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Department of the Treasury Internal Revenue Service

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

Operato Rublia Insperation

OMB No 1545-0047

A	For the	2014 calen	dar ye	ar, or ta	x year begi	nning		, 2014	, and end	ding			,	
В	Check if a	pplicable	C Na	me of organ	nization WO	RLD BIB	LE SCHOO	L OF TUL	ARE CO	UNTY	D Emplo	yer iden	tification number	r
	Addr	ess change	Do	ing busines	s as						77 -	0236	056	
	Nam	e change	Nu	mber and s	treet (or P O bo	ox if mail is not d	elivered to street	address)	Roc	m/suite	E Teleph	one nun	iber	
	Initia	i return	P.0	вох	3700				ŀ		(55	9) 9	967-0913	
	Final	eturn/terminated				, country, and ZI	P or foreign posta	al code						
	HAme	nded return	VISZ	ALIA				CA	9327	Я	G Gross	receipts	\$ 539,72	21
	1-1	cation pending	$\overline{}$		dress of principa	al officer			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		nis a group retur			res X No
						DOVE DR	VISAL	TA C	A 9329	1 H(b) Are	all subordinates o, attach a list	include		res No
	Tay-ay	empt status	X 50		501(c) ((insert no)	4947(a)(1) or		± 14.∨	o, attach a list	(see inst	ructions)	_
<u> </u>				1(0)(3)	[]301(c) ((mserrio)	[[4547(a)(1) 0]					_	
3					T - T	T	1 au b	10			up exemption no			
K		organization		rporation	Trust	Association	Other >		Year of form	ation 19	92 M	State of	legal domicile (<u>CA</u>
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Ver	2 0	heck this bo	, T = -1	I the	organizatio	n discontinu	od ite operati	ons or dispose	ad of more		of its not a			·
Ĝ	3 N						art VI, line 1a					33613	1	Δ
વ્ય	4 N							art VI, line 1b)				4		4
ties	5 T	otal number	of indi	viduals e	mployed in	calendar yea	ar 2014 (Part	V, line 2a)				5		1
Ĭ	6 T	otal number	of volu	ınteers (e	estimate if n	ecessary)						6		6
Ac	7a T	otal unrelate	ed busir	ness reve	enue from P	art VIII, colu	mn (C), line 1	12				7a		
Ø	b N	et unrelated	busine	ess taxab	ole income f	rom Form 99	0-T, line 34 .			•		7b		0.
AON GENNINGS Activities & Governance											Prior Year		Current	
	8 C	ontributions	and gr	ants (Pa	rt VIII, line 1	h)		•			540,4	105.	53	39,721.
2	9 P	rogram serv	ice rev	enue (Pa	art VIII, line :	2g)								
Mark Services	10 Ir	vestment in	come (Part VIII,	, column (A)	, lines 3, 4, a	and 7d)		•		7)	5.		
Ç	11 C	ther revenu	e (Part	VIII, colu	ımn (A), line	es 5, 6d, 8c,	9c, 10c, and	行(1)						
~	12 T	otal revenue	e – ado	lines 8 t	through 11 (must equal l	Part VIII/colu	ımn (A); line il	21/15:1	7	540,4	110.	53	39,721.
\mathcal{Z}	13 G	rants and si	ımılar a	mounts p	oaid (Part IX	(, column (A)	, lines 1/3) .			Peal	434,	279.	48	31,264.
(144 B	enefits paid	to or fo	or membe	ers (Part IX,	column (A),	line 4)	·067 : 6	<u> </u>	·				
	15 S	alaries, othe	er comp	ensation	n, employee	benefits (Pa	rt IX, column	(A), lines 5-16	3) 2018	15	23,	398.	2	21,948.
Ses	16a P	rofessional :	fundrais	sına fees	(Part IX. co	olumn (A), lin	e 11e)			1.3				
	1			_	-	ımn (D), line	11	0000	777			新闻	PERSONAL PROPERTY.	
SNOZ @ Expenses	1							<u>ogden</u>	0,402	· -				TVERSELECT
	1	-				es 11a-11d,	-	,			36,8			36,072.
		-				•	column (A),	line 25)		· ·	494,		53	39,284.
		evenue less	expen	ses Sub	tract line 18	3 from line 12	· · ·			• •	45,8	357.	ļ	437.
Assets or 1 Balances										Begin	ning of Curre			
alar alar	20 T	otal assets (•	• •	69,1		6	59,902.
et As	21 T	otal liabilitie:	s (Part	X, line 26	6)	•				• •		347.	ļ	2,038.
ž.5	22 N	et assets or	fund b	alances	Subtract lin	e 21 from lin	e 20			· <u>·</u>	69,	532.	6	57,86 <u>4.</u>
Pa	rt II	Signatui	re Blo	6 k) / \	<u> </u>				_				,	
Unde	r penalties			130/	nined this period	including accor	mpanying schedu	les and statements	, and to the	best of my kn	owledge and be	lief, it is	true, correct, and	
comp	olete Decla	aration of prepar	er other	tiff officer) staged of fall	information of w	hich preparer has	les and statements any knowledge						
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							? (see instruc					• • • •		No No
BA	A For P	aperwork F	⊀educt:	ion Act f	Notice, see	the separat	e instruction	ıs.	٦	ΓΕΕΑ0101 0	5/28/14		Form 9	990 (2014)

_	m 990 (2014) WORLD BIBLE SCHOOL OF TULARE COUNTY	77-0	236056 Page 2
Par	rt III Statement of Program Service Accomplishments		
_	Check if Schedule O contains a response or note to any line in this Part III	·	_ · <u> </u>
1	Briefly describe the organization's mission		
`	TO TEACH THE BIBLE TO ANYONE		
	WHO IS INTERESTED IN LEARNING IT		
2	Did the organization undertake any significant program services during the year which w	vere not listed on the prior	
-	Form 990 or 990-EZ?		Yes X No
	If 'Yes,' describe these new services on Schedule O		
3		any program services?	. Yes X No
3	If 'Yes,' describe these changes on Schedule O	any program services	· Les 🖺 no
4	· · · · · · · · · · · · · · · · · · ·	et program convicac las massiv	rad by avnances
-	Describe the organization's program service accomplishments for each of its three large Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grant and revenue, if any, for each program service reported	is and allocations to others, the	lotal expenses,
4 a	a (Code) (Expenses \$ 481,264 including grants of \$	0 .) (Revenue	\$ 538,430)
	THE COMPANY ACHIEVES ITS GOALS BY PRINTING, ASSEMBLE		
	AND SHIPPING BIBLE CORRESPONDENCE COURSES, FREE OF C	CHARGE, TO ANY	-
	PERSON WHO IS INTERESTED IN STUDYING THE BIBLE.		
			
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4 b	b (Code ) (Expenses \$ including grants of \$	) (Revenue	ė \
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4 0	c (Code ) (Expenses \$ including grants of \$	) (Revenue	s )
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4 d	d Other program services (Describe in Schedule O )		
	(Expenses \$ including grants of \$	) (Revenue \$	)
4 e	e Total program service expenses ► 481, 264.		
BAA			Form <b>990</b> (2014)

			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_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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		х
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		х
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9_		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable		,	' <b>a</b> ' <i>a</i> · a
4	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
ļ	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 ь		х
•	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		х
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	ļ	Х
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11f	ļ 	х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		х
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	ļ	Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	<del>  -</del>	Х
I	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	х	
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	Х	
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		х
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		х
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		х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	<u> </u>	Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 ь	1	ì

	n 990 (2014) WORLD BIBLE SCHOOL OF TULARE COUNTY 77-023609	56	P	age 4
Pa	Checklist of Required Schedules (continued)		Yes	No
		Γ	163	100
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		x
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of	1		<del>                                     </del>
24	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		x
ı	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		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I.	25a		х
I	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		х
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?	26		x
27	If 'Yes', complete Schedule L, Part II	20		
	of any of these persons? If 'Yes,' complete Schedule L, Part III	27		X
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)			
i	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	<u> </u>	X
I	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
ı	c 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		х
31		31		Х
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	Day to the second of the secon	33		x
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV,			x
25	and Part V, line 1  a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a	<del> </del>	$\frac{\lambda}{X}$
		334	<del>                                     </del>	+-
	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		<del> </del>
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36_	<u> </u>	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	<u> </u>	x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	x	

_				Yes	No			
1	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 1						
	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1 b						
	c Did the organization comply with backup withholding rules for reportable payments to vendors and (gambling) winnings to prize winners?	reportable gaming	1 c					
2	a 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	2 a ]						
	b If at least one is reported on line 2a, did the organization file all required federal employment tax re		2 b	Х				
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction							
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3 a		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		3 b					
	a At any time during the calendar year, did the organization have an interest in, or a signature or oth							
financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
	b If 'Yes,' enter the name of the foreign country ►  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financia	al Accounts (FBAR)	-					
_	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year'		5 a		Х			
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tran		5 b		X			
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c					
	-							
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did solicit any contributions that were not tax deductible as charitable contributions?	• • • • • • • • • • • • • • • • • • • •	6 a		Х			
	b If 'Yes,' did the organization include with every solicitation an express statement that such contribution that deductible?	itions or gifts were	6 b		-			
7				1				
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly f services provided to the payor?	or goods and	7 a		Х			
	<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b					
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it Form 8282?	was required to file	7 с		Х			
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d						
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benef		7 e		X			
	f Dtd the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co	ontract?	7 f		Х			
	g If the organization received a contribution of qualified intellectual property, did the organization file as required?	Form 8899	7 g					
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes,	nization file a	7 h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain	ained by the sponsoring			F			
	organization have excess business holdings at any time during the year?		8					
9	Sponsoring organizations maintaining donor advised funds.							
	a Did the sponsoring organization make any taxable distributions under section 4966?		9 a	ļ	<u> </u>			
	<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	• • • •	9 b					
10	,,,,	l .a. l						
		10a						
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b						
11	Section 501(c)(12) organizations. Enter	المما						
	a Gross income from members or shareholders	11a	-					
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b						
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F		12 a					
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b	-					
13	Section 501(c)(29) qualified nonprofit health insurance issuers a is the organization licensed to issue qualified health plans in more than one state?		13 a					
	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	ll						
	which the organization is licensed to issue qualified health plans	13b	-					
	c Enter the amount of reserves on hand	13c	4.4		Х			
14	a Did the organization receive any payments for indoor tanning services during the tax year?		14 a	<del>                                     </del>	<u> </u>			
<u> </u>	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedul	ле О	14 b		2014)			
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Form 990 (2014) WORLD BIBLE SCHOOL OF TULARE COUNTY 77-	0236056		Pa	age 6
Park Will Governance, Management, and Disclosure For each 'Yes' response to lines 2 throug a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or	gh 7b below,	and		
Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI.				X
Section A. Governing Body and Management				
1 1		,	Yes	No
1 a 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	4			
<ul> <li>b Enter the number of voting members included in line 1a, above, who are independent</li></ul>	4 er			
officer, director, trustee, or key employee?		2	Х	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervior of officers, directors, or trustees, or key employees to a management company or other person?		3		х
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		х
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		5		$\frac{x}{x}$
6 Did the organization have members or stockholders?		6		<del></del>
7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or members of the governing body?	<b>I</b>	7 a		<del></del>
	· · · · ·	<del></del> -		
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7 b	-	Х
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year the following	by			
a The governing body?		8 a	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	· · · · }	8 b	Х	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O		9		
Section B. Policies (This Section B requests information about policies not required by the Inter-	nal Revenu			
	_		Yes	No
10 a Did the organization have local chapters, branches, or affiliates?	· · · · · ·  _1	10 a		X
<b>b</b> If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure operations are consistent with the organization's exempt purposes?		10 b		
11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		11 a	Х	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990			7	
12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13		12 a		X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12 b		
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done		12 c		
13 Did the organization have a written whistleblower policy?		13		Х
14 Did the organization have a written document retention and destruction policy?	🔽	14		Х
15 Did the process for determining compensation of the following persons include a review and approval by independe persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	nt			
a The organization's CEO, Executive Director, or top management official	<i>.</i> [7	15 a	Х	
b Other officers or key employees of the organization	[-	15 b	T	Х
If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)	Ī			
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		16a		X
b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the				
organization's exempt status with respect to such arrangements?	· · · · · · · · · · · · · · · · · · ·	16 b		
Section C. Disclosure	<del></del>	——		
17 List the states with which a copy of this Form 990 is required to be filed >			<b>.</b>	_ <b>_</b> -
Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5010 for public inspection. Indicate how you made these available. Check all that apply  Own website		aılable	€	
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial state the public during the tax year	ements available t	.0		

JOEL COPPINGER

VISALIA

20 State the name, address, and telephone number of the person who possesses the organization's books and records

1130 DOVE DR

93291

,											
Form 990 (2014) WORLD BIBLE SCHOOL OF Particular Compensation of Officers, Direct					/ Ei	lam	OVE	ees. Highest C	77-02360 compensated Er		
Independent Contractors							٠,٠	g			
Check if Schedule O contains a response or										<u>· · · · </u>	
Section A. Officers, Directors, Trustees, K											
1 a Complete this table for all persons required to be lister organization's tax year	•										
<ul> <li>List all of the organization's current officers, director</li> <li>compensation Enter -0- in columns (D), (E), and (F) if no</li> </ul>						duals	OF (	organizations), reg	ardless of amount of		
<ul> <li>List all of the organization's current key employees</li> </ul>	, if any Se	e ins	struc	ctions	s for	defir	nitio	n of 'key employee	• '		
<ul> <li>List the organization's five current highest compensation (Box 5 of Form Worganization and any related organizations</li> </ul>											
<ul> <li>List all of the organization's former officers, key em of reportable compensation from the organization and any</li> </ul>					omp	ensa	ted	employees who re	ceived more than \$1	00,000	
<ul> <li>List all of the organization's former directors or truorganization, more than \$10,000 of reportable compensa</li> </ul>											
List persons in the following order individual trustees or c employees, and former such persons	directors, ir	nstitu	tiona	al tru	stee	es, of	fice	rs, key employees,	highest compensate	ed	
Check this box if neither the organization nor any rela	ted organi	zatio	n co	mpe	nsa	ted a	iny d	current officer, dire	ctor, or trustee		
				(C)							
(A) Name and Title	(B) Average hours	Average is both an officer and a					re on	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other	
	per week	or director	-	Officer		Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) JOEL COPPINGER	35.00	\		.,	,,				_	_	
TRUSTEE/DIRECTOR/TREASURER	ļ	X	<u> </u>	Х	X	ļ	⊢	19,695.	0.	0.	
(2) LES SPITLER TRUSTEE/PRESIDENT	-0.00	x						0.	0.	0.	
(3) CLAUDE VICE	0.00	x									
TRUSTEE/SECRETARY		<u>├</u> ^	-	$\vdash$			├	0.	0.	0.	
	_0.00	Х						0.	0.	0.	
_(5)											
		<u> </u>				_	$\vdash$			<del>-</del>	
(7)	-					_	$\vdash$				
		ļ					<u> </u> _				
_(8)							1	1			

BAA TEEA0107 02/27/14

(10)

<u>(11)</u>____

<u>(12)</u>___

(13)___

Form **990** (2014)

2	Total number of independent contractors (including but not limited to those listed above) who received more than	en en en en organismo byen e Aprilla
	\$100,000 of compensation from the organization	

		Check if Schedule O c	ontains a r	espons	se or note to any li	ne in this Part VIII			· · <u>L</u>
				<u> </u>		(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
						}	function revenue	revenue	under sections 512-514
s s	1 a	Federated campaigns .	. 1	1 a	· ·		1010100		012 011
ran Crit		Membership dues	-	1 b		1			
, Gi		Fundraising events	j-	1 c		†		ļ	
ifts rr A		=		1 d		†			
s, G nula		Government grants (contribution	<u> </u>	1 e		1		ļ	
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grassimilar amounts not included a	ants, and	1 f	539,721.	- '			
를 를		Noncash contributions included	L		JJ9, 121.	<b>*</b>			
덩	_	Total. Add lines 1a-1f		·· Y_	. •	539,721			
e e				·· T	Business Code	337,721			
Program Service Revenue	2 a					**************************************		1	
Re	b				· · . · . · . · · · · · · · · · · ·				
ice	С				· · · · · · · · · · · · · · · · · · ·				
ξ	d								
Ë	е	<b></b>						<u> </u>	
gra	f	All other program service	revenue				<del>-</del>		
Pro				 	. ,		<del>- ,</del>	HI	<del>, -, -, -, -, -, -, -, -, -, -, -, -, -,</del>
	<u>_</u> _	Investment income (inclu							
		other similar amounts)		ailus, ii			İ		
	4	Income from investment	of tax-exer	npt bor	nd proceeds				
	5	Royalties							
			(ı) Rea	al	(II) Personal	M. 1 1 1 1 1 1 1	,		,
	6 a	Gross rents				<b>]</b> ,	1	İ	
	b	Less rental expenses				]\	}		l la la
	c	Rental income or (loss)							
	d i	Net rental income or (loss	s)						
	7 a	Gross amount from sales of	(ı) Securi	ties	(II) Other	4			_
		assets other than inventory				,	1		
	b	Less cost or other basis				} <del>,</del>			
		and sales expenses .				-1 -			Į
		Gain or (loss)						<del> </del>	
	d	Net gain or (loss)							
ē		Gross income from fundr	aising evei	nts	i		1	1	1
enı		(not including. \$					,		
Revenue		of contributions reported		)	J	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	J		
		See Part IV, line 18		a		1	1		
Other		Less direct expenses .		. Ь	<u></u>		ł		
Q	С	Net income or (loss) from	n fundraisir	ng ever	nts	ļ			
	9 a	Gross income from gamii See Part IV, line 19 .	ng activitie	s a		.,			
	b	Less direct expenses .		b		1			
	C	Net income or (loss) from	n gamıng a	ctivities	. •				
	10 a	Gross sales of inventory, and allowances	less return	ns <b>a</b>					
	b	Less cost of goods sold		b		<u> </u>	1	<u> </u>	
	С	Net income or (loss) from	sales of i	nventoi	y <b>&gt;</b>				
		Miscellaneous Revenu	e		Business Code				
	11 a								
	b								
	С								
	d.	All other revenue							
	e	Total. Add lines 11a-11d							
	12	Total revenue. See instr	uctions .			529 721			

Part X Statement of Functional Expenses

000	Check if Schedule O contains a re				
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to 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 individuals. See Part IV, lines 15 and 16.	481,264.	481,264.		
4 5	Benefits paid to or for members	19,695.	19,695.	0.	0.
·	disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits .	2,253.	0.	2,253	0.
10	Payroll taxes	2,233,		2,233	
	,				
11	Fees for services (non-employees)				
ā	Management				
Ł	Legal				
c	: Accounting				
c	Lobbying				
6	Professional fundraising services See Part IV, line 17.				
	Investment management fees		<u></u>	<u></u>	
	Other (If line 11g amt exceeds 10% of line 25, column				<del></del>
9	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	34.	34	0.	0.
13	Office expenses	3,744.	0.	3,744.	0.
14	Information technology	2,447.	0.	0.	2,447.
15	Royalties				
16	Occupancy	5,635.	0.	1,620.	4,015.
17	Travel	6,280.	6,280	0.	0.
18	Payments of travel or entertainment	0,200.	0,200		
10	expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	50.	50.	0.	0.
20	Interest	5.	0.	5.	0.
21	Payments to affiliates			·	
22	Depreciation, depletion, and amortization	376.	.0.	376	0.
23	Insurance	5,501.	0.	5,501.	0.
24	Other expenses Itemize expenses not				er – epiron di makerine were i — p
	covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e	er and a state of the first of the second			
	expenses on Schedule O)				
a t	WIDOW_RETIREMENT	12,000.	0.	_12,000.	0_
,	,				<del></del>
,	`			······································	
	^ +		<del></del>	·	····
	All other expenses				<del></del>
25	Total functional expenses. Add lines 1 through 24e.	539,284.	507,323.	_25,499.	6,462.
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   SOR 08 2 (ASC 058 730)		,		
	SOP 98-2 (ASC 958-720)			<u> </u>	

34

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Total liabilities and net assets/fund balances . . . .

34

69,879

Forn	1990 (2014)WORLD BIBLE SCHOOL OF TULARE COUNTY	77-C	236056		Page 12
Pa	txix Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>	]
1	Total revenue (must equal Part VIII, column (A), line 12)	•	1	535	9,721.
2	Total expenses (must equal Part IX, column (A), line 25)	[	2	539	9,284.
3	Revenue less expenses Subtract line 2 from line 1	. [	3		437.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. [	4	6.9	9,532.
5	Net unrealized gains (losses) on investments	. [	5		
6	Donated services and use of facilities	[	6		
7	Investment expenses		7		
8	Prior period adjustments		8		2,105.
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	<u>ر</u>	7 064
'Da	t'XIII Financial Statements and Reporting		10	6	7,864.
,F _E a					
	Check if Schedule O contains a response or note to any line in this Part XII			· · ·	· · ;
				Y	'es No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a	Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	s <u>ep</u> arate basis, consolidate <u>d b</u> asis, or both			,	
	Separate basis Consolidated basis Both consolidated and separate basis				
1	Were the organization's financial statements audited by an independent accountant?			2 b	Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate				1 at 10
	basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit		2 c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3 :	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle		3 a	Х
1	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required	ed au	dıt		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 Б	
BAA				Form 9	90 (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.

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.

Empl

OMB No 1545-0047

न्यात्रिकी कार्यात्व स्थापन

Name o	ame of the organization Employer identification number											
WOR	LD BIBLE SCHOOL OF TU	LARE COUNTY				77-023605	77-0236056					
Part	Reason for Public Cha	rity Status (All or	ganizations must co	mplete	this p	art.) See instruction	ns					
The o	rganization is not a private foundat	ion because it is (For	lines 1 through 11, check	only on	e box )							
1	A church, convention of church	nes, or association of c	churches described in se	ction 17	0(b)(1)(	A)(ı).						
2	A school described in section	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	A hospital or a cooperative hos	spital service organizat	tion described in <b>section</b>	170(b)(	1)(A)(iii	).						
4	A medical research organization						ne hospital's					
	name, city, and state											
5	An organization operated for the	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)										
6	A federal, state, or local gover	nment or governmenta	I unit described in <b>sectio</b>	n 170(b	)(1)(A)( ¹	<b>/</b> ).						
7	An organization that normally in section 170(b)(1)(A)(vi).	Complete Part II)	•	governn	nental u	nit or from the general pu	ublic described					
8	A community trust described in	n section 170(b)(1)(A)	(vi). (Complete Part II)									
9	from activities related to its eximinvestment income and unrela June 30, 1975 See section 5	An organization that normally receives (1) more than 33-1/3% 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 33-1/3% 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	•										
11	An organization organized and or more publicly supported org lines 11a through 11d that des	janizations described ii	n section 509(a)(1) or se	ection 50	09(a)(2)	. See section 509(a)(3).	urposes of one Check the box in					
а	Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV. Sections A and B.											
b												
С	Type III functionally integrat organization(s) (see instruction	<b>ed.</b> A supporting orgar ns) <b>You must comple</b>	nization operated in connete Part IV, Sections A,	ection w <b>D, and E</b>	ith, and	functionally integrated w	rith, its supported					
d	Type III non-functionally inte functionally integrated. The organistructions.) You must comp	panization generally m	ust satisfy a distribution i									
е	Check this box if the organizat integrated, or Type III non-fund	ion received a written of the ctionally integrated sup	determination from the IF porting organization	RS that is	з а Туре	I, Type II, Type III funct	onally					
f	Enter the number of supported or	_										
g	Provide the following information	about the supported or	ganization(s)									
	(i) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) fs organization in your go docurr	on listed everning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
				Yes	No							
(A)												
<u>(B)</u>												
(C)												
(D)						_						
(E)												
		\$1.50 (A) (A) (基础			1000							
Total												

(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 )

Sec	tion A. Public Support						
	ndar year (or fiscal year nning in) ►	(a) 2010	( <b>b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	311,951.	379,083.	573,315.	540,405.	540,410.	2,345,164.
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	311,951.	379,083.	573,315.	540,405.	540,410.	2,345,164.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4 · · · · · · · · · · · · · · · · · ·						2,345,164.
Section B. Total Support							
Cale begır	ndar year (or fiscal year nning ɪn) ►	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	311,951.	379,083.	573,315.	540,405.	54 <u>0,410.</u>	2,345,164.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	22.	7.	12.	5.	12.	58.
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 VI)						
11	Total support. Add lines 7 through 10 .						2,345,222.
12	Gross receipts from related activit	ies, etc (see instru	ctions)			. 12	
13	First five years. If the Form 990 is organization, check this box and s	s for the organizati stop here	on's first, second, t	third, fourth, or fifth	tax year as a sect	ion 501(c)(3)	<b>.</b>
Sec	tion C. Computation of Pu	blic Support F	Percentage				·
14	Public support percentage for 201	• •				14	100 00 %
15	Public support percentage from 20	013 Schedule A, Pa	art II, line 14 · ·			15	99.99%
16 a	33-1/3% support test — 2014. If and stop here. The organization of	the organization di qualifies as a public	d not check the bo cly supported orga	x on line 13, and the nization	he line 14 is 33-1/3	% or more, check	this box · · · · · ► X
b	33-1/3% support test — 2013. If the and stop here. The organization						this box
17 a	10%-facts-and-circumstances to or more, and if the organization meets the 'facts-a	eets the 'facts-and	-circumstances' tes	st, check this box a	and stop here. Exp	olain in Part VI how	% ′ <b> ►</b> □
	10%-facts-and-circumstances to or more, and if the organization meets the 'facts-and-	eets the 'facts-and circumstances' tes	-circumstances' tes t The organization	st, check this box a n qualifies as a pub	and <b>stop here</b> Exp olicly supported org	olain in Part VI hov janization	v the
18	Private foundation. If the organiz	ation did not checl	k a box on line 13,	16a, 16b, 17a, or	1/b, check this box	and see instruction	ons . •

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

Information about Schedule D (Form 990) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

Inspection

WORLD BIBLE SCHOOL OF TULARE COUNTY 77-0236056 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . No Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2 a a Total number of conservation easements 2h **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds? . . . . . . . Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year **►**\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III* Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included in Form 990, Part VIII, line 1 . b Assets included in Form 990, Part X . . . \$

Schedule D (Form 990) 2014 WORLD	BIBLE SCHOO	L OF TULARE	COUNTY		77-0236	056		Page 2
Part III Organizations Maintai				, or Other S			ontin <u>u</u>	ed)
3 Using the organization's acquisition items (check all that apply)	, accession, and other	er records, check a	any of the following t	that are a signif	cant use of its	collection	on	
a Public exhibition		d Loan o	r exchange program	าร				
b Scholarly research		e Other						
c Preservation for future generati	ions							
Provide a description of the organiz Part XIII		•	,	·	, ,			
5 During the year, did the organizatio to be sold to raise funds rather than	n solicit or receive do n to be maintained as	onations of art, hist part of the organi	orical treasures, or ozation's collection?.	other similar as	sets [	Yes		No
Part IV Escrow and Custodial line 9, or reported an ar	Arrangements. mount on Form 9	Complete if the 90, Part X, line	e organization a 21.	answered 'Ye	s' to Form 9	90, P	art IV	,
1 a is the organization an agent, trusted on Form 990, Part X?.		intermediary for c		r assets not incl	uded [	Yes		No
<b>b</b> If 'Yes,' explain the arrangement in	Part XIII and comple	te the following tat	ole.					
					Α	mount		
c Beginning balance	•			. 1c				
<b>d</b> Additions during the year .				. 1 d				
e Distributions during the year				. 1e				
f Ending balance				. 1f				
2 a Did the organization include an amo	ount on Form 990, Pa	art X, line 21, for e	scrow or custodial a	ccount liability?		Yes		No
<b>b</b> If 'Yes,' explain the arrangement in	Part XIII Check here	e if the explanation	has been provided	ın Part XIII		<del>.</del>	. [	
Part V Endowment Funds. Co	omplete if the org	ganization ansv	vered 'Yes' to Fo	orm 990, Pa	rt IV, line 10			
· · · · · · · · · · · · · · · · · · ·	(a) Current year	(b) Prior year	(c) Two years		ree years back		our years	back
1 a Beginning of year balance	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1						
<b>b</b> Contributions								
·								
c Net investment earnings, gains, and losses					<del></del>			
d Grants or scholarships						<del></del>		
e Other expenditures for facilities and programs						L		
f Administrative expenses								
g End of year balance						1		
2 Provide the estimated percentage of	of the current year en	d balance (line 1g	, column (a)) held as	S				
a Board designated or quasi-endown	nent ►	ૄ						
<b>b</b> Permanent endowment ▶	-8							
c Temporarily restricted endowment	<b>&gt;</b>	ક						
The percentages in lines 2a, 2b, an								
3 a Are there endowment funds not in t	·		are held and admını	stered for the		_		
organization by	•	J					Yes	No
(i) unrelated organizations						3a(ı)		
(ii) related organizations						3a(ii)		
b If 'Yes' to 3a(II), are the related orga	anizations listed as re	equired on Schedu	le R? .	•	[	3b		
4 Describe in Part XIII the intended u	ses of the organization	on's endowment fu	nds		•			
Part VI Land, Buildings, and	Equipment.							
Complete if the organiz	ation answered "	Yes' to Form 9	90, Part IV, line	11a. See Fo	rm 990, Par	t X, Iır	ne 10.	,
Description of property		it or other basis	(b) Cost or other basis (other)		umulated eciation	(d) E	Book va	lue
1a Land					Additional State of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local Control of the Local		-	
<b>b</b> Buildings				Towns to the lines.				
c Leasehold improvements				1	<del></del>			
d Equipment		2 065		<del>                                     </del>	1,619.		ີ າ	, 246
Other		3,865.						. 440
·	<del></del>	000 Part V salva	an (R) Imp 100 l	<u> </u>				246
Total. Add lines 1a through 1e (Column	(u) must equal Form	990, Part X, colun	iii (B), iine Tuc ) .	<del></del>	····	. = =		, 246

TEEA3302 08/25/14

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. **>** 2,246. Schedule **D** (Form 990) 2014

(11)

PartixIII Supplemental Information.

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

BAA

Schedule **D** (Form 990) 2014

#### Schedule F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

2014

OMB No 1545-0047

Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

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Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

WORLD BIBLE SCHOOL OF TULARE COUNTY 77-0236056 Rartiff General Information on Activities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b.

1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance,		_
	the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	· · L_Yes	XNo

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	region (t fundrais services grants	es conducted in by type) (e.g., ing, program investments, to recipients in the region)	(e) If activity (d) is a pro- service, des specific typ service(s) in	gram scribe be of	(f) Total expenditures for and investments in region
(1) South Asia	0	0	PROGRAM	SERVICES	TEACHING	BIBLE	319,533
(2) Sub-Saharan Africa	0	0	PROGRAM	SERVICES	TEACHING	BIBLE	127,146
(3)							
(4)							
(5)							
(6)						_	
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
3 a Sub-total	0	0					446,679
<b>b</b> Total from continuation sheets to Part I						19.7	
c Totals (add lines 3a and 3b) .	0	0					446,679

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

Schedule F (Form 990) 2014

77-0236056

Schedule F (Form 990) 2014

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed.

-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
5		·							
5									
5									
3									
9									
9									
E									
£ 8									
6		1							
5 6									
£									
(12)									
(13)									
(14)									
(15)		,							
(16)	4 1								
<b>6</b> 6	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	tions listed above that fection 501(c)(3) equiv	are recognized as chalency letter	harities by the for	eign country, recogr	nzed as tax-exempt	t by the IRS, or for w		
ر ا	Enter total number of other organizations of entires.							Schedule	Schedule F (Form 990) 2014

Schedule F (Form 990) 2014

Page 3

Schedule F (Form 990) 2014 WORLD BIBLE SCHOOL OF TULARE COUNTY

Fartili Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16 Part III can be duplicated if additional space is needed

(a) Type of grant or assistance (b) Region (c) Number (d) of recipients c	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) PREACHER SUPPORT	Sub-Saharan Africa	4	153,155.	ELECTRONIC	.0	N/A	N/A
(2) HEALTH CLINIC	South Asia	48,000	309,633.	ELECTRONIC	0.	N/A	N/A
(3)							
(4)	`						
(5)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
ВАА			TEEA3503 06/13/14			Schedule F	Schedule F (Form 990) 2014

Sche	edule F (Form 990) 2014 WORLD BIBLE SCHOOL OF TULARE COUNTY	77-0236056	Page 4
Pai	tuv Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	· · · · Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	. Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year?  If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	Yes	X No
BAA	TEEA3505 06/16/13	Schedule F (Fo	orm 990) 2014

Pant V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method; amounts of investments vs expenditures per region), Part II, line 1 (accounting method); Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions)

Pt I Line 2

OFFICERS VISIT THE RECIPENTS TO ENSURE FUNDS ARE USED

#### SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2014

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OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization		Employer identification number
WORLD BIBLE SCHOO	L OF TULARE COUNTY	77-0236056
Pt VI, Line 2	JOEL COPPINGER AND CLAUDE VICE ARE BROTHERS IN I	WAL
	THE COMPENSATION OF THE DIRECTOR/TREASURER IS RE	VIEWED BY THE OTHER
	MEMBERS OF THE GOVERNING BODY. NO OTHER OFFICERS	ARE COMPENSATED AND
Pt VI, Line 15a	THERE ARE NO OTHER EMPLOYEES.	
	FORM 990 AND FINANCIAL STATEMENTS ARE MADE AVAIL	ABLE TO THE PUBLIC UPON
Pt VI, Line 11b	REQUEST.	