Return of Organization Exempt From Income Tax

OMB No 1545-0047

2011

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements For the 2011 calendar year, or tax year beginning 2011, and ending

<u>A</u>	For the	2011 cale	endar year, or tax year be			, 2011, a	nd ending			, 20	
В	Check if a	pplicable	C Name of organization Bet	thlehem	Bible Co				D Employ	er identification n	umber
	Address of	hange	Doing Business As							26-0747442	
	Name cha	nae	Number and street (or P O	box if ma	I is not delivered	to street address)	Room/suite	9	E Telepho	ne number	
	Initial retu	-	158 Roadrunner Ave					j		830-708-7444	
_	Terminate		City or town, state or count	try, and ZII	P + 4						
	Amended		New Braunfels, TX, 7813	-					G Gross re	eceipts \$	674948
			F Name and address of princ		Steve Smi			H(a) to thus a		for affiliates? Yes	
	Applicatio	n pending	158 Roadrunner Ave, Ne							ncluded? Yes	
		-4 -4 -4	·	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			7.07	_		a list (see instruction	
	Tax-exem			501(c) () \ (msert	no)	527			•	,
_	Website:		w.bethlehembiblecollege							n number ▶	
_		 -		Associati	on Other▶	L Yea	r of formation	on 2007	M State	of legal domicile	TX
Pá	art I	Summ									
	1		escribe the organization								
a		Promote	the interests and missio	n of Beth	ilehem Bible C	ollege, West Bank,	Israel. Ra	use and pro	cess fun	ds to be used fo	or the
Activities & Governance		college.	Find educational and spi	ırıtual op	portunities fo	the staff and stude	nts of the	college Cr	eate and	distribute new	sletters
Ë		to educa	te the public about the co	ollege.							
Š	2	Check th	nis box ▶ 🗌 if the organ	ization c	iscontinued i	ts operations or dis	sposed of	f more than	25% of	its net assets	
Ğ	3 1	Number	of voting members of th	ne gover	ning body (Pa	art VI, line 1a).			3	-	7
ο O	1		of independent voting n	-					4		
ij			mber of individuals emp		•		-		5		
ફ	i .		mber of volunteers (estir	•	•	. 2011 (1 art 7, 1110	_u,		6		
¥	1		related business revenu			on (C) line 12			7a	 	
	1						•		7b		
	b	vet unre	lated business taxable i	ncome i	roin Form 99	U-1, line 34		Prior Ye		Current Y	
	_						ļ	Prior re		Current	
ē	l		itions and grants (Part V				· _		971033		67466
Revenue	l .	-	service revenue (Part V				· ·		0		
ě	10 I	nvestme	ent income (Part VIII, col	lumn (A)	, lınes 3, 4, ar	nd 7d) .			459		286
Œ	11 (Other rev	venue (Part VIII, column	(A), lines	5, 6d, 8c, 9d	c, 10c, and 11e)			0		(
	12	Total reve	enue-add lines 8 throug	gh 11 (m	ust equal Parl	VIII, column (A), lin	ne 12)		971493		674947
_	13	Grants-a	nd similar amounts paid	(Part IX	, column (A),	lines 1-3)			966500		704329
	14	Benefits	BECCE TO THE MADE IS	Part IX.	column (A), I	ine 4)	. –		0		(
"	15 5	alaries	other compensation, em	nlovee h	enefits (Part I)	Column (A) lines !	5-10)	·· · · · · · · · · · · · · · · · · · ·	63809		59388
Expenses	16a	Potossio,	anal fundraising fees	of IX co	Jump (A) line	110)	· · · · ·		0		(
Ę.	b		draising expenses (Par		mn (D) line 2	51 .	3160				······································
X							3100		77572		05010
_			penses (Part IX, celumn				、 ・		77572	<u></u>	85010
	1		0 (Sds) Add Ines 13-17			column (A), line 25	' ⊢		1107881		848723
	19	Revenue	less expenses Subtrac	ct line 18	from line 12	•			-136388		
ts or	}						В	eginning of Cu		End of Ye	ear
sets	20	Total ass	sets (Part X, line 16)			•			300657		126910
AB BB	21	rotal liab	oilities (Part X, line 26) .						0		(
Net Asset Fund Bata	22	Vet asse	ets or fund balances Sul	btract lir	ne 21 from lin	e 20	. 🗆		300657		126910
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Sig		Sign	nature of officer	/ /	, <u> </u>	-V 1	21		ie 4	C/1/2	117
Sig	re		richnan w.s.	MITY	1 <i>EX</i>	ecotive	Dire	CCC		1/1/2	0/-
			e or print name and title		·					/ /	
Pa	id	Print/Ty	/pe preparer's name	[]	Preparer's signat	ure	Date	e	Check	T if PTIN	
		.]					-		self-em	<u> </u>	
	eparer		name •					Firm	's EIN ▶		
US	e Only										
Mar	the ID		address ► s this return with the pre	anarer of	nown above?	(see instructions)		Pno	ne no	□ v a	e Ne
						(SCE ITISTITUCTIONS)				. [] Ye	
Ear	Danamu	ark Dadii	iction Act Notice, see the	concret	- inctrilations		C-4 N-	110001		Form	990 (201

	90 (2011)			Page 3
Part	V Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	√ .cs	1,00
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		√
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21; 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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V .	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			,
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		√
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		1
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		1
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12a		1
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional .	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		/
14 a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a	✓	
D	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	√	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV .	15	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	-	1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		√
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Form 99	0 (2011)		1	Page 4
Part	Checklist of Required Schedules (continued)			
04	D.d.th		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		▼
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23		1
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 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a	-	√
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26	1	1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			74
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Schedule L, Part IV	28a 28b		√
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	-	1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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? <i>If "Yes," complete Schedule R, Part I</i>	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the	35a		1
36	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		▼
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	-	<u> </u>
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	√	
		Fom	n 99 0	(2011)

Part	Statements Regarding Other IRS Filings and Tax Compliance			age C
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			ĺ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		-	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c		 -
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			İ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.	2b		-
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		· 	<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," 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			١,
	account)?	4a		/
b	If "Yes," enter the name of the foreign country. ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			ĺ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	·	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	_	, 3
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	 	<u> </u>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			,
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		/
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h		├
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	L	
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	}		
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b] Section 501(c)(12) organizations. Enter	1		ì
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources]		Ì
	against amounts due or received from them)	l		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	[
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		├
ь	Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans	[l
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Form 99	90 (2011)			Page 6
Part	, , , , , , , , , , , , , , , , , , , ,			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See ins	struct	
Cooti	Check if Schedule O contains a response to any question in this Part VI	<u>···</u>		. 🗸
Secu	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . 1a 7	. ≯ ²⁶ y _{3,} x	130	1.00
	If there are material differences in voting rights among members of the governing body, or	┤* -^		1
	if the governing body delegated broad authority to an executive committee or similar		, å, . [*]	
	committee, explain in Schedule O.	ž	**, **	198
þ	Enter the number of voting members included in line 1a, above, who are independent 1b 6		, , , ,	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	√	. ' '
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	ļ	✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5_		/
6 7a	Did the organization have members or stockholders?	6	ļ	✓
, a	one or more members of the governing body?	7a	Ì	1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	70		
_	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		<u> </u>	,,
	the year by the following:		,	. * 5.
a	The governing body?	8a	✓_	<u> </u>
9	Each committee with authority to act on behalf of the governing body?	8b		✓
9	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever		ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		1
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	\$	% a	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		/
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		1
13	Did the organization have a written whistleblower policy?	13	1	 •
14	Did the organization have a written document retention and destruction policy?	14	· ·	1
15	Did the process for determining compensation of the following persons include a review and approval by	<u> </u>	*, *	, <i>19</i> 1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ĺ.,	3644	**************************************
а	The organization's CEO, Executive Director, or top management official	15a		1
þ	Other officers or key employees of the organization	15b		✓
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		, ×,	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	A- 1	1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	1		F* (1)
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	,, <u>.</u>	
	on C. Disclosure			
17 1Ω	List the states with which a copy of this Form 990 is required to be filed ► Section 6104 requires an expansion to make its Forms 1023 for 1024 if applicable), 990, and 990 T (Section	- FO1/	01/210	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	1 501(ပ)(၁)S	oniy)
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of	of inter	rest r	olicy
	and financial statements available to the public during the tax year.		55t F	oney,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	•	
	organization: ► Steve Smith, 158 Roadrunner Ave, New Braunfels, TX 78130, 830-708-7444			

Form	aan	(2011)	

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	Page	

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

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 no	r any relate	d orga	anız	atio	n c	ompe	nsa	ited any curren	t officer, directo	r, or trustee.
)					
(A) Name and Title	(B) Average hours per week	box,	untes	eck s pe	rson	e than o is both or/trust	n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Frederick Zahn Chairman	0	√		1				o	0	
(2) Nicola Awad		<u> </u>		· ·					`	
Vice-chairman	0	✓		1			Ì	o	o	(
(3) Scott Tjernagel				H	-		\vdash			
Secretary	0	✓		1				o	o	(
(4) George Shawreih		-					Г			
Treasurer	0	✓		1				О .	0	(
(5) Bishara Awad										
Director	40	✓				✓		51388	0	
(6) Darrell Cates				l						
Director	0	✓					L	0	0	
(7) Bart Den Boer				j						
Director	0	✓	-				_	0	0	
(8)										
(9)										
(10)										
(11)			i				Ì		,	1
(12)										
(13)										!
(14)					ļ				-	

	(A) Name and title	(B) Average hours per week	box, office	ot che unless r and	s per	more rson rect	than out the state of the state	an tee)	(D) Reportable compensation from	(E) Reportable compensation related	from	Estii amo of	(F) mated ount of ther	
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MI		from organ and	ensation m the nization related nizations	
(15)											 -			
(16)								-			\dashv			
(17)														
(18)								-						
(19)								-		}				
(20)							 	-						
(21)							<u> </u>	-						
(22)							ļ <u> </u>	-						
(23)								-			\top			
(24)								-						
(25)								-			+			
1b	Sub-total		i		l ·	. ,		<u> </u>	51388		0			0
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Sectio	n A	•			•	▶	51388		0			0
2	Total number of individuals (including but reportable compensation from the organi		to th	ose	list	ed a	above	e) w	<u> </u>	L	0,000	of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete 8								oloyee, or high		satec		Yes	No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual											,		<i>-</i>
5	Did any person listed on line 1a receive of for services rendered to the organization?		-				•		•		vidua			<u>·</u> √
Section	n B. Independent Contractors													
1	Complete this table for your five highest of compensation from the organization. Rep year.													x
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compens	ation	
						_								
						_		-						
	Total number of independent contracto													

Par	τ νιιι	Statement of Revenue				
, , , ,			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts s	1a	Federated campaigns 1a 0				012, 010, 01014
ts, Grants Amounts	Ь					•
ع ق						ľ
A is	C	Fundraising events 1c 0				
ia g	d	Related organizations 1d 0				
Contributions, Gifts, and Other Similar Ar	е	Government grants (contributions) 1e 0				
roi s	f	All other contributions, gifts, grants,	Ī			
a e	ŀ	and similar amounts not included above 1f 674661	İ			
<u>₹</u> ō	۱ ۾	Noncash contributions included in lines 1a-1f \$ 0				
, D	9				٠,	
	<u>h</u>	Total. Add lines 1a–1f	674661		· · · · · · · · · · · · · · · · · · ·	
Program Service Revenue		Business Code				
Š	2a		o	0	0	o
æ	b		0	0	0	0
.ĕ	С		0	0	0	0
ĕ	d		0	0	0	<u> </u>
E	е		0	0		<u> </u>
ē	f	All other program service revenue .			0	
ĕ	1		0	0	0	0
	g	Total. Add lines 2a–2f ▶	0			
	3	Investment income (including dividends, interest,				
		and other similar amounts) ▶	286	286	0	ĺ
	4	Income from investment of tax-exempt bond proceeds ▶	Ö	0	0	0
	5	Royalties .	0	0	0	0
	ľ	(i) Real (ii) Personal				0
	6a	Gross rents 0 0	1			
						۸.
	b	Less: rental expenses 0 0	-		y	- 344,
	C	Rental income or (loss) 0 0	a storytown a see to the to		F. 7	
	ď	Net rental income or (loss)	0	o	0	0
	7a	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory 0 0				
	b	Less cost or other basis				*
		and sales expenses . 0	ļ			
	С	Gain or (loss) . 0 0	į			,
	d	Net gain or (loss)		_		
	"	Net gaill of (loss)	0	0	0	0
Revenue	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c).	-		,	*
Other R		See Part IV, line 18 a 0	i			
ŏ		Less direct expenses . b 0		1	:	i
		Net income or (loss) from fundraising events	0		o	0
	9a	Gross income from gaming activities.			···	
		See Part IV, line 19 a				,
	ь	Less: direct expenses b 0		j		ı
		Net income or (loss) from gaming activities			_	••
		Gross sales of inventory, less	0	0	0	0
	IVa	make man and all a				
		returns and allowances . a 0		1		
	b	Less: cost of goods sold b 0				į
	С	Net income or (loss) from sales of inventory ▶	o	o	0	۸
		Miscellaneous Revenue Business Code				
}	11a					- '
	_		0	0	0	0
	b		0	0	0	0
ĺ	С		0	0	0	0
	d	All other revenue	0	0	0	0
		Total. Add lines 11a–11d ▶	0			
	12	Total revenue. See instructions.	674947	286	0	

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) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a respon	se to any question	in this Part IX .		<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	0	0		, 1 m.
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	704325	704325		i
4 5	Benefits paid to or for members . Compensation of current officers, directors, trustees, and key employees	51388	0	54200	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	51300	0	51388	0
7 8	Other salaries and wages Pension plan accruals and contributions (include	8000	0	8000	0
	section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroli taxes	0	0	0	0
11	Fees for services (non-employees)				
а	Management	4250	0	4000	250
b	Legal	0	0	0	0
С	Accounting .	0	0	0	0
d	Lobbying	0	0	0	0
е	Professional fundraising services See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other	0	0	0	0
12	Advertising and promotion	12682	9772	0	2910
13	Office expenses	56547	49166	7381	0
14	Information technology	0	0	0	0
15	Royalties	0	0	0	0
16	Occupancy	0	0	0	0
17	Travel	1373	0	1373	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	o	0:	0,	0
19	Conferences, conventions, and meetings .	10056	10056	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0	0	0	0
24	Other expenses Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				,
а	Entertainment	102	0	102	<u></u>
b	Entertainment	0	0	0	
			0	0	0
c d		0	0	0	0
e	All other expenses	0	0		0
25	All other expenses Total functional expenses. Add lines 1 through 24e	848723	773319	72244	3160
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)	040723	//3013	1224	3100

		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	43678	1	1973
2	Savings and temporary cash investments	256979	2	10718
3	Pledges and grants receivable, net	0	3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4	Accounts receivable, net	0	4	
5	Receivables from current and former officers, directors, trustees, key	<u>-</u>		
-	employees, and highest compensated employees. Complete Part II of	i	1	
-	Schedule L	o	5	1
6	Receivables from other disqualified persons (as defined under section			,
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		}	
1	employers and sponsoring organizations of section 501(c)(9) voluntary		1	
2	employees' beneficiary organizations (see instructions)	o	6	
7 8	Notes and loans receivable, net	0	7	
ž 8	Inventories for sale or use	0	8	
9	Prepaid expenses and deferred charges	0	9	(
10				
}	other basis. Complete Part VI of Schedule D 10a 0	ļ	Ì	
1	Less: accumulated depreciation . 10b 0	o	10c	(
11	Investments—publicly traded securities	0	11	(
12	Investments—other securities See Part IV, line 11	0	12	(
13	Investments-program-related. See Part IV, line 11	0	13	(
14	Intangible assets	0	14	(
15	Other assets See Part IV, line 11	0	15	(
16	Total assets. Add lines 1 through 15 (must equal line 34) .	300657	16	126910
17	Accounts payable and accrued expenses	0	17	
18	Grants payable	0	18	
19	Deferred revenue	0	19	
20	Tax-exempt bond liabilities	0	20	(
21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	
3 22	Payables to current and former officers, directors, trustees, key		i	
	employees, highest compensated employees, and disqualified persons.		_	•
22	Complete Part II of Schedule L	0	22	
2.0	Secured mortgages and notes payable to unrelated third parties	0	23	
24	Unsecured notes and loans payable to unrelated third parties .	0	24	
25	Other liabilities (including federal income tax, payables to related third	_		
ı	parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0		(
26			25	
20	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ □ and complete	0	26	
3	lines 27 through 29, and lines 33 and 34.		į	
27	Unrestricted net assets		07	-
28	Temporarily restricted net assets	···-	27	
29			29	
29	Permanently restricted net assets . Organizations that do not follow SFAS 117, check here ▶ ☑ and		29	
27 28 29 30 31 32 33	complete lines 30 through 34.		ľ	
30	Capital stock or trust principal, or current funds	300657	30	126910
31	Paid-in or capital surplus, or land, building, or equipment fund .	0	31	120310
32	Retained earnings, endowment, accumulated income, or other funds	0	32	
33	Total net assets or fund balances	300657	33	126910
34	Total liabilities and net assets/fund balances	300657	34	126910
	. The made and not additionable buildings	300037		Form 990 (2011

b Were the organization's financial statements audited by an independent accountant?

issued on a separate basis, consolidated basis, or both.

Schedule O.

☐ Separate basis

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were

If the organization changed either its oversight process or selection process during the tax year, explain in

☐ Consolidated basis ☐ Both consolidated and separate basis

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2011)

2b

2c

3а

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2011

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

OMB No 1545-0047

Name of the organization Employer identification number Bethlehem Bible Co 26-0747442 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is. (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated **b** Type II d Type III-Other e 🗌 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(iı) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(u) Provide the following information about the supported organization(s) h (IV) Is the organization (vii) Amount of (ii) EIN (iii) Type of organization (v) Did you notify (vi) Is the (i) Name of supported in col (i) listed in your the organization in (described on lines 1-9 organization in col support organization (i) organized in the governing document? col (i) of your support? above or IRC section UST (see instructions)) Yes Yes Yes Nο No No (A) (B) (C) (D) (E)

Total

Par	II · Support Schedule for Organiza	ations Descr	ibed in Sect	ions 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(v	<u> </u>
	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
~	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	ion A. Public Support			, — · · · · · · · · · · · · · · · · · ·			
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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						1
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	<u> </u>					
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)	*					II.
6	Public support. Subtract line 5 from line 4.						
Sect	ion B. Total Support			·	·		
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on			_			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc				•	12	
13	First five years. If the Form 990 is for the		i's first, secon	d, third, fourth	i, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop her		·			· · · · ·	· · > []
	on C. Computation of Public Suppor					·	
14 15 16a	Public support percentage for 2011 (line 6 Public support percentage from 2010 Sch 331/3% support test—2011. If the organization qual	iedule A, Part l zation did not d	II, line 14 check the box	on line 13, and			% heck this
b	331/3% support test—2010. If the organicheck this box and stop here. The organi	ization did no zation qualifies	t check a box s as a publicly	on line 13 or supported org	16a, and line janization	15 is 33½% 	
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "fa organization	ol11. If the orga ets the "facts-a acts-and-circu	nization did no and-circumsta mstances" tes 	ot check a box nces" test, che it. The organiza	on line 13, 16 eck this box an ation qualifies	nd stop here. E as a publicly si 	xplain in upported ► □
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization me supported organization	ion meets the	"facts-and-ci	rcumstances"	test, check th	is box and st	op here.
18	Private foundation. If the organization did instructions	d not check a l	box on line 13,			k this box and	see . ▶ □

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

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

	The organization rand to quality	dildor the tot	no noted bein	W, picase co	inpicto i dit i	<u>:'/</u>	
	on A. Public Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	16615	407023	787537	971033	674661	2856869
2	Gross receipts from admissions, merchandise sold or services performed, or facilities		·	į			
	furnished in any activity that is related to the				ľ		
	organization's tax-exempt purpose .	o	o	o	o	o	0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	О	o	o	o	o	0
4	Tax revenues levied for the						
	organization's benefit and either paid			ļ		}	
	to or expended on its behalf	. 0	اه	o	ol	اه	0
5	The value of services or facilities						
•	furnished by a governmental unit to the	'	1	}			
	organization without charge	o	اه	o	0	o	0
6	Total. Add lines 1 through 5	16615	407023	787537	971033	674661	2856869
	Amounts included on lines 1, 2, and 3	10013	407023	707337	971033	074001	2030003
<i>,</i> a	received from disqualified persons .	o	o	0	o	o	0
	· · · · ·						
b	Amounts included on lines 2 and 3	·	ì		Ì	1	
	received from other than disqualified		}		ļ	1	
	persons that exceed the greater of \$5,000	_		_	_ [_[_
	or 1% of the amount on line 13 for the year	0	0	0	0	0	0
Ç	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from			ļ	İ	į	
	line 6)						2856869
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	16615	407023	787537	971033	674661	2856869
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,			}		j	
	royalties and income from similar sources .	51	2186	11507	459	286	14489
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses]			ì	1	
	acquired after June 30, 1975	o	0	o	o	0	0
С	Add lines 10a and 10b	51	2186	11507	459	286	14489
11	Net income from unrelated business						
• •	activities not included in line 10b, whether				}	1	
	or not the business is regularly carried on	o	0	o	o	0	0
12	Other income Do not include gain or			-	-		<u> </u>
12	loss from the sale of capital assets	ľ		ĺ]	1	
	(Explain in Part IV)	o	o	o	0	0	0
13	Total support. (Add lines 9, 10c, 11,	 		-			
13	and 12.)	40000	400000	7000		67.6.	2074552
4.4	·	16666	409209	799044	971492	674947	2871358
14	First five years. If the Form 990 is for the	-			•		
	organization, check this box and stop her		· · · ·	· · · · · ·	· · · · · ·		· · > 🗸
	on C. Computation of Public Suppor						
15	Public support percentage for 2011 (line 8		•	3, column (f))		15	%
16	Public support percentage from 2010 Sch			.	· · · · · ·	16	%
<u>Secti</u>	on D. Computation of Investment Inc						
17	Investment income percentage for 2011 (I	ine 10c, colum	n (f) divided by	/ line 13, colun	nn (f))	17	%
18	Investment income percentage from 2010					18	%
19a	331/3% support tests-2011. If the organi	zation did not	check the box	on line 14, an	id line 15 is m	ore than 331/39/	6, and line
	17 is not more than 331/3%, check this box a						
b	331/3% support tests-2010. If the organiz	ation did not ch	neck a box on l	ine 14 or line 1	9a, and line 16	is more than 3	
-	line 18 is not more than 331/3%, check this b						
20	Private foundation If the organization du		_	•	•		_

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2011
Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

90. See separate instructions. Inspection

Employer identification number

Bethl	ehem Bible Co						0747442
Par	General Information Form 990, Part IV, line		es Outside	the United States. Com	plete if the organi	zation answ	vered "Yes" to
1	1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?						
2	2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.						
_ 3	Activities per Region (The fo	llowing Part I	l, line 3 table o	can be duplicated if additio	nal space is need	led.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity liste a program se describe specific service(s) in r	rvice, c type of	(f) Total expenditures for and investments in region
(1)	Middle East and North Afri	1	2	Program Services	Grant Oversight		51388
(2)							
(3)							
(4)							·
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
3a	Sub-total						
_	Total from continuation sheets to Part I						

c Totals (add lines 3a and 3b)

51388

Part II Grants Part IV, Part II o	s and Other A line 15, for an can be duplice	Grants and Other Assistance to Organizations or E Part IV, line 15, for any recipient who received more th Part II can be duplicated if additional space is needed.	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answere Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed.	es Outside the l 5,000. Check thi	United States. Con is box if no one reci	nplete if the organi pient received mo	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ▶ □ Part II can be duplicated if additional space is needed.	" to Form 990,
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		Middle East and						
(2)		North Africa	Operations	674661	674661 Wire Transfer	0		
(2)								
(4)								
(5)								
(9)								
(2)								
(8)								
(6)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
	umber of recipie r for which the	ent organizations list grantee or counsel t	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	ognized as charitie 501(c)(3) equivale	s by the foreign courncy letter	itry, recognized as ta	ax-exempt ▼	-
3 Enter total nu	imber of other of	Enter total number of other organizations or entities	ties	•			A	0
							Sche	Schodule E (Form 990) 2011

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance Part III Ξ <u>8</u> ල <u>4</u> 3 9 6 0 (11) (12) (13) (14) (15) (17) 8 6 (16) (18)

Schedule F (Form 990) 2011

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	√ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	☐ Yes	 ✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)		☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	☐ Yes	☑ No

Schedule F (Form 990) 2011

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

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SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2011

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Bethlehem Bible Co.

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

Open to Public Inspection

▶ Attach to Form 990 or 990-EZ. Name of the organization

Employer identification number

Part VI Line No. 2 - Two of the directors, Nicola Awad and Bishara Awad, are brothers.
Part VI Line No. 8b - There are no committees within the organization that have the authority to act on behalf of the governing body.
Part VI Line No. 11b - The form 990 along with accompanying schedules are emailed to each director. Review and discussion of the 990 is
held at the following Board of Directors meeting. Any director is able to call an unscheduled meeting in the event of immediate questions.
Part VI Line No. 19 - All governing documents, conflict of interest policy, and financial statements are made available to the public upon
written request. Requested documents are mailed to the inquirer.
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