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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection

<u>A</u>	Fo	r the 2	014 calendar year, or tax year beginning $$ JAN $$ $$ $$ $$ $$ $$ $$ $$ $$ and er	nding J	UL 31, 2015	
В	Ch	eck if	C Name of organization JOHN WITHERSPOON COLLEGE		D Employer identific	cation number
		Address change	DBA BLACK HILLS BIBLICAL INSTITUTE			
		Name change	Doing business as	20-5	892134	
	ᅥ	Initial retum Final retum/	Number and street (or P.O. box if mail is not delivered to street address) R0 4021 RANGE ROAD	oom/suite	E Telephone number 605-3	342-0317
		termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	254,460.	
		Amended return	RAPID CITY, SD 57702		H(a) is this a group re	turn
		Applica- tion	F Name and address of principal officer LANNY L. EVANS		for subordinates	? Yes X No
_		pending	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
			pt status: X 501(c)(3) 501(c)() ((Insert no.) 4947(a)(1) or	<u></u> 527	If "No," attach a	list (see instructions)
			▶ WWW.JOHNWITHERSPOONCOLLEGE.ORG		H(c) Group exemption	
			ganization: X Corporation Trust Association Other	L Year	of formation: 2007 M	State of legal domicile; SD
L	ar		ummary	00111	TAMEONIA DIN	DDOGE TO MO
Governance		Pl	efly describe the organization's mission or most significant activities: THE OIROVIDE BIBLICAL THEOLOGICAL AND PRACTICAL	L_TRA	INING FOR L	AY AND
		2 Ch	reck this box 🕨 🔲 if the organization discontinued its operations or dispose	d of more	than 25% of its net as	sets
, oc			imber of voting members of the governing body (Part VI, line 1a)	,	3 اي	6
্ৰ	;		imber of independent voting members of the governing body (Part VI, line 1b)	บ วยง	2 4	6
و رُ	}		tal number of individuals employed in calendar year 2014 (Part $\dot{ m V}$; line 2 $\dot{ m a}$) $\dot{ m A}$ R 2	li ZUI		0
Socialities &			tal number of volunteers (estimate if necessary)		<u> </u>	6
چ کچ	}		tal unrelated business revenue from Part VIII, column (C), line 12	-1%: L	7a	0.
のないことです。 Activitie	+	b Ne	t unrelated business taxable income from Form 990-T, line 34			
		8 Co	entributions and grants (Part VIII. line 1h)	-	Prior Year 257,731.	Current Year 173, 175.
Jue -	3		ontributions and grants (Part VIII, line 1h) ogram service revenue (Part VIII, line 2g)	-	58,254.	36,102.
Revenue	!		vestment income (Part VIII, column (A), lines 3, 4, and 7d)		-610.	-8,760.
ď			her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	18,254.	7,325.
	- 1		tal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		333,629.	207,842.
_	_		ants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	16,265.
	1		nefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S.	۱ ۱	15 Sa	laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		163,774.	124,510.
Expenses		16a Pro	ofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
QX.	<u>{</u>	b To	tal fundraising expenses (Part IX, column (D), line 25)	0.		····
ш	'	17 Ot	her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		106,245.	105,502.
	- 1		tal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		270,019.	246,277.
_		19 Re	evenue less expenses. Subtract line 18 from line 12		63,610.	-38,435.
ts or	<u>မ</u> ူ	~~ -	Ash seeds (Death loss 40)	Be	eginning of Current Year	End of Year
Asset			tal assets (Part X, line 16)	-	383,892. 62,095.	382,469. 55,856.
et	⊂		tal liabilities (Part X, line 26) st assets or fund balances. Subtract line 21 from line 20		321,797.	326,613.
Ē	_		Signature Block	L	321,1310	320,013.
_			is of perjury, I declare that I have examined this return, including accompanying schedules a	and statem	ents, and to the best of my	knowledge and belief, it is
			and complete. Declaration of preparer (other than officer) is based on all information of whic			,,,,,
		Ť	Tanny L. En and		3/15/	2016
Si	gn		Signature of officer	•	Daje	
	ere		LANNY/L. EVANS, CHAIRMAN			
			Type or print name and title			
			rint/Type preparer's name Preparer's signature 70		Date Check	PTIN
	id			014 0	3/04/16 self-employe	P00044268
			rm's name CASEY PETERSON & ASSOC		Firm's EIN	46-0403496
Us	e C	inly Fi	rm's address 909 ST JOSEPH ST SUITE 102			05\240 4000
_			RAPID CITY, SD 57701		Phone no. (6	05)348-1930
_			discuss this return with the preparer shown above? (see instructions)			X Yes No
432	200	11-07-1	4 LHA For Paperwork Reduction Act Notice, see the separate instruction	15.		Form 990 (2014)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2014)

JOHN WITHERSPOON COLLEGE

JOHN WITHERSPOON COLLEGE Form 990 (2014) DBA BLACK HILLS BIBLICAL INSTITUTE Part IV | Checklist of Required Schedules

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			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	2	X	├─-
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			Ţ
	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		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		X
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		x
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?			İ
	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		<u> </u>
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.		_ 1	_;
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	_X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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		X
12a	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	Х	
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		<u> </u>
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			v
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> X</u>
10	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,	16		<u> </u>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	2014)

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Form 990 (2014)

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Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			77
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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	x	
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
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
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		
25a	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		X_
ь	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		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,"			l
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			l
	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	İ		
	instructions for applicable filing thresholds, conditions, and exceptions):	_		,,
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	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,			_v
	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		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
	If "Yes," complete Schedule N, Part I	31		 ^
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 3 <u>2</u>		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			 -
5 4	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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-charitable related organization?	<u> </u>	\vdash	\vdash
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<u> </u>		ऻ
	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 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

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Part 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	_		
			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 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0		1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	X
ь	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 over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	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		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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		Х
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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
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		_	
	sponsoring organization have excess business holdings at any time during the year?	_8		
9	Sponsoring organizations maintaining donor advised funds.			
а	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			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
þ	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			ļ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>		<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	<u> </u>
	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	1		
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	 	 	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2014)

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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

_	Check if Schedule O contains a response or note to any line in this Part VI					<u> </u>
<u>Sec</u>	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		<u>6</u>]		1
	If there are material differences in voting rights among members of the governing body, or if the governing					1
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b		<u>6</u>]		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct 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 wa	as filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		Х
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or			
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or			
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ached	at the			l
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapte	s, affiliates,		1	
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	L	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly befo	ore filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			_		-
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to cor	iflicts?	12b	<u> </u>	X
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If *\	es, a	escribe		ĺ	
	ın Schedule O how this was done			12c		X
13	Did the organization have a written whistleblower policy?			13		X
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 approve	•	ndependent	1		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?)		1		;;
	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b		X
	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 arrange	ment v	with a	1	ŀ	
	taxable entity during the year?			16a	-	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		•			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of the control of	nızatıd	on's	l	l	
0	exempt status with respect to such arrangements?			16b	Щ.	<u> </u>
	tion C. Disclosure	_				
17	List the states with which a copy of this Form 990 is required to be filed SD	T (0	FO(()(E)			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	ı (Sec	iion 501(c)(3)s only	availal	oie	
	for public inspection Indicate how you made these available Check all that apply.	O-	hadida (1)			
46	Own website Another's website August Other (explain		•		•	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	ntilet	or interest policy, a	nd finar	icial	
00	statements available to the public during the tax year	l -				
20	State the name, address, and telephone number of the person who possesses the organization's be LANNY L. EVANS - 605-341-2468	oks a	rici records: >			
	13075 MISSION HILLS LOOP, RAPID CITY, SD 57702					

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sation of Officers	Directors,	Trustees, Key	Employees.	Highest Compe	nsated

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees, officers; key employees; highest compensated employees, and former such persons

Check this box if neither the organization	tion nor any related	orga	anıza	tion	COI	npe	nsat	ted any current officer, of	director, or trustee.	
(A) (B)					C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos heck	Position neck more than one			Reportable	Reportable	Estimated
	hours per	box	oox, unless person i			on is both an		compensation	compensation	amount of
	week	-	T	U 2 U	ii oct	,, a da	100,	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	p.o.	93			ated		organization	(W-2/1099-MISC)	from the
	organizations	nstee	trust		8	nge		(W-2/1099-MISC)		organization
	below	la l	Hona		ploy	ž g	_ ا			and related organizations
	line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) MR. LANNY L. EVANS	5.00	Ī	_	_	_		┢	-		
CHARIMAN OF THE BOARD		х		X				0.	0.	1,169.
(2) MR. DALE BARTSCHER	1.00									
VICE CHAIRMAN		X		X				0.	0.	0.
(3) MR, SCOTT VANDER HAMM	1.00									
BOARD MEMBER	1	X						0.	0.	0.
(4) DR. LOYAL TILLOTSON	1.00									
BOARD MEMBER		X					_	0.	0.	0.
(5) MR. WADE MOBLEY	1.00									_
BOARD MEMBER		X						0.	0.	0.
(6) DR. C. RICHARD WELLS	15.00									
PRESIDENT				X				0.	0.	0.
(7) CAROL HARRIS	40.00									-
BOOKKEEPER				X			<u> </u>	14,847.	0.	0.
		<u> </u>					_			
		ļ								
		_	<u> </u>			\vdash	_			
		ł								
		\vdash				-	-			
		i								
					_					
		1								
		T								
		1								
					L		L			
							L			
						1		1		

Form 990 (2014)

compensation

from the

organization

and related

organizations

Form 990 (2014) Part VII Section A. C

					r	7
JOHN W		,				
DBA BL	ACK HILLS	BIBLICAL INS	STITUTE	20-5892	134	Page 8
ion A. Officers, Directors,	Trustees, Key Em	ployees, and Highest C	ompensated Employ	ees (continued)		
(A)	(B)	(C)	(D)	(E)	(F	F)
Name and title	Average	Position (do not check more than one	Reportable	Reportable	Estim	nated
	hours per	box, unless person is both an	compensation	compensation	amou	unt of
	week	officer and a director/trustee)	from	from related	oth	her

the

organization

(W-2/1099-MISC)

organizations

(W-2/1099-MISC)

							·						
1b	Sub-total							_	14,847.	0.		1,1	69.
C	Total from continuation sheets to Part VI	I. Section A						•	0.	0.			0.
	Total (add lines 1b and 1c)							<u> </u>	14,847.	0.		1,1	69.
2	Total number of individuals (including but necessation from the organization	ot limited to th	ose	liste	ed al	bove	e) wh	no re	eceived more than \$100,0	000 of reportable			0
_												Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			e, ke	у ег	nplo	yee.	or I	highest compensated em	ployee on	 3	-	X

(list any

hours for

related

organizations

below

line)

Section	B. Independ	ient Contractors

\$100,000 of compensation from the organization

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services

and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

rendered to the organization? If "Yes," complete Schedule J for such person

(A) Name and business address NONE	NONE Description of services			
		<u> </u>		
		,		

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20-5892134 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue excluded from tax under Related or Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b b Membership dues c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 173,175 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 173,175 Total. Add lines 1a-1f Business Code 900099 35,807 STUDENT TUITION AND FE 35,807. Program Service Revenue SPECIAL EVENTS 295 900099 295. All other program service revenue 36,102. Total. Add lines 2a-2f Investment income (including dividends, interest, and 2,272 2,272. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 7,000. 6 a Gross rents 0 b Less: rental expenses 7,000. c Rental income or (loss) 7,000 7,000. d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other 35,586. assets other than inventory b Less cost or other basis 46,618 and sales expenses 11,032 c Gain or (loss) -11,032-11,032d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 900099 11 a MISCELLANEOUS 325 325 b d All other revenue

325

36,427

Form 990 (2014)

207,842.

Total. Add lines 11a-11d

Total revenue. See instructions.

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Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	mplete column (A)	
	Check if Schedule O contains a respor	nse or note to any line in			
	not include amounts reported on lines 6b, 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	16,265.	16,265.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	ındıvıduals. See Part IV, lines 15 and 16				··
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	14,847.		14,847.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.11 0.04	0.5.00		
7	Other salaries and wages	97,091.	87,382.	9,709.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	4 000	2 (88	400	
9	Other employee benefits	4,086.	3,677.	409.	
10	Payroli taxes	8,486.	7,637.	849.	
11	Fees for services (non-employees)			1	
а	Management				
ь	Legal	1 470		1 470	
С	Accounting	1,470.		1,470.	
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,	393.		393.	
	column (A) amount, list line 11g expenses on Sch O.)	12,608.	11,347.	1,261.	
12	Advertising and promotion	3,836.	3,452.	384.	
13	Office expenses Information technology	5,018.	4,516.	502.	
14	Royalties	3,010.	1,510.	3021	
15	-	12,268.	11,041.	1,227.	·
16 17	Occupancy Travel	309.	278.	31.	-5
17		3031	2,0.	311	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				<u> </u>
20	Interest	1,407.	-	1,407.	
21	Payments to affiliates	_,,		-,	
22	Depreciation, depletion, and amortization	8,815.	7,933.	882.	
23	Insurance				
24	Other expenses. Itemize expenses not covered				· · · · · ·
•	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
2	SPECIAL EVENTS	25,862.	23,276.	2,586.	
a b	A QUIET PLACE MINISTRY	16,251.	14,626.	1,625.	"
c	ACCREDITATION	15,546.	13,991.	1,555.	
d	FACULTY DEVELOPMENT	1,242.	1,118.	124.	
_	All other expenses	477.	429.	48.	
25	Total functional expenses. Add lines 1 through 24e	246,277.	206,968.	39,309.	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)	<u></u>	L		F 000 (004

JOHN WITHERSPOON COLLEGE DBA BLACK HILLS BIBLICAL INSTITUTE

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tΧ	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing	37,896.	1	21,411.
2	Savings and temporary cash investments		2	1,980.
3	•		3	9,650.
_			4	
5	·			
_				
			5	
6				···
	• • •		6	
7				
		4.171.		
h	20 326		100	280,300.
			_	
		557755		69,128.
			-	
	· ·		Ì	
	•			-
	·	383.892.		382,469.
			_	4,291.
			-	· · · · · · · · · · · · · · · · · · ·
	•		-	
	·			
	• •			
			22	
23	·	58,282.		51,565.
ì			-	
	• •			
	Schedule D		25	
26	Total liabilities. Add lines 17 through 25	62,095.	26	55,856.
	•			
27	Unrestricted net assets		27	
28	Temporanly restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here			
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds	0.	30	0.
31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
32	Retained earnings, endowment, accumulated income, or other funds	321,797.	32	326,613.
		201 707		226 612
33	Total net assets or fund balances	321,797. 383,892.	33	326,613. 382,469.
	1 2 3 4 5 6 6 7 8 9 10a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 Cash · non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 4958(c)(3)(B), and contributing employees beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part IV of Schedule D 10b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - publicly traded securities 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Total assets. See Part IV, line 11 18 Total assets. See Part IV, line 11 19 Deferred revenue 10 Tax-exempt bond liabilities 11 Escrow or custodial account liability. Complete Part IV of Schedule D 10 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 10 Secured mortgages and notes payable to unrelated third parties 10 Unsecured notes and loans payable to unrelated third parties 11 Orther liabilities. Add lines 17 through 25 12 Organizations that follow SFAS 117 (ASC 958), check here 12 Taxemproly restricted net assets 12 Temporanly restricted net assets 13 Temporanly restricted net assets 14 Temporanly restricted net assets 15 Organizations that do not follow SFAS 117 (ASC 958), check here 15 Accounts payable fines 30 through 34. 16 Capital stock or trust principal, or current funds 17 Paid-in or capital surplus, or land, building, or equipment fund	Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year 37,896. 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(fi), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L Notes and loans receivable, net 8 inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part IV of Schedule D 10a 308, 636. b Less: accumulated depreciation 11 investments - publicy traded securities 12 investments - program-related See Part IV, line 11 13 investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 25 Complete Part II of Schedule L 26 Secured mortgages and notes payable to unrelated third parties 26 Other habilities including federal income tax, payables to related third parties 27 Unrestricted net assets 28 Temporanty restricted net assets 29 Permanently restricted net assets 30 Total liabilities. Add lines 17 through 25 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building,	Check if Schedule O contains a response or note to any line in this Part X Cash - non-interest-bearing 37 , 896 . 1

Form 990 (2014)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

-				
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Form	1990 (2014) DBA BLACK HILLS BIBLICAL INSTITUTE	40-303	<u> </u>	_ Pag	ge IZ
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		7,8	
2	Total expenses (must equal Part IX, column (A), line 25)	2		6,2	
3	Revenue less expenses Subtract line 2 from line 1	3		8,4	_
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,7	
5	Net unrealized gains (losses) on investments	5		3,1	<u>68.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	4	6,4	
9	Other changes in net assets or fund balances (explain in Schedule O)	9			<u>0.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	32	6,6	13.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
				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 prior year or checked "Other," explain in Schedul	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	ed on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				l
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	ite basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t	he audit,	4		ļ
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sc	hedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ingle Audit			l
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the req	uired audit			

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(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.

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

Open to Public

OMB No 1545-0047

Name of the organization

JOHN WITHERSPOON COLLEGE

DBA BLACK HILLS BIBLICAL INSTITUTE

Employer identification number 20-5892134

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). X 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, crty, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 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 operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. 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. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. rts supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s) (ı) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above or IRC section Instructions) Instructions) (see instructions))

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Schedule A (Form 990 or 990-EZ) 2014 DBA BLACK HILLS BIBLICAL INSTITUTE 20-58923

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)

Sec	tion A. Public Support			·			
Cale	ndar 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.")			1			
2	Tax revenues levied for the organ-	-		<u> </u>			
	ization'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						i
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				1		<u> </u>
	ction B. Total Support	<u>L</u>		1		<u> </u>	
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	(4) 2010	(5) 2011	(6) 2012	(4) 20.0	(0)2014	(7,70101
_	Gross income from interest,				-	1	
8	·						
	dividends, payments received on						
	securities loans, rents, royalties						
_	and income from similar sources				+		
9	Net income from unrelated business	ı					
	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.)						<u></u>
	Total support. Add lines 7 through 10		<u> </u>			ļ - · · ₁ - · · ·	
	Gross receipts from related activities	•	•			12	
13	First five years. If the Form 990 is fo	•	's first, second, thi	rd, fourth, or fifth	tax year as a section	on 501(c)(3)	. 🗀
ē-	organization, check this box and sto	here	roontoss			 	<u> </u>
_				<u> </u>	<u> </u>	T	
	Public support percentage for 2014 (column (f))		14	<u>%</u>
	Public support percentage from 2013					15	%
16a	33 1/3% support test - 2014. If the				e 14 is 33 1/3% or	more, check this b	ox and
	stop here. The organization qualifies		-				▶□
t	33 1/3% support test - 2013. If the				d line 15 is 33 1/39	% or more, check t	his box
	and stop here. The organization qua						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac	cts-and-circumstai	nces" test, check	this box and stop	here. Explain in Pa	art VI how the orga	nization
	meets the "facts-and-circumstances"	test The organization	ation qualifies as a	publicly supporte	ed organization		
t	10% -facts-and-circumstances tes	t - 2013 . If the or	ganization did not	check a box on lir	ne 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets t	he "facts-and-circi	umstances" test, o	check this box and	d stop here. Explai	n in Part VI how th	e
	organization meets the "facts-and-cir	cumstances" test	The organization	qualifies as a pub	licly supported org	janization	ightharpoons
18	Private foundation. If the organization	on did not check a	box on line 13, 10	Sa, 16b, 17a, or 17	7b, check this box	and see instruction	ns 🕨
						edule A /Form 90/	

Schedule A (Form 990 or 990-EZ) 2014 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II)

Se	ction A. Public Support						
Cale	ndar 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						
	ınclude any "unusual grants.")						
2	Gross receipts from admissions,	-					
	merchandise sold or services per-			•			
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
	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						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)					†	
	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6	14744		(9,20.2	(-,	197=311	17.10.
_	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ı	Unrelated business taxable income		<u></u>	<u> </u>	<u> </u>		
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business			 	 		
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain				<u> </u>		<u> </u>
	or loss from the sale of capital						
13	assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)		 				
	First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth 1	tax vear as a section	on 501(c)(3) organi	zation.
	check this box and stop here	o organization	oo., ooooo,	,	,	,,, oo ,(o)(o) o.ga	▶ □
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2014 (column (f))		15	%
16	Public support percentage from 2013	Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Inve	stment Incom	e Percentage)		-	
17						17	%
18						18	%
	33 1/3% support tests - 2014. If the			on line 14, and lin	e 15 is more than	<u> </u>	
-	more than 33 1/3%, check this box a	-					ightharpoons
ļ	33 1/3% support tests - 2013. If the	-	-		•		and
	line 18 is not more than 33 1/3%, che	-					. —
20			· •	•		_	▶□
_							

Schedule A (Form 990 or 990-EZ) 2014 DBA BLACK HILLS BIBLICAL INSTITUTE

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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, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing 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.
- 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)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in part vi what controls the organization put in place to ensure such use
- 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
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c 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) purposes
- 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, (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)
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 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 controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)
- 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).
- 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 in section 509(a)(1) or (2))? If "Yes," provide detail in part VI.
- **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**.
- c 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.
- 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
 - **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)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
į		
6		
<u> </u>		
7		
8		
9a		<u> </u>
9b		<u></u>
9c		<u> </u>
10a		<u> </u>
10b n 990 or 99	M-F7	2014

Schedule A (Form 990 or 990-EZ) 2014 DBA BLACK HILLS BIBLICAL INSTITUTE 20-5892134 Page 5 Supporting Organizations (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a 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? 11h 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 Section B. Type I Supporting Organizations Yes No Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the 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 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 Section C. Type II Supporting Organizations Yes No 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) Section D. Type III Supporting Organizations Yes No 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? 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 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 Section E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see Instructions): The organization satisfied the Activities Test. Complete line 2 below а The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions) C Yes No 2 Activities Test Answer (a) and (b) below. a 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 how these activities directly furthered their exempt purposes, those supported organizations and explain how the organization was responsive to those supported organizations, and how the organization determined 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 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. a 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. За 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

	edule A (Form 990 or 990-EZ) 2014 DBA BLACK HILLS BIBLICA			20-5892134 Page 6
	- Type in item I amount any integration obeliants of capper and			
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	•		ructions. All
	other Type III non-functionally integrated supporting organizations must co	omplete:	Sections A through E	(D) C::::::::::::::::::::::::::::::::::::
Sec	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-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		
Sec	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)	į		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	ion 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	Enter greater of line 2 or line 3	4		-
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	1		
-	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional		ated Type III supporting or	anization (see
-	instructions)	.,togic	The in adploining of	ga.n.eadori (500

Schedule A (Form 990 or 990-EZ) 2014

	dule A (Form 990 or 990-EZ) 2014 DBA BLACK HIL	LS BIBLICAL IN	STITUTE 2	0-5892134 Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
<u>Secti</u>	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exempt			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets	<u> </u>		
5	Qualified set-aside amounts (prior IRS approval required)			
6	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	he organization 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			
Secti	ion 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:			
а				
b				
С				
d	i			
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
_ <u>i</u> _	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D,	,		
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
c	Remainder Subtract lines 4a and 4b from 4			1
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	1		
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c			
8_	Breakdown of line 7			
<u>a</u>				
<u>b</u>				
c				
d	Excess from 2013			

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

JOHN WITHERSPOON COLLEGE Schedule A (Form 990 or 990-EZ) 2014 DBA BLACK HILLS BIBLICAL INSTITUTE 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 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, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Open to Public Inspection

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. JOHN WITHERSPOON COLLEGE

DBA BLACK HILLS BIBLICAL INSTITUTE

Employer identification number

20-5892134 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds 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 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes are the organization's property, subject to the organization's exclusive legal control? 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat □ Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2¢ d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear -Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 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 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 1a 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

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Par	t III Organizations Maintaining C	ollections of A	rt, Historical	Treasures, or Oth	<u>er Similar Asse</u>	ts (continue	ed)
3	Using the organization's acquisition, accession	on, and other recor	ds, check any of t	ne following that are a	significant use of its	collection it	ems
	(check all that apply)						
а	Public exhibition		d ∐∐ Loan ore	xchange programs			
b	Scholarly research		e L Other				
С	Preservation for future generations						
4	Provide a description of the organization's co	llections and expla	un how they furthe	r the organization's ex	empt purpose in Par	t XIII.	
5	During the year, did the organization solicit or				ar assets	-	
	to be sold to raise funds rather than to be ma					Yes	No
Pai	t IV Escrow and Custodial Arran		lete if the organiza	tion answered "Yes" to	Form 990, Part IV,	ıne 9, or	
	reported an amount on Form 990, Par						
1a	Is the organization an agent, trustee, custodi	an or other interme	diary for contribut	ons or other assets no	t included	٠ ،	
	on Form 990, Part X?				<u>i</u>	」 Yes	L∣ No
b	If "Yes," explain the arrangement in Part XIII	and complete the f	ollowing table:				-
						Amount	·
	Beginning balance				1c		
	Additions during the year				1d		
	Distributions during the year				1e		
f	Ending balance	000 D 4 V I	. 04 (1f	Yes	□ No
	Did the organization include an amount on Fo					_ res	
	If "Yes," explain the arrangement in Part XIII. To V Endowment Funds. Complete it						
Га	Lindownient i dirds. Complete ii	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four ye	ars back
10	Beginning of year balance	(a) Current year_	(b) i noi year	(c) The years suck	(d) Impo yours such	(6) . 64. 76	
	Contributions	-	<u> </u>		-	 	
	Net investment earnings, gains, and losses		_				
	Grants or scholarships	.		-			
	Other expenditures for facilities		<u> </u>				
·	and programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the curr	rent year end balan	ice (line 1g, columi	n (a)) held as:			
а	Board designated or quasi-endowment	-	%				
b	Permanent endowment	%					
С	Temporarily restricted endowment ▶	%					
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%.					
За	Are there endowment funds not in the posse	ssion of the organi	zation that are hel	d and administered for	the organization		
	by:					Y	es No
	(i) unrelated organizations					3a(i)	
	(ii) related organizations					3a(ii)	
b	If "Yes" to 3a(II), are the related organizations		on Schedule R?			3b_	i
-	man a management of a first first						

4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated deprectation	(d) Book value		
1a Land		40,000.		40,000.		
b Buildings		259,640.	27,027.	232,613.		
c Leasehold improvements						
d Equipment						
e Other		8,996.	1,309.	7,687.		
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c)						

Schedule D (Form 990) 2014

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Complete if the organization answered "Yes" to (a) Description of security or category (including name of security)				d of coor mortist color
	(b) Book value	(c) Method of Valua	tion: Cost or end	d-of-year market value
) Financial derivatives				
Closely-held equity interests				<u>.</u>
Other (A) BLACK HILLS CORP STOCK	41,660.	END-OF-YEA	D MADEEN	VALUE
(B) GROWTH FUND AMERICA STOCK	27,468.	END-OF-YEA		
(C)	27,400.	END OF TEA	IX MARKET	VALUE
(D)				
(E)				
(F)				
(G)				
(H)		_		
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	69,128.	 		
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" to	Form 990, Part IV, line 1	1c. See Form 990, Part	X, line 13.	
(a) Description of investment	(b) Book value			d-of-year market value
(1)				
(2)		_		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
				
(9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶				
(9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" to	o Form 990, Part IV, line 1 escription	1d See Form 990, Part	t X, line 15.	(b) Book value
(9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" to (a) D (1)		1d See Form 990, Part	X, line 15.	(b) Book value
(9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" to (a) D (1) (2)		1d See Form 990, Part	X, line 15.	(b) Book value
(9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" to (a) D (1) (2) (3)		1d See Form 990, Part	t X, line 15.	(b) Book value
(9) Ital. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" to (a) D (1) (2) (3) (4)		1d See Form 990, Part	X, line 15.	(b) Book value
(9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" to (a) D (1) (2) (3) (4) (5)		1d See Form 990, Part	X, line 15.	(b) Book value
(9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" to (a) D (1) (2) (3) (4) (5) (6)		1d See Form 990, Part	X, line 15.	(b) Book value
(9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" to (a) D (1) (2) (3) (4) (5) (6) (7)		1d See Form 990, Part	X, line 15.	(b) Book value
(9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes" to (a) D (1) (2) (3) (4) (5) (6) (7) (8)		1d See Form 990, Part	X, line 15.	(b) Book value
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DBA BLACK HILLS BIBLICAL INSTITUTE Schedule D (Form 990) 2014 DBA BLACK
| Part VII | Investments - Other Securities.

20-5892134 Page 3

Complete if the organization answered "Yes" to	o Form 990, Part IV, line 1	1b See Form 990, Part X. Inc. 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market	value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) BLACK HILLS CORP STOCK	41,660.	END-OF-YEAR MARKET VALUE	
(B) GROWTH FUND AMERICA STOCK	27,468.	END-OF-YEAR MARKET VALUE	
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	·		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	69,128.		
Part VIII Investments - Program Related.	_		
Complete if the organization answered "Yes" t	o Form 990, Part IV, line	11c_See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market	value
(1)	_		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"			
(a) l	Description	(b) Book v	/alue
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			-
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	9 15)		
Part X Other Liabilities.	4 - F 000 B-+ IV I	44 446 O Farm 000 Park V 1	
Complete if the organization answered "Yes" (a) Description of liability	to Form 990, Part IV, line	(b) Book value	
<u> </u>		(b) BOOK Value	
(1) Federal income taxes		· · · · · · · · · · · · · · · · · · ·	
(2)			
(3)			
(5)			
(6)			
(7)			
(8)			
(9)	251		
Total. (Column (b) must equal Form 990, Part X, col (B) line 2. Liability for uncertain tax positions. In Part XIII, provide		o the organization's financial statement to the	
		o the organization's imancial statements that reports the chere if the text of the footnote has been provided in Par	
organization's liability for uncertain tax positions under	1 114 40 (700 140) OHEC	there is the toke of the localists that been provided in Par	السا الله

chedule D (Form 990) 2014 DBA BLACK HILLS BIBLICA		20-589213	4 Page
Part XI Reconciliation of Revenue per Audited Financial Sta	tements With Revenue	e per Return.	
Complete if the organization answered "Yes" to Form 990, Part IV, lin	e 12a.		
Total revenue, gains, and other support per audited financial statements	•	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b		4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Part XII Reconciliation of Expenses per Audited Financial St	•	es per Keturn.	
Complete if the organization answered "Yes" to Form 990, Part IV, lin	e 12a.	— т	
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	11		
a Donated services and use of facilities	2a	<u> —</u> І	
b Prior year adjustments	2b	 	
c Other losses	2c		
d Other (Describe in Part XIII)	2d [
e Add lines 2a through 2d		2e	
Subtract line 2e from line 1		3	
Amounts included on Form 990, Part IX, line 25, but not on line 1	الما		
 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) 	4a		
c Add lines 4a and 4b	4b	 	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	0 1	4c	
Part XIII Supplemental Information.	3)	<u> </u>	
			

SCHEDULE E

Department of the Treasury

(Form 990 or 990-EZ)

Schools

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

OMB No 1545-0047

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Name of the organization

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

JOHN WITHERSPOON COLLEGE

Emplo

Employer identification number

DBA BLACK HILLS BIBLICAL INSTITUTE

20-5892134

Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogies, and other written communications with the public dealing with student admissions, programs, and scholarships? It is the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if if has no solicitation programs, and scholarships? If you need more space, use Part II WHILE THE NON-DISCRIMINATION POLICY INFORMATION IS NOT IN OUR MEDIA OR ADVERTISING, IT IS AVAILABLE IN THE ORGANIZATION'S POLICY MANUAL, THE STUDENT HANDBOOK AND THE FACULTY HANDBOOK. 4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory base? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all inaterial used by the organization or in its behalf to solicit contributions? if you answered "No" to any of the above, please explain. If you need more space, use Part II 5 Does the organization discriminate by race in any way with respect to: a Students' rights or privileges? 5 A X Selections policies? 5 Does the organization discriminate by race in any way with respect to: a Students' rights or privileges? 5 A X Selections policies? 5 Does the organization discriminate by rice in any way with respect to: a Students' rights or privileges? 5 A X Selections policies? 5 B X X Selections policies? 6 B X X Selections policies? 6 B X X Selections policies? 6 B X X Selections pol	Par	ti			
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ.

Schedule E (Form 990 or 990-EZ) (2014)

JOHN WITHERSPOON COLLEGE Schedule E (Form 990 or 990-EZ) (2014) DBA BLACK HILLS BIBLICAL INSTITUTE 20-5892134 Page 2 Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information.

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047 2014

> ▶ Information about Schedule I (Form 990) and its instructions is at www.irs gov/form990. ► Attach to Form 990

DBA BLACK HILLS BIBLICAL INSTITUTE

JOHN WITHERSPOON COLLEGE

Open to Public Inspection **Employer identification number**

20-5892134

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(h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Part Part

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

Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2014)

Page 2

20-5892134

(Form 990) (2014) DBA BLACK HILLS BIBLICAL INSTITUTE

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2014)

Part III

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) STUDENTS ARE AWARDED SCHOLARSHIPS BASED ON ELIGIBILITY CRITERIA SET FORTH Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (d) Amount of non-cash assistance 0 16,265 (c) Amount of cash grant (b) Number of recipients 16 (a) Type of grant or assistance THE ORGANIZATION. PART I, LINE 2: SCHOLARSHIPS Β¥

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No 1545-0047 Open to Public

Inspection

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

JOHN WITHERSPOON COLLEGE

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Employer identification number 20-5892134

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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
BI-VOCATIONAL CHRISTIAN LEADERS THROUGH FORMAL COURSES IN A CLASSROOM
SETTING.
FORM 990, PART VI, SECTION B, LINE 11:
BOARD MEMBERS ARE GIVEN A COPY OF THIS FORM 990. EACH MEMBER REVIEWS THE
FORM AND HAS THE OPPORTUNITY TO RAISE QUESTIONS BEFORE THE FORM IS FILED.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY
AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.