}}$	<u> </u>	ļ					
(7)			l							
(8)	<u></u>		\vdash	\vdash	-					
1-/										
	<u> </u>	L	L	L						
(9)										

(10)

(11)

DAA

<u>Pa</u>	rt VII Section A. Officers	, Directors, Trus	stee	s, Ke	y Er	nplo	yees	s, ar	nd Highest Compensated	Employees (continued)			
	• (A) Name and title	(B) Average hours per week (list any hours for	of	ox, uni ficer a	Pos check ess pe nd a c	erson i directo	than o	en e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	comp	(F) timated ount of other pensation om the	n
		related organizations below dotted line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		and	inization i related nizations	
(12)													
(13)	_												
(14)													
(15)				-									
(16)													
(17)													<u></u>
(18)								:					
(19)		-											
1b	Sub-total	<u> </u>	1	1	<u> </u>	<u> </u>	1		65,000			2	,181
C	Total from continuation shee	ets to Part VII, S	ecti	on A				•	65,000				2,181
d 2	Total (add lines 1b and 1c) Total number of individuals (ind	cluding but not lin	nıted	to th	nose	liste	d abo	ve)			1		, 101
	reportable compensation from	the organization	<u> </u>	0								Ye	s No
3	Did the organization list any for employee on line 1a? If "Yes,"								ee, or highest compensated	I	3		x
4	For any individual listed on line	1a, is the sum o	f rep	ortat	ole co	omp	ensat	ion		m the			
	organization and related organ individual	•							•		4		х
5	Did any person listed on line 1a for services rendered to the org									dividual	5	;	x
	ion B. Independent Contracto	rs							·				
1	Complete this table for your five compensation from the organization	zation Report coi	nsate mper	ed in nsati	depe on fo	nder or the	nt cor	ntrac nda	r year ending with or within t	the organization's tax year			
	Name and	(A) business address						_	Descrip	(B) tion of services		Compe	c) ensation
											İ		
		<u></u> .											
								\vdash					<u>_</u>
	. .												•
		<u> </u>											-
	Total number of independent c	ontractors (included	ding 1	but n	ot lin	nited	l to th	1086	e listed above) who				
	received more than \$100,000 c	of compensation	from	the	orga	nızat	ion 🕨	· · · · ·		0			200
DAA												Form \$	90 (2014)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Reven Total revenue exempt business excluded from tax function revenue 512-514 revenue 1a Federated campaigns 1a 1b b Membership dues c Fundraising events 1c 1d d Related organizations 155,343 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 72,244 g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 227,587 Program Service Revenue Busn. Code 258,100 258,100 BIBLE SALES INCOME 2a 141,214 141,214 OTHER INCOME b f All other program service revenue 399,314 Total. Add lines 2a-2f Investment income (including dividends, interest, 851 851 and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6a Gross rents **b** Less rental exps Rental inc or (loss) Net rental income or (loss) Gross amount from (i) Securities (n) Other sales of assets other than inventor b Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Busn. Code Miscellaneous Revenue 19,155 19,155 11a OTHER REIMBURESMENTS/SHIPPING 590 590 b REIMBURSEMENTS C All other revenue 19,745 Total. Add lines 11a-11d 647,497 0 419,910 Total revenue. See instructions

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must con			e column (A).	(9)
	Check if Schedule O contains a respor			(C)	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	ì			
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	67,181	50,386	16,795	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	210,887	210,887		
8	Pension plan accruals and contributions (include			-	
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	15,893	15,893		
11	Fees for services (non-employees)				
а	Management	1 222			
b	Legal	1,303		1,303	
С	Accounting	33,950	33,950		
d	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	412 154	410 024	0 000	
	(A) amount, list line 11g expenses on Schedule O)	413,154	410,934 978	2,220	
12	Advertising and promotion	978		21 160	
13	Office expenses	141,432	110,263	31,169	
14	Information technology			+	
15	Royalties	11,511	11,511		
16	Occupancy	18,551	13,473	5,078	
17 18	Travel	16,331	13,473	3,078	
10	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				· · · · · · · · · · · · · · · · · · ·
19 20	Conferences, conventions, and meetings Interest	5,364	5,364		
21	Payments to affiliates	3,304	3,304		.
22	Depreciation, depletion, and amortization		_		
23	Insurance	5,159	5,159		
24	Other expenses Itemize expenses not covered	3,233			
	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)				
а	,, <u></u>				
b	Ī				
C	•				
d	Ţ				
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	925,363	868,798	56,565	0
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)				
DAA	TONORNING COL. SUPE (MOC SOUP LEV)				Form 990 (2014)

_ <u>Pa</u>	nt X	C Balance Sheet				
		Check if Schedule O contains a response or note t	o any line in this Part X			
	_			(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			1	223,716
	2	Savings and temporary cash investments		574,282	2	544,383
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	61,789
	5	Loans and other receivables from current and former offi	cers, directors,			
		trustees, key employees, and highest compensated emp			1	
		Complete Part II of Schedule L	•		5	
	6	Loans and other receivables from other disqualified personal	ons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	•			
		sponsoring organizations of section 501(c)(9) voluntary e				
ς l		organizations (see instructions) Complete Part II of Scho	• •		6	
ssets	7	Notes and loans receivable, net			7	
AS.	8	Inventories for sale or use		1,006,285	8	973,160
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or	1			
		other basis Complete Part VI of Schedule D	10a			
	ь	Less accumulated depreciation	10b	1	10c	
	11	Investments—publicly traded secunties	***************************************	3,330,348	11	3,209,804
	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	1,099	
	16	Total assets. Add lines 1 through 15 (must equal line 34	J)	4,910,915	16	5,013,951
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities		20	· 	
	21	Escrow or custodial account liability Complete Part IV of		21		
တ္သ	22	Loans and other payables to current and former officers,	directors,			
Liabilities		trustees, key employees, highest compensated employe	es, and			
iabi		disqualified persons Complete Part II of Schedule L			22	· · · · · · · · · · · · · · · · · · ·
_	23	Secured mortgages and notes payable to unrelated third	parties		23	<u>.</u>
	24	Unsecured notes and loans payable to unrelated third pa	arties		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			440
		of Schedule D			25	110
	26	Total liabilities. Add lines 17 through 25		0	26	110
		Organizations that follow SFAS 117 (ASC 958), chec	k here ▶			
ces		complete lines 27 through 29, and lines 33 and 34.				
lan	27	Unrestricted net assets			27	
Ва	28	Temporanly restricted net assets			28	
pur	29	Permanently restricted net assets			29	
rF		Organizations that do not follow SFAS 117 (ASC 958	B), check here ▶ X and			
Net Assets or Fund Balances		complete lines 30 through 34.		4 010 015	_	6 400 CTT
set	30	Capital stock or trust principal, or current funds		4,910,915		6,423,677
As	31	Paid-in or capital surplus, or land, building, or equipment			31	_1 400 026
Se	32	Retained earnings, endowment, accumulated income, or	r other funds	4 010 015	32	-1,409,836 5,013,841
	33	Total net assets or fund balances		4,910,915	33	5,013,841
	34	Total liabilities and net assets/fund balances		4,910,915	34	5,013,951 Form 990 (2014)

orm	990 (2014) INTERNATIONAL BIBLE ASSOCIATION 75-2966357				Pag	<u>ie 12</u>
Pa	rt XI' Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			17,4	
2	Total expenses (must equal Part IX, column (A), line 25)	2				<u> 363</u>
3	Revenue less expenses Subtract line 2 from line 1	3	<u> </u>	_		<u> 866</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4	l , 91	.0,9	915
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Pnor period adjustments	8		38	30,'	<u> 792</u>
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	5	5,01	.3,8	<u>841</u>
Pa	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other					
	If the organization changed its method of accounting from a pnor year or checked "Other," explain in					
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			1		
	reviewed on a separate basis, consolidated basis, or both			ĺ		
	Separate basis Consolidated basis Both consolidated and separate basis					
þ	Were the organization's financial statements audited by an independent accountant?		L	2b		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:			}		
	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 oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		Ł	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			Ì		
	the Single Audit Act and OMB Circular A-133?		Į	3a		
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			3b		
				For	n 990	(2014)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer Identification number

			INTERNATIONA	L BIBLE AS	SSOCIAT	ION			75-296	6357						
Pa	art I	Reaso	on for Public Charity	Status (All orga	nızations n	nust cor	nplete t	his part) See i	nstruction	S.						
he	orgar	nization is not a	private foundation because	it is (For lines 1 thro	ough 11, ched	k only on	e box)									
1	X	A church, con	vention of churches, or associ	ciation of churches of	described in s	ection 1	70(b)(1)(/	4)(i).								
2		A school desc	ribed in section 170(b)(1)(A)(ii). (Attach Schedi	ule E)											
3	П	A hospital or a	cooperative hospital service	organization descri	bed in sectio	n 170(b)	(1)(A)(iii)	•								
4	П	A medical res	earch organization operated	in conjunction with a	a hospital des	cribed in	section 1	70(b)(1)(A)(iii). Er	ter the hosp	ıtal's name,						
	_	city, and state	-	-												
5		=	on operated for the benefit of	a college or univers	sity owned or o	operated	by a gove	mmental unit desc	nbed in							
	_	-	o)(1)(A)(iv). (Complete Part I	-	•	•	, ,									
6		•	e, or local government or gov	•	cribed in sect	ion 170(l	b)(1)(A)(v	·).								
7		•	on that normally receives a su			-		-	al public							
		•	•	170(b)(1)(A)(vi). (Complete Part II)												
8				described in section 170(b)(1)(A)(vi). (Complete Part II)												
9	Ħ	-		normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross												
-	L	•	activities related to its exemp					-	-							
		•	gross investment income and			-										
			e organization after June 30,					•								
10			on organized and operated ex			•	•	a)(4).								
11	H	-	on organized and operated ex	•			-		ne purposes	of						
		•	ublicly supported organizatio	<u>-</u>				•								
		•	s 11a through 11d that descr													
а	\Box		porting organization operated	• •												
	ـــا		organization(s) the power to	•	•	• •	_	, , , , ,								
			You must complete Part IV			•										
b		•	porting organization supervis	-		th its supi	ported or	anization(s), by ha	ving							
		• •	nagement of the supporting o						_							
) You must complete Part		'				•							
С		•	tionally integrated. A suppo	•		nection v	vith, and t	unctionally integrat	ed with,							
_	_	• •	organization(s) (see instruction	•					•							
d	\Box		functionally integrated. A s	· ·	-				ızatıon(s)							
-	ш		ctionally integrated. The orga													
			see instructions). You must		•											
е	П	•	x if the organization received	•				e I. Type II. Type III								
	ш		tegrated, or Type III non-fund				•									
f	Ent	•	of supported organizations	,												
a			ing information about the sup	ported organization	(s)											
- (I) Nam	e of supported	(II) EIN	(iii) Type of orga	anization	(iv) is the o	rganization	(v) Amount of m	onetary	(vi) Amour	nt of					
		ganization		(described on lin	nes 1–9	listed in you		support (s	80	other suppor						
				above or IRC s (see instruction		docur	nent?	instruction	9)	ınstructio	ns)					
				(300 1130 000	0113/)	Yes	No									
A)				,					-							
-																
B)																
C)				-												
											•					
D)																
E)																

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

<u>Sec</u>	tion A. Public Support							
Caler	dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 201	14	(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					ļ		
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.							
Sec	tion B. Total Support							
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 201	14	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carned on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
11	Total support. Add lines 7 through 10				_		\longrightarrow	
12	Gross receipts from related activities, etc. (see instructions)					12	
13	First five years. If the Form 990 is for the	organization's first,	second, third, fourt	h, or fifth tax year a	as a section 501(c)	(3)		
	organization, check this box and stop here							•
Sec	tion C. Computation of Public Su	pport Percent	age					
14	Public support percentage for 2014 (line 6,	column (f) divided l	by line 11, column	(f))			14	%_
15	Public support percentage from 2013 Sche						15	<u>%</u>
16a	• • • • • • • • • • • • • • • • • • • •				1/3% or more, che	ck this		. —
	box and stop here. The organization qualif	•	••					▶ ∐
b	33 1/3% support test—2013. If the organi				ıs 33 1/3% or more	∌ ,		. □
	check this box and stop here . The organiz							
17a	10%-facts-and-circumstances test—201	•		•	•			
	10% or more, and if the organization meets				•			
	Part VI how the organization meets the "fac	ts-and-circumstant	ces" test. The organ	nization qualifies as	s a publicly suppor	led		. .
	organization				401 47 1			▶ [
Ь	10%-facts-and-circumstances test—201	=				line		
	15 is 10% or more, and if the organization r					ah.		
	Explain in Part VI how the organization med	es the Tacts-and-c	rcumstances" test	ine organization	quaimes as a publi	cıy		▶ □
40	supported organization	mat about a barrar	han 40 40- 405	470 or 47h -hh	this have and acc			▶ _
18	Private foundation. If the organization did	not check a box or	1 line 13, 16a, 16b,	i/a, or i/b, check	uns dox and see			▶ □
	instructions							

Schedule A (Form 990 or 990-EZ) 2014 INTERNATIONAL BIBLE ASSOCIATION 75-2966357

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

<u> 26c</u>	tion A. Public Support					T	
Calen	idar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
8 8	Add lines 7a and 7b Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support	1	<u>l</u>	<u>I</u>	<u>!</u>	1	
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	(4, 44, 44, 44, 44, 44, 44, 44, 44, 44,	(=, = -		(5,2515	1	(,,
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	•	second, third, four	th, or fifth tax year	as a section 501(c)	(3)	
	organization, check this box and stop here		<u> </u>				
	tion C. Computation of Public Su	•		(D)		148	0/
15	Public support percentage for 2014 (line 8,	• • •	•	(1))		15	<u>%</u> %
16 Sec	Public support percentage from 2013 Sche tion D. Computation of Investme] 10]	
<u> </u>	Investment income percentage for 2014 (lii	·		column (fl)		17	%
18	investment income percentage for 2014 (iii			λιαππ (1 <i>))</i>		18	<u> </u>
19a	33 1/3% support tests—2014. If the organ	· ·	•	14, and line 15 is m	ore than 33 1/3%		
	17 is not more than 33 1/3%, check this bo						▶ □
b	33 1/3% support tests—2013. If the organ	•	-				· 🖵
•	line 18 is not more than 33 1/3%, check this						▶ □
20	Private foundation. If the organization did	-	=	-	-		▶ ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A and D, and complete Part V.)

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and comp	olete Part V)		
Sect	on A. All Supporting Organizations			
1	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			ļ
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			İ
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			ļ
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			l
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)]	į
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,		ļ	
	(III) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		<u> </u>
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		<u> </u>
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		ļ
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (a) its supported organizations, (b) individuals that are part of the chantable class			
	benefited by one or more of its supported organizations, or (c) other supporting organizations that also	ĺ		
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6_		<u> </u>
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial			
	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent		1	ļ
	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		ļ
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	1		
	ın section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b_		ļ
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)			
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting	}		
	organizations)? If "Yes," answer (b) below	10a		ļ
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings)

Sched	ule A (Form 990 or 990-EZ) 2014 INTERNATIONAL BIBLE ASSOCIATION 75-296635	57		Page 5
	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	1		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
а	The organization satisfied the Activities Test Complete line 2 below			
þ	The organization is the parent of each of its supported organizations. Complete line 3 below			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions	s)		
2 /	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	1		
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		i	
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2014 INTERNATIONAL BIBLE	ASSOCIATION	75-296	6357 Page 6
Part V' Type III Non-Functionally Integrated 509(a)(3) Sup	porting Organizati	ons	
Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must contain the property of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the content of the	•		
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of pnor-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		Ī <u>-</u>
Section B - Minimum Asset Amount	-	(A) Pnor Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount	,		
see instructions)	4		<u> </u>
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recovenes of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
· · · · · · · · · · · · · · · · · · ·			

4 5

6

emergency temporary reduction (see instructions)	6	
7 Check here if the current year is the organization's first as a non-functionally-integrated Type	: III su	pporting organization (see
instructions)		

Schedule A (Form 990 or 990-EZ) 2014

Enter greater of line 2 or line 3

Income tax imposed in prior year

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

	lle A (Form 990 or 990-EZ) 2014 INTERNATIONAL BIB.			357 Page 7
Par		Supporting Organizati	ons (continued)	
	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpose	-		
2	Amounts paid to perform activity that directly furthers exempt purposes of	от ѕирропеа		
	organizations, in excess of income from activity	tod organizations		
3	Administrative expenses paid to accomplish exempt purposes of suppor	teo organizations		
<u> 4</u> 5	Amounts paid to acquire exempt-use assets Qualified set-aside amounts (pnor IRS approval required)		.	
-5	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization	ion is responsive		
•	(provide details in Part VI) See instructions			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			-
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014			
a				
b				
<u> </u>				<u> </u>
d	F 0040			
	From 2013			
	Total of lines 3a through e	+		
	Applied to underdistributions of prior years			
<u>n</u>	Applied to 2014 distributable amount Carryover from 2009 not applied (see instructions)			
¦-	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section	•		
7	D, line 7 \$			
а	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if			
	any Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)			
6	Remaining underdistributions for 2014 Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions)			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c			
8	Breakdown of line 7			
a				_
b				
С				
d	Excess from 2013			

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

Schedule A (Form 990 or 990-EZ) 2014 INTERNATIONAL BIBLE ASSOCIATION 75-2966357 Part VI Supplemental Information. 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 O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

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

2014

Department of the Treasury Internal Revenue Service Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization

INTERNATIONAL BIBLE ASSOCIATION

Employer identification number 75–2966357

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT
ALL PROGRAM SERVICE ACCOMPLISHMENTS DETAILED IN ACCOMPLISHMENTS 1 THROUGH 3

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION FORM 990 IS AVAILABLE TO PUBLIC UPON REQUEST

FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES

DESCRIPTION

	PROGRA	M SERVICE	MGT & GENE	RAL	FUNDRAISIN	IG		
SALES DISCOU	NT FOR	FREE BIBLE						
	\$	138,718	\$	0	\$	0		
cogs								
	\$	148,346	\$	0	\$	0		
MAINTENANCE	MAINTENANCE AND REPAIRS							
	\$	39,155	\$	0	\$	0		
COMPUTER AND	SOFTW	ARE						
	\$	12,856	\$	0	\$	0		
BENEVOLENCE								
	\$	15,901	\$	0	\$	0		
RENTALS								
	\$	2,810	\$	0	\$	0		
OTHER								

Name of the organization INTERNATIO	\$ 0 NATIONS TO MADASCAR CHURCH		,		Employer Identification number 75–2966357		
	\$	0	\$	2,220	\$	0	
DONATIONS	TO MADA	ASCAR CHURCH					
	\$	50,521	\$	0	\$	0	
MISCELLANE	ous						
	\$	2,627	\$	0	\$	0	

	٠	Fund Raising	w w
	ployee)	Management & General	\$ 2,220
nents	s for Service (Non-em	Program Service	\$ 138,718 148,346 39,155 12,856 15,901 2,627 \$ 410,934
Federal Statements	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)	Total Expenses	\$ 138,718 148,346 39,155 12,856 15,901 2,220 50,521 \$ 413,154
75-2966357	Form 990, Part	Description	SALES DISCOUNT FOR FREE BIBLE COGS MAINTENANCE AND REPAIRS COMPUTER AND SOFTWARE BENEVOLENCE RENTALS OTHER DONATIONS TO MADASCAR CHURCH MISCELLANEOUS TOTAL

. . .

91 7108 2133 3933 2512 9154

COPY

Minder Spek 136

8

Destination 212 debe Customer Riferance: 4) 'reasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

reasury avice	► File a separate application for each ► Information about Form 8868 and its instructions is a		
	an Automatic 3-Month Extension, complete only Part I and an Additional (Not Automatic) 3-Month Extension, comple		
	ert II unless you have already been granted an automatic 3-n		
require ist an e ansfers	(iie). You can electronically file Form 8868 if you need a 3-mined to file Form 990-T), or an additional (not automatic) 3-monextension of time to file any of the forms listed in Part I or its Associated With Certain Personal Benefit Contracts, where details on the electronic filing of this form, visit www.irs.go	th extension of time. You can e Part II with the exception of Fo ich must be sent to the IRS	electronically file Form orm 8870, Information in paper format (see
utoma	atic 3-Month Extension of Time. Only submit original	(no copies needed).	· · · · · · · · · · · · · · · · · · ·
	s (including 1120-C filers), partnerships, REMICs, and trusts		▶ □
		Enter filer's Identifying n	umber, see instructions
Name of	f exempt organization or other filer, see instructions.	Employer identification nur	mber (EIN) or
NTERN	ATIONAL BIBLE ASSOCIATION INC	75-296	357
Number	, street, and room or suite no. If a P O. box, see instructions	Social security number (SS	SN)
1740 S E	BUCKNER BLVD		
City, tov	wn or post office, state, and ZIP code. For a foreign address, see ins	tructions.	
ALLAS	5, TX 75227-2301		
ırn cod	le for the return that this application is for (file a separate app	lication for each return)	0 1

IS FOR	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

rorm	990-T (sec. 401(a) or 408(a) trust) 0	15	Form 6069				11	
Form	990-T (trust other than above) 0	6	Form 8870				12	
The	pooks are in the care of ► INTERNATIONAL BIBLE ASSO	CIAT	ION, INC					
Tele	phone No. ► 214-388-5111	F	ax No. ▶	214-388-5111				
If the	organization does not have an office or place of busines is so for a Group Return, enter the organization's four digi	ss in	the United State	s, check this box			▶□	
	whole group, check this box ▶ ☐ . If it is for ith the names and EINs of all members the extension is		t of the group, o	heck this box	▶ [and attach		
1	I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15 , 20 15 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ ☑ calendar year 20 14 or							
2	► □ tax year beginning If the tax year entered in line 1 is for less than 12 month □ Change in accounting period					, 20	·-· '	
За	If this application is for Forms 990-BL, 990-PF, 990-T, anonrefundable credits. See instructions.	4720,	or 6069, enter t	he tentative tax, less any	3a	\$		
b	If this application is for Forms 990-PF, 990-T, 4720 estimated tax payments made. Include any prior year o		-		3b	\$		
c	Balance due. Subtract line 3b from line 3a. Include you EFTPS (Electronic Federal Tax Payment System). See it			orm, if required, by using	3с	\$		

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.