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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

2016 Open to Public Inspection

07/01/16 , and ending For the 2016 calendar year, or tax year beginning 06/30/17 C Name of organization D Employer identification number Check if applicable WESLEY BIBLICAL SEMINARY Address change Doing business as 64-0579585 Name change Number and street (or P O box if mail is not delivered to street address) Room/suite P. O. BOX 9938 601-366-8880 Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated **JACKSON** MS 39286 G Gross receipts \$ 1,175,418 Amended return Name and address of principal officer H(a) Is this a group return for subordinates? Application pending DR. JOHN NEIHOF P.O. BOX 9938 H(b) Are all subordinates included? **JACKSON** 39286 If "No," attach a list (see instructions **X** 501(c)(3) (insert no ) Tax-exempt status 4947(a)(1) or 527 WWW.WBS.EDU Website H(c) Group exemption number Year of formation 1975 Form of organization X Corporation Trust Other > MS Association M State of legal domicile Part I Summary 1 Briefly describe the organization's mission or most significant activities GRADUATE LEVEL INSTRUCTION IN THEOLOGY FOR STUDENTS. REVENUE NOV ACTIVITIES & Governance 2 Check this box ▶ | if the organization discontinued its operations or disposed of more than 25% of its net assets 16 3 Number of voting members of the governing body (Part VI, line 1a) 16 4 Number of independent voting members of the governing body (Part VI, line 1b) 19 5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year **Current Year** 465,546 595,615 8 Contributions and grants (Part VIII, line 1h) 519,312 469,898 9 Program service revenue (Part VIII, line 2g) 447,272 28,838 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 68,431 43,809 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,500,561 ,138,160 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) 116,330 114,900 14 Benefits palotto or formembers (Parl IX, column (A), line 4)
15 Salaries, other compensation employee benefits (Part IX, column (A), lines 5–10)
16a Professional Undraising fees (Part IX, column (A), line 11e) 691,837 724.810 63,254 27 在1000年 1000年 10 b Total fundraising-expenses (Rart IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 484,559 519,732 1,292,726 1,359,442 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 207,835 -221,282 19 Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year End of Year 2,435,458 2,232,400 20 Total assets (Part X, line 16) 216,692 177,116 21 Total liabilities (Part X, line 26) 2,218,766 22 Net assets or fund balances Subtract line 21 from line 20 2,055,284 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of office JOHN NEIHOF PRESIDENT Here DR. Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature Paid רו self-employed SCOTT A. HODGES SCOTT A. HODGES P00641691 20-5630688 Preparer BROWN æ RUSS CO., PLLC Firm's EIN Firm s name Use Only 1501 LAKELAND DRIVE, SUITE 300 601-354-4926 JACKSON, MS 39216-4841 Firm's address May the IRS discuss this return with the preparer shown above? (see instructions) X Yes Form 990 (2016) For Paperwork Reduction Act Notice, see the separate instructions.

# Part IV Checklist of Required Schedules

	•		1162	טויון
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	+
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	<u>                                     </u>		1
	candidates for public office? If "Yes," complete Schedule C, Part I	3	1	x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		<del> </del>	† <del></del>
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	<u> </u>	<u> </u>	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C.		1	
	Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			1
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If		İ	1
	"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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			1
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			{
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
0	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	X	
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1		100
	VII, VIII, IX, or X as applicable	は機		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			1
	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		X
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		_X_
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	]	1	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1 1		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		[	
	Schedule D, Parts XI and XII	12a	X	
þ	Was the organization included in consolidated, independent audited financial statements for the tax year? If		1	
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
4a	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,	1	ł	
	fundraising, business, investment, and program service activities outside the United States, or aggregate		į	37
_	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	4.5	)	v
c	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	40		v
7	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
•	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4.7	- 1	v
8	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		<u> </u>
5	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	40		x
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18	+	
-	If "Yes," complete Schedule G, Part III	19		x
—	" 150, SSTAPISTO OCHOURS O, FUTE III		990	
		FOIR		(2010)

# Part IV Checklist of Required Schedules (continued)

	•		Yes	N
20a	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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			П
	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		1	
	organization's current and former officers, directors, trustees, key employees, and highest compensated		j	
	employees? If "Yes," complete Schedule J	23	<u> L</u>	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	ļ	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		ì	Ì
	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	1	]	
	disqualified persons? If "Yes," complete Schedule L, Part II	26	}	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	Ì		
	entity or family member 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,	200		9
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	25	77.25	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	Ì	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32	{	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34	- 1	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ļ	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	1	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		-+	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	] ]	- 1	
	Part VI	37	1	x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	-		<del></del> -
-	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
	——————————————————————————————————————			

	930 (2016) WEDDEL PERSON DESCRIPTION OF CO. 75005			raye
Pa	art 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		1.00	1
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0		Ι.	100
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			1.5
	reportable gaming (gambling) winnings to prize winners?	1c	X	1 -
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		د. ،	122
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 19			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u>L</u> _	X
þ	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	1	X
b	If "Yes," enter the name of the foreign country			3,24
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	2 5		130
_	(FBAR)			' -
5a	, , , , , , , , , , , , , , , , , , ,	5a	├	X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	₩-	<b>↑</b> ^
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>	<del> </del>	╂
6a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	60	l	x
h	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1-2
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь	ĺ	
7	Organizations that may receive deductible contributions under section 170(c).	35.7	y 77 ;	100
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	Sel.	1	17
u	and services provided to the payor?	7a	عادنتك	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<del>                                     </del>	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			1
-	required to file Form 8282?	7c		x
ď	If "Yes," indicate the number of Forms 8282 filed during the year		200	
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		X
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	78.00		2.2
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	A 1,340.	الله الله الله المثلاث الله	* 1
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		ļ
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		1.15
10	Section 501(c)(7) organizations. Enter	***		
а	Initiation fees and capital contributions included on Part VIII, line 12		1 30 0	
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>**</b>	***	40
11	Section 501(c)(12) organizations. Enter	4		3
а	Gross income from members or shareholders		沙特	4.1
b	Gross income from other sources (Do not net amounts due or paid to other sources	3 m 6 2		16.94
40-	against amounts due or received from them )			<u></u>
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	s all in	4514 1
b 12	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 501(a)(20) qualified page refit health insurance issuers		THE STATE OF THE S	· And
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a	-te -ji	- * .
а	Note. See the instructions for additional information the organization must report on Schedule O	134	, .	<u> </u>
b	Enter the amount of reserves the organization is required to maintain by the states in which	<u>ا</u> ا	2.5	ا مها س
	the organization is licensed to issue qualified health plans		أستحوار	
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If I You I has a filed a Fare 700 to specific those payments? If INO I provide an evaluation in Schodula O	1 441		_ <u></u>

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	Sched	lule O	See ins	struc	tions	-
	Check if Schedule O contains a response or note to any line in this Part VI						X
Sec	tion A. Governing Body and Management					· · · · ·	<del></del>
		1 . 1			4.4	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	16	<del>'</del>	4	74 THAT (	等
	If there are material differences in voting rights among members of the governing body, or		l	ł	4		1
	if the governing body delegated broad authority to an executive committee or similar			ł		4	
	committee, explain in Schedule O	١	16	. {	40		C. *
b	Enter the number of voting members included in line 1a, above, who are independent	1b	16	(,			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			-	. The state of	18.17	
_	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 direct				_		37
	supervision of officers, directors, or trustees, or key employees to a management company or other person?			-	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			-	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			<u> </u>	5		X
6	Did the organization have members or stockholders?			-	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			1	_		v
	one or more members of the governing body?			<u> </u>	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,						x
•	stockholders, or persons other than the governing body?	. 41			7b	mi Chine	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year b	y the fo	illowing	1			K
a	The governing body?		1		8a	X	
р	Each committee with authority to act on behalf of the governing body?			<u> </u>	8b	^	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			1		- 1	v
500	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Interi	201 170		· Codo	9		X
<u> </u>	tion b. Policies (This Section b requests information about policies not required by the interior	iai ixe	5V6110	ie Code	~_	Yes	N.
10a	Did the organization have local chapters, branches, or affiliates?			[7	I0a	res	No X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			<del> </del> '	Ua	$\neg \dashv$	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?				ОЬ	i	
11a		form?			1a		x
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ioiiii.		F			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13				2a	Х	4
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflict	102		2b	x	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	COMME	3.	<u> </u>	20		
·	describe in Schedule O how this was done			1	2c	$\mathbf{x}$	
13	Did the organization have a written whistleblower policy?				13		x
14	Did the organization have a written document retention and destruction policy?			_	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			T	195	KATE I	A Y
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						Ex.
а	The organization's CEO, Executive Director, or top management official			1	5a	X	-12
b	Other officers or key employees of the organization				5b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			7			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				3	<b>发表</b>	
	with a taxable entity during the year?			<u></u>	6a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			1.3	1	1	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					<b>177</b>	1
	organization's exempt status with respect to such arrangements?			1	6b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶ MS						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)	(3)s on	ly)				
	available for public inspection. Indicate how you made these available. Check all that apply						
	Own website Another's website Don request Other (explain in Schedule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest p	olicy, a	nd				
	financial statements available to the public during the tax year						
20	State the name, address, and telephone number of the person who possesses the organization's books and records	<b>&gt;</b>					
R	DB POCAI 787 E. NORTHSIDE DR, SUITE B						
JZ	ACKSON MS 3920	6		601-3	366	<u>-88</u>	80

DAA

Form 990 (2016)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated 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 nor any related organization compensated any current officer, director, or trustee (A) (C) (E) (F) (D) Name and Title Average Position Reportable Reportable Estimated hours per (do not check more than one compensation compensation from amount of box, unless person is both an from related other week officer and a director/trustee) the organizations compensation (list any hours for organization (W-2/1099-MISC) from the related (ey employee (W-2/1099-MISC) organization ghest compensated stitutional ployee organizations vidual trustee and related below dotted organizations line) i trustee (1) DR. JOHN NEIHOF 40.00 0.00 X X 64,353 0 5,508 PRESIDENT (2) JAMES I. HOWARD 1.00 X X 0 0.00 0 CHAIRMAN (3) GARY BRIDEN 1.00 VICE CHAIR X 0 0.00 X 0 0 (4) TOMMY MCKNIGHT 1.00 X X 0.00 0 0 0 TREASURER (5) SCOTT KING 1.00 X X 0 SECRETARY 0.00 0 0 (6) J. DAVID CHANDLER 1.00 0.00 X 0 0 0 BD OF TRUSTEES (7) SONNY STEEL 1.00 0.00 X 0 BD OF TRUSTEES 0 (8) GLENN MARTIN 1.00 0 BD OF TRUSTEES 0.00 X 0 0 (9) BUDDY SMITH 1.00 0.00 X 0 0 BD OF TRUSTEES (10) MELVIN PACE 1.00 0.00 X 0 0 BD OF TRUSTEES (11) PHILIP SPEAS 1.00 X 0 0 BD OF TRUSTEES 0.00

Part VII Section A. O	fficers, Directors, Tru	stee	s, Ke	y E	mple	yees	s, ar	nd Highest Compensated	Employees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours per	( (	o not		sition more	than o	ne	Reportable compensation	Reportable compensation from	Estimated amount of
•	week	bo	x, uni	ess pe	erson i	s both	an	from	related	other
•	(list any hours for	1				r/truste	·-	the organization	organizations (W-2/1099-MISC)	compensation from the
	related	의 교 의	nstit	Officer	eg		Former	(W-2/1099-MISC)	(** =**=*******************************	organization
	organizations below dotted	ecto	탈	ª	em p	oyee Oyee	् ष्			and related organizations
	line)	individual trustee or director	institutional trust	<b> </b>	employee	) mg	1	}		
		l ee	ustee	l	"	Highest compensated employee				
(12) DAVID KUDO		┼		-	<del> </del>	a	<b> </b>	<del> </del>		
(12) DAVID RODO	1.00									
BD OF TRUSTEES	0.00	x			}		1	o	o	
(13) REGINA BOY			<u> </u>	T	-			<u> </u>	<u> </u>	
	1.00						1			
BD OF TRUSTEES	0.00	X	<u> </u>	<u> </u>				0	0	(
(14) MORGAN ST		1		}	}	\ \ \ \ \	1			-
	1.00									
BD OF TRUSTEES	0.00	X			├—	ļ		0	0	
(15) TIM BARBEI						1				
DD OF MOHEMPRE	1.00	x		1				1		C
BD OF TRUSTEES (16) SUSIE BRAN		^	├─	<del>                                     </del>			-	0	0	
(10) DODIE DIGH	1.00				1					
BD OF TRUSTEES	0.00	x						0	o	C
(17) JAMES RENI										
	1.00			l						
BD OF TRUSTEES	0.00	X			_			0	0	
				l						
			}					1		
		-	├	┢	├	├		<del></del>		
				1	l					
						İ				
1b Sub-total		1	L	٠	<del>!</del> —	ı	<u> </u>	64,353		5,508
c Total from continuatio	on sheets to Part VII. S	ectio	on A				<b>•</b>			
d Total (add lines 1b and	d 1c)						<b>&gt;</b>	64,353		5,508
			to th	ose	liste	d abo	ve)	who received more than \$1	00,000 of	
reportable compensation	n from the organization	<u> </u>	0_							Yes No
								ee, or highest compensated		AND WASHINGTON
employee on line 1a? If	"Yes," complete Schedu	ule J	for s	uch	ındıv	idual				3 X
4 For any individual listed	on line 1a, is the sum o	t rep	ortat 8150	ole co	ompe	ensat 'Yes'	ion a " cor	and other compensation from Implete Schedule J for such	n the	<b>范雅鉴</b>
individual	rongamzations greater t		,,,,,	,000	.,,			inplote compatition of accident		4 X
								unrelated organization or inc	lividual	227 146
for services rendered to Section B. Independent Con		es," c	omp	lete .	Sche	dule	J to	r such person		5 X
		nsate	ed in	dene	nder	at cor	ntrac	ctors that received more that	s \$100,000 of	· · · · · · · · · · · · · · · · · · ·
compensation from the	organization Report co	mper	sati	on fo	r the	cale	nda	r year ending with or within t	he organization's tax year	
	(A) Name and business address						_	Descrip	(B) lion of services	(C) Compensation
							-			
							ļ			
		-					-	· · · · · · · · · · · · · · · · · · ·		
<del> </del>										
2 Total number of indeper								listed above) who	•	Sec. 3.18
received more than \$10	u,uuu or compensation	irom	เกย	orga	ıızat	ion 🏓			0	Form 990 (2015)

		Check	if Schedule (	O con	tains a i	esponse o	or note to	any line	in this Part VIII		
		•						(A) revenue	(B) Related or exempt function- revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts st	1a	Federated cam	npaigns	1a							195
Contributions, Gifts, Grants and Other Similar Amounts		Membership de	_	1b					Ì	}	1
Q,E		Fundraising ev		1c							
ifts ir A		Related organi		1d						1	
ပခ္မ		Government grants		1e							
Siz		-	•	"						)	28.5 dA
e ţi	•	All other contribution and similar amounts		4.		595,615					
뜮				1f		13,200			}	1	
n o	9		ns included in lines 1a-	11 ;	\$	13,200		EOE 61E		}	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	n	Total. Add line	s 1a-1f					5 <b>95</b> ,615		<del> </del>	1 49 Gen See
ã						Busn Code		460 474	460 474		
eve	2a		AND FEES			ļ		460,474			
e ∞	ь	STUDENT	HOUSING/AUX	LIAR	7			9,424	9,424	ļ	
ξ	С	c			ļ					<del></del>	
Program Service Revenue	d										
ra E	е									ļ	_
ğ,	f	All other progra	am service rever	nue		L				<u> </u>	
<u>a</u>	g	Total. Add line	s 2a-2f				<u> </u>	<u>469,898</u>		<del>,</del>	ア でんごう かん
	3	Investment inc	ome (including d	lividend	ds, interes	t,					
		and other simil	lar amounts)			<b>&gt;</b>		24,205			24,205
	4	Income from in	nvestment of tax-	exemp	t bond pro	ceeds >					
	5	Royalties									
			(ı) Real		(II) F	Personal			\$ 10 m	사람 사용 가입다.	
	6a	Gross rents	74	,400			1	•	1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	b	Less rental exps	30	,591			-			1 - Dr. (1)	
	С	Rental inc or (loss)	43	,809				, .			
	d	Net rental inco				<b></b>		43,809			43,809
	7a	Gross amount from	(i) Secunties		(11)	Other		<del></del>			11 11 11 11 11 11 11 11 11 11 11 11 11
		sales of assets other than inventory				11,300	- 1/4			AND THE PERSON NAMED IN	
	h	Less cost or other					12.4	District Comment	·····································		
		basis & sales exps				6,667					
	_	Gain or (loss)	<del></del>			4,633			,-	-	
					<del></del>	4,055	-	4,633		-3	4,633
	d	Net gain or (los		1			7	4,033	+-, 45	i, q. ⟨⟨/	3. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.
Ę	oa		om fundraising ever	เเร						] ' "	
en/		(not including \$		ĺ						1	
Ŗ			reported on line 1c)							, ,	
Other Revenu		See Part IV, line		a		<del></del> _					
들	b	Less direct ex		b				,			
_	C		(loss) from fund	- 1	events				<del> </del>	<del> </del>	
	9a		om gaming activitie	S							
	1	See Part IV, line		а			ļ				
		Less direct ex		b	L						ANT. NOT
	С	Net income or	(loss) from game	ng acti	vities			<del> </del>			<del></del>
	10a	Gross sales of	finventory, less						,		1854
		returns and all	owances	а		· · · · · · · · · · · · · · · · · · ·			· ·	,	
	b	Less cost of g	joods sold	b			]				
	С	Net income or	(loss) from sales	of inv	entory	<u> </u>					
			cellaneous Revenue			Busn. Code	Į				
	11a										
	b										
	С						-				
	d	All other reven	iue					****			
	e	Total, Add line				<b></b>					
	12		e. See instruction	ıs		•	1,	138,160	469,898		0 72,647

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) (C) Management and Do not include amounts reported on lines 6b. (D) Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 114,900 114,900 individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 69,861 69,861 trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 163,302 567,210 387,506 16,402 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 66,368 40,457 24,199 1,712 9 Other employee benefits 7,718 21,371 13,099 554 Payroll taxes 10 11 Fees for services (non-employees) Management а b Legal 26,500 26,500 С Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column 97,648 28,100 69,548 (A) amount, list line 11g expenses on Schedule O) 5,390 4,426 9,816 Advertising and promotion 12 33,328 7,171 12,867 13,290 Office expenses 13 27,645 27,645 Information technology 14 Royalties 15 43,502 104,905 750 149,157 Occupancy 16 34,540 14,870 5,361 14,309 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 2,000 8,688 6,688 Conferences, conventions, and meetings 19 20 Interest 21 Payments to affiliates 12,735 44,572 28,653 3,184 22 Depreciation, depletion, and amortization 23,151 398 17,778 23 Insurance Other expenses Itemize expenses not covered 24 above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 23,513 23,513 LIBRARY MATERIALS 14,345 14,345 STAFF DEVELOPMENT b 7,025 7,025 BANK FEES C 6,258 6,258 STUDENT ACTIVITIES 5,604 7,942 13,546 e All other expenses 1,359,442 680,600 615,588 63,254 Total functional expenses. Add lines 1 through 24e 25 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 ▶ following SOP 98-2 (ASC 958-720)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 108,743 Cash-non-interest bearing 30,440 2 Savings and temporary cash investments 531,843 517,780 2 3 Pledges and grants receivable, net 57,800 4 Accounts receivable, net 52. 445 4 23.555 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 189,728 Prepaid expenses and deferred charges 9 100,776 10a Land, buildings, and equipment cost or 1,965,088 other basis. Complete Part VI of Schedule D. 10a 1,463,961 551,777 501,127 10b b Less accumulated depreciation 10c 11 Investments—publicly traded securities 11 12 Investments-other securities See Part IV, line 11 12 13 Investments-program-related See Part IV, line 11 13 14 Intangible assets 14 922 922 15 Other assets See Part IV, line 11 15 2,435,458 2,232,400 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 90,814 59,758 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 43,682 38,950 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors. Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 82,196 of Schedule D 25 78,408 177,116 26 216,692 26 Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. -1,130,360 -1,351,466 Unrestricted net assets 278,690 28 Temporarily restricted net assets 28 316,801 3,070,436 3,089,949 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 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 2,218,766 2,055,284 33 33 Total net assets or fund balances 2,435,458 2,232,400 Total liabilities and net assets/fund balances

Form 990 (2016)

orm	990 (2016) WESLEY BIBLICAL SEMINARY	64-0579585			Pa	ige 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Pa	art XI	····			$\Box\Box$
1	Total revenue (must equal Part VIII, column (A), line 12)		1		.38,	
2	Total expenses (must equal Part IX, column (A), line 25)		2	1,3	59,	442
3	Revenue less expenses Subtract line 2 from line 1		3	-2	21,	282
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4	2,2	18,	766
5	Net unrealized gains (losses) on investments		5			
6	Donated services and use of facilities		6		57,	800
7	Investment expenses		7			
8	Prior period adjustments		8			
9	Other changes in net assets or fund balances (explain in Schedule O)		9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X	(, line				
	33, column (B))		10	2,0	55,	284
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Pa	art XII				
					Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual	Other			1	it.
	If the organization changed its method of accounting from a prior year or checked "Other,"	" explain in				
	Schedule O			~ 💥	West.	The X
2a	Were the organization's financial statements compiled or reviewed by an independent acc	countant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were	compiled or		0.00	1	123
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separat	e basis		1		
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		<b>34</b>	1	
	separate basis, consolidated basis, or both				23	
	X Separate basis Consolidated basis Both consolidated and separat	e basis		3.2		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsible	ility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an indepen	ident accountant?		_2c	X	L .
	If the organization changed either its oversight process or selection process during the tax			78.5	数据	
	Schedule O				<b>100</b>	
3a	As a result of a federal award, was the organization required to undergo an audit or audits	s as set forth in				
	the Single Audit Act and OMB Circular A-133?			_3a		$\mathbf{x}_{-}$
b	If "Yes," did the organization undergo the required audit or audits? If the organization did it	not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to unde			3b		L
				For	m 990	(2016)

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

# **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number 64-0579585

			WESLEY BIBLI	CAL_SEMINARY		_	64-057	9585
P	art I	Reas	on for Public Charity :	Status (All organizations i	must co	mplete	this part ) See instruction	is
Γhe	orgar	nization is not a	a private foundation because	it is (For lines 1 through 12, che	ck only or	ne box )		
1		A church, con	evention of churches, or associate	ciation of churches described in	section 1	70(b)(1)(	A)(i).	
2	X	A school desc	cribed in section 170(b)(1)(A	)(ii). (Attach Schedule E (Form 9	990 or 990	)-EZ) )		
3				e organization described in secti			).	
4	-	A medical res	earch organization operated	in conjunction with a hospital de	scribed in	section	170(b)(1)(A)(iii). Enter the hosp	oital's name,
		city, and state	)					
5	-	An organization	on operated for the benefit of	a college or university owned or	operated	by a gove	ernmental unit described in	
		section 170(	b)(1)(A)(iv). (Complete Part I	1)				
6		A federal, sta	te, or local government or gov	vernmental unit described in <b>sec</b>	tion 170(	b)(1)(A)(	v).	
7		-		ubstantial part of its support from	a govern	mental ur	nit or from the general public	
			section 170(b)(1)(A)(vi). (Co					
8	} ≽ ≠===			'0(b)(1)(A)(vi). (Complete Part II				
9	L J			ribed in section 170(b)(1)(A)(ix)				
		-	or a non-land grant college of	agriculture (see instructions) Er	iter the na	ime, city,	and state of the college or	
10		university	on that normally recover (1)	more than 22 1/20/ of its suppor	t from oo	atribuiti o oc	momborable food and gross	
10	(i	-	•	more than 33 1/3% of its suppor it functions—subject to certain e			·	
		•	•	unrelated business taxable inco	•			
		acquired by th	ne organization after June 30,	1975 See section 509(a)(2). (	Complete	Part III)	•	
11		An organization	on organized and operated ex	clusively to test for public safety	See sec	tion 509(	a)(4).	
12		An organization	on organized and operated ex	clusively for the benefit of, to pe	rform the	functions	of, or to carry out the purposes	
			, , , ,	tions described in section 509(a				
			_	it describes the type of supporting				9
	а			ated, supervised, or controlled b				
			• • • • • • • • • • • • • • • • • • • •	er to regularly appoint or elect a i mplete Part IV, Sections A and		the aired	ctors or trustees of the	
	b		• •	ervised or controlled in connection		supporte	d organization(s), by baying	
				ng organization vested in the sai				i
			ion(s) You must complete I					
	С			ipporting organization operated i				
		its suppoi	rted organization(s) (see instr	uctions) You must complete P	art IV, Se	ctions A	, D, and E.	
	d	<u> </u>	• •	A supporting organization opera				)
			, -	organization generally must satis	•			
	_	_ `		ust complete Part IV, Sections				
	е			ived a written determination from functionally integrated supporting			Type I, Type II, Type III	
	f		nber of supported organization	• • • • • •				
	g	Provide the fo	ollowing information about the	supported organization(s)				
	) Nam	e of supported	(ii) EiN	(Iii) Type of organization	(iv) Is the o	organization	(v) Amount of monetary	(vi) Amount of
	org	ganization		(described on lines 110	1 .	ır governing	support (see	other support (see
				above (see instructions))		ment?	instructions)	instructions)
<u> </u>					Yes	No		
(A)								
/B)		·			ļ			
(B)								
/C)					<del> </del>			
(C)								
(D)								<del></del>
(0)								
(E)					<b> </b>			
\ <del>-</del> /								!
		<del> </del>					-	<del></del>
			<u> </u>		[	l		

Sched	dule A (Form 990 or 990-EZ) 2016	SLEY BIBLI	CAL SEMIN	IARY	64	4-0579585	Page 2
	irt II Support Schedule for C						
	(Complete only if you che						under under
	Part III If the organization	n fails to qualify	under the tests	s listed below, p	lease comple	te Part III)	<del></del>
	tion A. Public Support	· · · · · · · · · · · · · · · · · · ·					
Caler	idar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly				÷	•	,
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)					: 4	
6	Public support. Subtract line 5 from line 4		<u> </u>	- 4			
	tion B. Total Support	<del></del>		· · · · · · · · · · · · · · · · · · ·			
Caler	idar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4						<del></del>
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10	The second second	3 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	はいいませるのでは	の場合に大学をかった	神でい 大学	
12	Gross receipts from related activities, etc	•				12	
13	First five years. If the Form 990 is for the	organization's first,	second, third, four	th, or fifth tax year a	s a section 501(c)	(3)	
	organization, check this box and stop her						<u> </u>
<u>Sec</u>	tion C. Computation of Public S						<del> </del>
14	Public support percentage for 2016 (line 6	, column (f) divided t	by line 11, column	<b>(f)</b> )		14	
15	Public support percentage from 2015 Sch					15	%_
16a	33 1/3% support test—2016. If the organ				1/3% or more, che	ck this	, —
	box and <b>stop here</b> . The organization qual						▶ [_]
b	33 1/3% support test-2015. If the organ				s 33 1/3% or more	e, check	
	this box and <b>stop here</b> . The organization						▶ [_]
17a	10%-facts-and-circumstances test-20	116. If the organization	on did not check a	box on line 13, 16a,	or 16b, and line 1	4 is	

organization b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2016

Part III	Support	Schedule	for Orga	anizations	Described	in:	Section	509(a	)(2)

(Complete only if you checked the box on line 10 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.)

Sec	tion A. Public Support							
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016		(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	ļ				ļ		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b			* * * * * * * * * * * * * * * * * * * *	8. 2.78.72.2	, and , , , , ,	<b>3</b>	
8	Public support. (Subtract line 7c from			83.45 4	**		214	
500	tion B. Total Support	1 10 205	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4. 4.	<u>लाहर्ष ५,८८८ व्यक्ति</u>	1	TRY	<del></del>
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	- T	(f) Total
9	Amounts from line 6	(4) 2012	(5) 2010	(0) 2011	(4) 2010	(0,10.0		(-) / (-)
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b							
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					ļ		· · · · · · · · · · · · · · · · · · ·
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							· · · · · · · · · · · · · · · · · · ·
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is for the	organization's first	, second, third, four	th, or fifth tax year a	as a section 501(c)	(3)		
	organization, check this box and stop here							<u> </u>
Sec	tion C. Computation of Public Su	ipport Percen	tage					······
15	Public support percentage for 2016 (line 8,	column (f) divided	by line 13, column	(f))		<del></del>	15	%
16_	Public support percentage from 2015 Sche				· <del></del>		16	<u>%</u>
Sec	tion D. Computation of Investme					<del>′</del>		
17	Investment income percentage for 2016 (In			column (f))		F-	17	<u>%</u>
18	Investment income percentage from 2015				.,		18	%
19a	33 1/3% support tests—2016. If the orga							
_	17 is not more than 33 1/3%, check this bo	x and stop here.	The organization qu	lailfies as a publicly	supported organiz	auon 22 1/20/ 224		
b	33 1/3% support tests—2015. If the orga line 18 is not more than 33 1/3%, check thi	nization did not che	eck a dox on line 14	roriine 19a, and iin	le to is more man.	anization		▶ □
20	Private foundation. If the organization did							•
20	- i i i i atto i contractioni, il tile digalitzation did	Unique a bux u	···, ····u, ··· · ·	,				· L

#### **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)

#### Section A. All Supporting Organizations

- 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
- 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
- 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
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- 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
- 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)
- 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)
- 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?
- С Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 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 or 990-EZ)
- 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.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) 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.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- 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
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	10b	]	
(F	orm 99	0 or 990-	EZ) 2016

Par	TIV Supporting Organizations (continued)			
	•		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			1
	below, the governing body of a supported organization?	11a	↓	<del> </del>
b	A family member of a person described in (a) above?	11b	ļ	——
C		11c	<u> </u>	
Sect	ion B. Type I Supporting Organizations	<del></del>		<del></del>
_			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	,	,	#** N.A
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		70.54	
	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,		1	14
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			-
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	<del></del>	+
2	Did the organization operate for the benefit of any supported organization other than the supported	,	-	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		,	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			M
Sacti	supervised, or controlled the supporting organization ion C. Type II Supporting Organizations	2	<u> </u>	ــــــــــــــــــــــــــــــــــــــ
3601	on C. Type if Supporting Organizations			T
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	7.0	Yes	No
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	15 *		1
	or management of the supporting organization was vested in the same persons that controlled or managed		學主意	
	the supported organization(s)			
Secti	ion D. All Type III Supporting Organizations	l <del>'</del>	t	<u> </u>
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	,, ř.	24.00	2000
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the		100	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		- Andreas
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	183	170	THE CO
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		<b>CHAP</b>	4
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	1,00	W. Tarrey	100000
	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	ا السار ا		100
	supported organizations played in this regard	3		
Secti	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	s)		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instru	ictions)		
		r		r
2 /	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			3
	those supported organizations and explain how these activities directly furthered their exempt purposes,	-	Se 1665	
	how the organization was responsive to those supported organizations, and how the organization determined			2
	that these activities constituted substantially all of its activities	2a	37 1 13	134
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	:£	办	明(水)
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			200
	reasons for the organization's position that its supported organization(s) would have engaged in these		.فـــــ	经立
	activities but for the organization's involvement	2b		*. •
3	Parent of Supported Organizations Answer (a) and (b) below.		٠,	x .
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			'
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	_ !	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	<u>nizat</u>	ions	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov	20, 197	70 (explain in Part VI) See	_
instructions. All other Type III non-functionally integrated supporting organizations must of	omple	te Sections A through E	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
		(7.9) Hor real	(optional)
1 Net short-term capital gain	1_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		
Section 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)	İ		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other	1		いいないないないできます。
factors (explain in detail in Part VI)	<u> </u>	***	
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		. <u></u>
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		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1_	多屬的為於公司為於法	
2 Enter 85% of line 1	2	2000年1980年1980年1980年1980年1980年1980年1980年1	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	<b>公司的保护的</b>	
4 Enter greater of line 2 or line 3	4	人名斯特斯· <b>斯</b> 斯尔·	
5 Income tax imposed in prior year	5	despitation of the same of	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		15 以降高於今本於本	
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally integrated Type	oe III s	upporting organization (see	·

Schedule A (Form 990 or 990-EZ) 2016

instructions)

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Par	<del></del>	Supporting Organizati	ons (continued)	Page 7
Secti	on D - Distributions		100/////	Current Year
1	Amounts paid to supported organizations to accomplish exempt purpose	es		
2	Amounts paid to perform activity that directly furthers exempt purposes			
	organizations, in excess of income from activity	• •		
3	Administrative expenses paid to accomplish exempt purposes of suppor	ted organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (pnor IRS approval required)	<u></u>		
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 organization	on is responsive		
	(provide details in Part VI) See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1_	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required-explain in Part VI) See			
	instructions			property of the start
3	Excess distributions carryover, if any, to 2016.	<del> </del> ;	, ,	The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon
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	Total of lines 3a through e			The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
	Applied to underdistributions of prior years			V V V V V V V V V V V V V V V V V V V
<u>n</u>	Applied to 2016 distributable amount		, in ,	. In 19 19 Wer Table . or .
	Carryover from 2011 not applied (see instructions)			2 4 - C44 - 1
4	Remainder Subtract lines 3g, 3h, and 3i from 3f  Distributions for 2016 from			1. 1982 A. S. S. S. S. S. S. S. S. S. S. S. S. S.
4		· .		
	Section D, line 7 \$	<del></del>		· · · · · · · · · · · · · · · · · · ·
	Applied to underdistributions of prior years		· · · · · · · · · · · · · · · · · · ·	* ***** ,
	Applied to 2016 distributable amount			and the confidence of the second
	Remainder Subtract lines 4a and 4b from 4		<del></del>	7 7 3 3 3 3 3 4 3 4 4 4 4 4 4 4 4 4 4 4
5	Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2. For result	•		
	greater than zero, explain in Part VI. See instructions			1
	Remaining underdistributions for 2016 Subtract lines 3h			· '
6	-			
	and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7		+	<del>4 7.711 1111</del>	14. 150
7	Excess distributions carryover to 2017. Add lines 3j		•	***
8	and 4c Breakdown of line 7	<del>                                     </del>		1 2 2 45 5 Els 54 1
	Distance of the f		· · · · · · · · · · · · · · · · · · ·	
<u>a</u>	Excess from 2013		- · · · ·	
				· · · · · · · · · · · · · · · · · · ·
	Excess from 2014 Excess from 2015			
	Excess from 2016			
<u> </u>	LAGGGG HUITI ZUTU	J		<u> </u>

Schedule A (Form 990 or 990-EZ) 2016 Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8, and Part V, Section E. lines 2, 5, and 6 Also complete this part for any additional information. (See instructions)

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Şervice

## **Supplemental Financial Statements**

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

Attach to Form 990.

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

2016

Open to Public

Name of the organization Employer identification number WESLEY BIBLICAL SEMINARY 64-0579585 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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? Part II Conservation Easements. Complete if the organization answered "Yes" on 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 Total number of conservation easements Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 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 conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on 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 on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Schedule D (Form	990) 2016 WESLEY B Organizations Maintainin	IBLICAL SEM			1-0579585	Page 2
	ganization's acquisition, accessi					is (continuea)
	ms (check all that apply)		oriest any or the renova-	ng that are a sign	mount doc or no	
a 🔲 Public e	xhibition	<b>d</b> [] (	oan or exchange prog	rams		
b Scholarl	y research	e 🗍 (	Other			
c Preserva	ation for future generations					
4 Provide a de	escription of the organization's co	ollections and explain h	ow they further the orga	anızatıon's exemp	t purpose in Part	
XIII						
	ear, did the organization solicit o					
	sold to raise funds rather than to		t of the organization's c	ollection?		Yes No
	scrow and Custodial Ar	_	on Form 000 Dos	4 IV / Ivaa O aa		C
	complete if the organizatio	n answered Yes	on Form 990, Par	t IV, line 9, or	reported an amou	nt on Form
	90, Part X, line 21.					····
	ization an agent, trustee, custodi Form 990, Part X?	an or other intermediar	y for contributions or of	ner assets not		□ Vaa □ Na
	lain the arrangement in Part XIII	and complete the follow	una tabla			Yes No
b ii tes, exp	iam the attangement in Fatt Am	and complete the rollor	wing table		Г	Amount
c Beginning ba	alance				1c	71110411
d Additions du					1d	
	during the year				1e	
f Ending balai	* ·				1f	<del></del>
=	nization include an amount on F	orm 990. Part X. line 2:	L for escrow or custodi	al account liability		Yes No
	lain the arrangement in Part XIII		•	•		
	ndowment Funds.				<del></del>	
	complete if the organization	n answered "Yes"	on Form 990, Par	t IV, line 10.		
		(a) Current year	(b) Pnor year	(c) Two years bac	k (d) Three years ba	ck (e) Four years back
1a Beginning of	f year balance	3,115,864	2,943,650	3,131,	102 2,987,	894 2,899,550
<b>b</b> Contribution	· ·	19,513	145,004		676 12,	
c Net investme	ent earnings, gains, and					
losses	9 7 9 7	54,757	53,022	30,	329 130,	245 78,732
d Grants or so	cholarships	2,000	25,812	164,		
e Other expen	ditures for facilities and					
programs				62,:	364	
f Administrativ	ve expenses					
g End of year	balance	3,188,134	3,115,864	2,943,	650 3,131,	2,987,894
2 Provide the	estimated percentage of the curi	ent year end balance (	line 1g, column (a)) hel	d as		
a Board design	nated or quasi-endowment 🕨	%				
<b>b</b> Permanent of	endowment ► 96.92 %					
c Temporarily	restricted endowment ▶	3.08%				
The percent	ages on lines 2a, 2b, and 2c sho	ould equal 100%				
3a Are there en	idowment funds not in the posse	ssion of the organization	on that are held and adr	ninistered for the		<del></del>
organization	by					Yes No
(i) unrelate	ed organizations					3a(i) X
· •	organizations					3a(ii) X
	ne 3a(ii), are the related organiz	•				3b
	Part XIII the intended uses of the		nent funds			<del></del>
	and, Buildings, and Equ					
	complete if the organization					
	Description of property	(a) Cost or other b	1 ''		(c) Accumulated	(d) Book value
		(investment)	(othe	<u> </u>	depreciation	000 655
<b>1a</b> Land				23,669	-79963-7-13H	223,669
<b>b</b> Buildings				11,305	594,955	216,350
	mprovements	ļ		92,464	45,017	47,447
<b>d</b> Equipment				78,138	264,477	13,661

501,127

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

Schedule D (Form 990) 2016

Part VII	Investments—Other Securities.  Complete if the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the orga	on Form 990 Part IV line	11b See Form 990 P	art X line 12
•	(a) Description of security or category  (including name of security)	(b) Book value	(c) Method of Cost or end-of-ye	of valuation
(1) Financial of	derivatives		<u> </u>	
` '	eld equity interests		<u></u>	
(3) Other	and oquity into obto			
(A)				
(B)				··· · · · · · · · · · · · · · · · · ·
(C)				<del></del>
(D)			<del></del>	
(E)				
(E) (F)				<del></del>
(G)				<del></del>
(U) (H)				<del></del>
	n (b) must equal Form 990, Part X, col. (B) line 12.) ▶			·
Part VIII	Investments—Program Related.		<u> </u>	
rait viii	Complete if the organization answered "Yes" of	on Form 990 Part IV line	110 Soo Form 000 D	art Y line 13
	(a) Description of investment	(b) Book value	(c) Method o	
	(a) Description of investment	(b) book value	Cost or end-of-ye	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
(8)			<del></del>	<del></del>
(9)			 	ed Section is will be designed and the
	n (b) must equal Form 990, Part X, col_(B) line 13)▶		and the second of the second	(2)。 经特别的联系。
Part IX	Other Assets.			
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990, P	
	(a) Description			(b) Book value
(1)				
(2)				<u> </u>
(3)				
(4)				
(5)			<u> </u>	
(7)		·····		
(8)				*
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)		<u> </u>	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" ( line 25	on Form 990, Part IV, line	11e or 11f. See Form	990, Part X,
1	(a) Description of hability	(b) Book value	* 2 m	and the second second
1. Coderal		(2) EGON VAIGO		
	Income taxes ITY OBLIGATIONS	78,408		
<del></del>	III OBDIGATIONS	70,400		
(3)		<del></del>		
(4)				
(5)			· ·	
(6)				
(7)			.`	Control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the contro
(8)				The state of

78,408

Total. (Column (b) must equal Form 990, Part X, col\_(B) line 25 ) ▶

Sched	ule D (Form 990) 2016 WESLEY BIBLICAL SEMINARY	64-057958	5	Page <b>4</b>
Par	t XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue per Ret	urn.	
	Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements		1	1,111,651
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a l	Net unrealized gains (losses) on investments	2a	1 1	
b	Donated services and use of facilities	2b 57,800	] }	
c I	Recoveries of prior year grants	2c		
d (	Other (Describe in Part XIII )	2d	] [	
e /	Add lines 2a through 2d		2e	57,800
3	Subtract line 2e from line 1		_3	1,053,851
4 ,	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a i	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b (	Other (Describe in Part XIII )	4b 84,309	]	
C	Add lines 4a and 4b		4c	84,309
_5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	1,138,160
Par	t XII Reconciliation of Expenses per Audited Financial Staten	nents With Expenses per R	eturn.	
	Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a		
1	Total expenses and losses per audited financial statements		1	1,275,133
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a	] [	
b	Prior year adjustments	2b	2.5	
C	Other losses	2c	]· · · -4	
d	Other (Describe in Part XIII )	2d 30,591	] .	
e	Add lines 2a through 2d		2e	30,591
3	Subtract line 2e from line 1		3	1,244,542
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	-s.	
ь	Other (Describe in Part XIII )	4b 114,900		
C A	Add lines <b>4a</b> and <b>4b</b>		4c	114,900
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	1,359,442
Par	t XIII Supplemental Information.			

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

ENDOWMENT FUNDS ARE INTENDED PRIMARILY TO PROVIDE INCOME FOR USE AS STUDENT FINANCIAL AID, AN ENDOWED FACULTY CHAIR, AND A LECTURE SERIES.

PART XI, LINE 4B - REVENUE AMOUNTS INCLUDED ON RETURN - OTHER

RENTAL PROPERTY EXPENSES

-30,591

SCHOLARSHIPS APPLIED TO TUITION

114,900

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER

RENTAL PROPERTY EXPENSES

30,591

PART XII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER

SCHOLARSHIPS APPLIED TO TUITION

\$ 114,900

#### SCHEDULE E

(Form 990 or 990-EZ)

Schools

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization

Employer identification number WESLEY BIBLICAL SEMINARY 64-0579585

	art I		YES	NO
1	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?	1	x	NO
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	, t ,
3	Has 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 it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space, use Part II	3	X	i i
	PUBLICIZED IN ITS ACADEMIC CATALOG, AT LEAST ANNUALLY IN A NEWSPAPER, AND THROUGH VARIOUS OTHER METHODS.		では	
4	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	4,60
a b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II	4d	X	
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		X
b	Admissions policies?	5b		x
С	Employment of faculty or administrative staff?	5c		<u>x</u>
đ	Scholarships or other financial assistance?	5d		X
е	Educational policies?	5e		X
f	Use of facilities?	5f		<u> </u>
g	Athletic programs?	5g		x
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II	5h	4.30	X
	/ / / / / / / / / / / / / / / / / / /		7.00	
			- <u></u>	,
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	
þ	Has the organization's right to such aid ever been revoked or suspended?	6b		<u> </u>
	If you answered "Yes" on either line 6a or line 6b, explain on Part II		_	,
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	-	-	1

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information (see instructions)

SCH E - FINANCIAL AID OR GOVERNMENT ASSISTANCE EXPLANATION
THE SEMINARY PARTICIPATES IN THE U.S. DEPARTMENT OF EDUCATION'S
STAFFORD STUDENT LOAN PROGRAM.

**SCHEDULE 1** (Form 990)

# Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Opén to Public 2016

OMB No 1545-0047

2 Inspection (h) Purpose of grant Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form Employer identification number . or assistance X Yes 64-0579585 (g) Description of noncash assistance 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. (e) Amount of noncash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (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 WESLEY BIBLICAL SEMINARY 3 Enter total number of other organizations listed in the line 1 table the selection criteria used to award the grants or assistance? (a) Name and address of organization or government Department of the Treasury Internal Revenue Service Name of the organization Part II Part

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

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Schedule I (Form 990) (2016)

ICAL SEMINARY 64-0579585	e to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
) WESLEY BIBLICAL SEMINARY	nd Other Assistance to Domestic Individuals.
Schedule I (Form 990) (2016)	Part III Grants and

	Part III can be duplicated if additional space is needed	onal space is needed.				
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of noncash assistance
		recipients	cash grant	noncash assistance	FMV, appraisal, other)	
1 STUDI	1 STUDENT FINANCIAL AID	50		114,900	FMV	REDUCED TUITION
2						
en en						
4						
ro.						
ဖ						
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	vide the information rec	quired in Part I, line	2, Part III, column (b)	and any other additional i	nformation

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

STUDENT FINANCIAL AID IS AWARDED TO STUDENTS BASED ON ACADEMIC MERIT,

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

Supplemental Information to Form 990 or 990-EZ

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

2016

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

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

Open to Public Inspection

WESLEY BIBLICAL SEMINARY

Employer identification number 64-0579585

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

AUXILIARY ENTERPRISES CONSIST OF STUDENT HOUSING AND OTHER ESSENTIALLY

SELF-SUPPORTING OPERATIONS THAT EXIST TO PROVIDE SERVICES TO STUDENTS,

FACULTY OR STAFF, AND THAT CHARGE A FEE THAT IS RELATED TO THE COST OF THE SERVICE.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE FORM 990 IS REVIEWED BY MANAGEMENT PRIOR TO SUBMISSION TO THE IRS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

ANNUAL CONFLICT OF INTEREST DISCLOSURE FORMS ARE REVIEWED BY MANAGEMENT AND

THE BOARD OF TRUSTEES.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE BOARD OF TRUSTEES REVIEWS AND APPROVES THE PRESIDENT'S COMPENSATION

ANNUALLY AND CONSIDERS RELEVANT COMPARABILITY DATA AS PART OF THE PROCESS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

MANAGEMENT REVIEWS SALARY LEVELS ANNUALLY AND CONSIDERS RELEVANT

COMPARABILITY DATA AS PART OF THE PROCESS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
GOVERNING DOCUMENTS AND OTHER INFORMATION ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

Name of the organization	Employer i	dentification number
WESLEY BIBLICAL SEMINARY	64-0	579585
RENTAL PROPERTY EXPENSES	\$	30,591
SCHOLARSHIPS APPLIED TO TUITION	\$	-114,900
RENTAL PROPERTY EXPENSES	\$	-30,591
SCHOLARSHIPS APPLIED TO TUITION	\$	114,900