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CLIENT'S COPY

DUGAN & LOPATKA, CPA'S PC

CLIENT: 2530 NOVEMBER 4, 2022

BIBLE BASICS INTERNATIONAL INC P O BOX 726 ODESSA, FL 33556

PROFESSIONAL SERVICES RENDERED IN THE PREPARATION OF YOUR 2021 EXEMPT ORGANIZATION TAX RETURNS, INCLUDING:

FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX \$ 65.00 SCHEDULE A, PUBLIC CHARITY STATUS AND PUBLIC SUPPORT 0.00 SCHEDULE B, SCHEDULE OF CONTRIBUTORS 0.00 SCHEDULE D, SUPPLEMENTAL FINANCIAL STATEMENT 0.00 SCHEDULE F, STATEMENT OF ACTIVITIES OUTSIDE US 0.00 SCHEDULE O, SUPPLEMENTAL INFORMATION 0.00 FORM 8868, APPLICATION FOR AUTOMATIC FILING EXTENSION 0.00 FORM 8879-TE, E-FILE SIGNATURE AUTHORIZATION 0.00

TOTAL FEE

\$ 65.00

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

December 31, 2021

Prepared for	
	Bible Basics International Inc
	P O Box 726 C_{1}^{2}
	Odessa, FL 33556
Prepared by	
	Dugan & Lopatka, CPA's PC 4320 Winfield Road Suite 450
	Warrenville, IL 60555-4036
	· · · · · · · · · · · · · · · · · · ·
Amount due or refund	Not applicable
Make check	
payable to	Not applicable
Mail tax return and check (if	
applicable) to	Not applicable
Return must be mailed on or before	Not applicable
Special Instructions	This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us by November 15, 2022.
	Also enclosed is a public inspection copy that must be made available upon request.

Form 8879-TE	IRS e-file Signature Authorization for a Tax Exempt Entity		ion	OMB No. 1545-0047
Form OOI 9-IL	For calendar year 2021, or fiscal year beginning		, 20	0004
		nd to the IRS. Keep for your records.		2021
Department of the Treasury Internal Revenue Service	•	ov/Form8879TE for the latest inform		
Name of filer			EIN or SSN	
BIBLE	BASICS INTERNATION	AL INC	23-73	328667
Name and title of officer or pe	,		·	
		E DIRECTOR		
Part I Type of	Return and Return Informati	on		
Form 5330 filers may enter or 10a below, and the amo	dollars and cents. For all other forms ount on that line for the return being fi	3879-TE and enter the applicable amous, enter whole dollars only. If you check led with this form was blank, then leav red -0- on the return, then enter -0- on t	<pre>c the box on line 1a, 2a, e line 1b, 2b, 3b, 4b, 5b,</pre>	3a, 4a, 5a, 6a, 7a, 8a, 9a, , 6b, 7b, 8b, 9b, or 10b,
1a Form 990 check h	ere 🕨 🗙 b Total revenu	e, if any (Form 990, Part VIII, column (A	A), line 12)	1b 887,725.
2a Form 990-EZ che	ck here b b Total revenu	e, if any (Form 990-EZ, line 9)	,,,	2b
3a Form 1120-POL		rm 1120-POL, line 22)		
4a Form 990-PF che		n investment income (Form 990-PF, P		4b
5a Form 8868 check		(Form 8868, line 3c)		5b
6a Form 990-T chec	here b Total tax (Fo	rm 990-T, Part III, line 4)		6b
7a Form 4720 check	here b Total tax (Fo	rm 4720, Part III, line 1)		7b
8a Form 5227 check		ts at end of tax year (Form 5227, Item		8b
9a Form 5330 check		m 5330, Part II, line 19)		9b
10a Form 8038-CP ct	eck here 🕨 📄 b Amount of c	redit payment requested (Form 8038-	CP, Part III, line 22)	10b
		tion of Officer or Person Sub	-	
Under penalties of perjury	I declare that X I am an officer of	the above entity or I am a persor , (EIN)		pect to (name
of any refund. If applicable entry to the financial instit financial institution to deb later than 2 business days payment of taxes to recei- personal identification nur PIN: check one box only	, I authorize the U.S. Treasury and its ition account indicated in the tax pre t the entry to this account. To revoke prior to the payment (settlement) dat e confidential information necessary iber (PIN) as my signature for the elec	mission, (b) the reason for any delay in a designated Financial Agent to initiate paration software for payment of the fe a payment, I must contact the U.S. Tru- te. I also authorize the financial instituti to answer inquiries and resolve issues ctronic return and, if applicable, the co	an electronic funds with ederal taxes owed on thi easury Financial Agent a ons involved in the proc related to the payment. nsent to electronic fund	idrawal (direct debit) s return, and the at 1-888-353-4537 no essing of the electronic I have selected a s withdrawal.
X I authorize DU	GAN & LOPATKA, CPA		to enter my P	NN 33556
	ER	0 firm name		Enter five numbers, but do not enter all zeros
with a state age on the return's o As an officer or return. If I have	ncy(ies) regulating charities as part of isclosure consent screen. berson subject to tax with respect to	ed return. If I have indicated within this the IRS Fed/State program, I also auth the entity, I will enter my PIN as my sig y of the return is being filed with a state urn's disclosure consent screen.	norize the aforementione nature on the tax year 2	ed ERO to enter my PIN 021 electronically filed
Signature of officer or person subje			Date	•
Part III Certifica	tion and Authentication			
-	ur six-digit electronic filing identificati your five-digit self-selected PIN.	36350	960555 nter all zeros	
		nature on the 2021 electronically filed ub. 4163, Modernized e-File (MeF) Info		
ERO's signature 🕨		Date	e 🕨	
	ERO Must Ret	ain This Form - See Instruction rm to the IRS Unless Request		
LHA For Privacy act and	Paperwork Reduction Act Notice,	see instructions.		Form 8879-TE (2021)
102521 01-11-22				

Form	990
⊦orm	220

EXTENDED TO NOVEMBER 15, 2022

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 2021

Department of the Treasury Internal Revenue Service		
A For the 2021 calen		
В	Check if	C Name c

Depa	bepartment of the Treasury Iternal Revenue Service Do not enter social security numbers on this form as it may be made public. Open to Public Inspection							
	A For the 2021 calendar year, or tax year beginning and ending					Inspection		
			forganization	enuing	D Employer identific	ation number		
D (Check if pplicab	le:	organization					
	Addre		E BASICS INTERNATIONAL INC					
			usiness as MISSIOSERVE ALLIANCE		23-73286	67		
	Initial	Ŭ		Room/suite	E Telephone number			
	Final		BOX 726	noon,outo	813-920-2264			
	termin		own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	939,343.		
	Amer returr		SA, FL 33556		H(a) Is this a group re			
	Appli tion	^{ca-} F Name a	nd address of principal officer: STEPHEN BEST		for subordinates			
	pend		AS C ABOVE		H(b) Are all subordinates in			
11	Tax-ex	empt status:	X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1)	or 📃 527	1	list. See instructions		
٦١	Nebsi	te: 🕨 WWW .	MISSIOSERVE.ORG		H(c) Group exemptior	n number 🕨		
κF	[:] orm o	f organization:	X Corporation Trust Association Other ►	L Year	of formation: 1973 N	State of legal domicile: NJ		
Pa	art I	Summary						
e	1	Briefly describ	e the organization's mission or most significant activities: ${ m {TO}}$ ${ m {E}}$	XTEND	THE WORSHIP	OF GOD BY		
Activities & Governance		SERVING	THE SENDERS AND THE SENT, MOBILI	ZING W	ORKERS WITH	THE WORD		
ern (2	Check this bo	$x \triangleright$ if the organization discontinued its operations or dispos	sed of more	than 25% of its net as	sets.		
No.	3	Number of vot	ing members of the governing body (Part VI, line 1a)			6		
യ ത	4	Number of ind	ependent voting members of the governing body (Part VI, line 1b)			5		
es	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5		14				
viti	6	Total number	of volunteers (estimate if necessary)		6	0		
Acti	7a	Total unrelated	d business revenue from Part VIII, column (C), line 12		7a	0.		
_	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	<u></u>	7b	0.		
					Prior Year	Current Year		
e	8		and grants (Part VIII, line 1h)		758,921.	690,701.		
Revenue	9	Program servi	ce revenue (Part VIII, line 2g)		27,952.	73,385.		
Sev.	10	Investment ind	come (Part VIII, column (A), lines 3, 4, and 7d)		29.	123,639.		
	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		310.	0.		
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		787,212.	887,725.		
	13	Grants and sir	nilar amounts paid (Part IX, column (A), lines 1-3)		100,183.	47,173.		
	14	Benefits paid	to or for members (Part IX, column (A), line 4)		0.	0.		
es	15	Salaries, other	compensation, employee benefits (Part IX, column (A), lines 5-10)		519,755.	514,009.		
Expenses	16a	Professional fu	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) ► <u>66,8</u>	L	0.	0.		
ď	b	Total fundraisi	ng expenses (Part IX, column (D), line 25)	09.				
ш	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		228,361.	330,399.		
	18	Total expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)		848,299.	891,581.		
	19	Revenue less	expenses. Subtract line 18 from line 12		-61,087.	-3,856.		
Net Assets or Fund Balances				Be	ginning of Current Year	End of Year		
sset	20	Total assets (F		L	906,716.	907,387.		
at As	21		(Part X, line 26)		26,562.	31,089.		
Nu Nu	22		fund balances. Subtract line 21 from line 20		880,154.	876,298.		
_	art II	Signature						
Und	er pen	alties of perjury,	I declare that I have examined this return, including accompanying schedule	s and statem	ents, 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 Here	Signature of officer STEPHEN BEST, EXECUTIVE Type or print name and title	E DIRECTOR	Date		
Paid	Print/Type preparer's name RON MARKLUND	Preparer's signature D	ate Check PTIN if self-employed P01985511		
Preparer	Firm's name ▶ DUGAN & LOPATKA,		Firm's EIN ▶ 36-2886485		
Use Only	Firm's address 4320 WINFIELD RC WARRENVILLE, IL		Phone no.630-665-4440		
May the II	May the IRS discuss this return with the preparer shown above? See instructions				
132001 12-0	I3200112-09-21LHAFor Paperwork Reduction Act Notice, see the separate instructions.Form 990 (2021)				

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2021) BIBLE BASICS INTERNATIONAL INC 23-7328667
Par	t III Statement of Program Service Accomplishments
<u> </u>	Check if Schedule O contains a response or note to any line in this Part III
	Briefly describe the organization's mission:
	TO EXTEND THE WORSHIP OF GOD BY SERVING THE SENDERS AND THE SENT,
	MOBILIZING WORKERS WITH THE WORD AND ADVANCING THE GOSPEL TO THE
	UNREACHED AND UNENGAGED.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
	(Code:) (Expenses \$ 371,017. including grants of \$) (Revenue \$ 2,2
	GENERAL MINISTRY IN FOREIGN COUNTRIES INCLUDES GOSPEL PROCLAMATION,
	DISCIPLE MAKING, CHURCH PLANTING, CHURCH STRENGTHENING, PASTORAL
	TRAINING, PROGRAM DEVELOPMENT, AND RADIO BROADCAST MINISTRY, SHORT-T
	MISSION TRIPS, AND INTERNSHIP MINISTRIES. GENERAL MINISTRY IN THE US INCLUDES MISSIONS FOCUSED SERVING OF LOCAL CHURCHES AND MISSIONARIES
	THROUGH CONSULTING AND MENTORING OF PASTORS AND MISSIONS COMMITTEES,
	DEVELOPING AND TRAINING MISSIONARIES FOR CROSS-CULTURAL SERVICE, AND
	PROVIDING FUNDRAISING AND DONATION SERVICES FOR MISSIONARIES AND
	DONORS. IT ALSO INCLUDES CREATING MISSIONS AWARENESS AND CHALLENGING
	CHURCHES AND PEOPLE TO INCREASED MISSIONS PRAYER AND PARTICIPATION.
łb	(Code:) (Expenses \$ 135,647. including grants of \$ 6,715.) (Revenue \$ 64,4
	HOPE RADIO MINISTRY IN TOGO, WEST AFRICA IS A JOINT PARTNERSHIP
	MINISTRY WITH THE ASSOCIATION OF BAPTISTS FOR WORLD EVANGELISM (ABWE
	IT IS A FULLY OPPERATING RADIO STATION PRODUCING AND BROADCASTING
	CHRISTIAN PROGRAMING IN FRENCH AND LOCAL LANGUAGES. THE STATION IS T
	HUB FOR MISSIONARIES INVOLVED IN OUTREACH, DISCIPLEMAKING, CHURCH
	PLANTING, AND PASTORAL TRAINING. PHASE 2 A PROJECT TO COMPLETE THE
	SECOND FLOOR OF THE RADIO STUDIO BUILDING WAS INITIATED IN OCTOBER O
	2020 AND COMPLETED IN EARLY 2021. PHASE 2 PROVIDES OUTREACH OFFICES,
	ADDITIONAL PRODUCTION AND STUDIO SPACE, A TRAINING CENTER, AND GUEST
	HOUSING.
	HOODING:
	(Code:) (Expenses \$ 106,808. including grants of \$ 21,542.) (Revenue \$ 1,6
1c	(Code:) (Expenses \$ 106,808. including grants of \$ 21,542.) (Revenue \$ 1,6 THE ASOCIACION MINISTERIOS BASE BIBLICA DE HONDURAS (AMBBH) IS A
	THE ASULTATION MINISTERIUS BASE BIBLICA DE HONDUKAS (AMBBH) IS A
	DADRING MINING MINING AND A DESCRIPTION OF MINING AND A DESCRIPTION OF A DESCRIPACION OF A DESCRIPTION OF A
	PARTNER MINISTRY OF MISSIOSERVE ALLIANCE IN HONDURAS WHICH IS CARRIE
	PARTNER MINISTRY OF MISSIOSERVE ALLIANCE IN HONDURAS WHICH IS CARRIE OUT BY OUR MISSIONARIES AND THEIR'S AND INCLUDES GOSPEL PROCLAMATION
	PARTNER MINISTRY OF MISSIOSERVE ALLIANCE IN HONDURAS WHICH IS CARRIE OUT BY OUR MISSIONARIES AND THEIR'S AND INCLUDES GOSPEL PROCLAMATION DISCIPLE MAKING, CHURCH PLANTING, CHURCH STRENGTHENING, PASTORAL
	PARTNER MINISTRY OF MISSIOSERVE ALLIANCE IN HONDURAS WHICH IS CARRIE OUT BY OUR MISSIONARIES AND THEIR'S AND INCLUDES GOSPEL PROCLAMATION DISCIPLE MAKING, CHURCH PLANTING, CHURCH STRENGTHENING, PASTORAL TRAINING, SHORT-TERM MISSION TRIPS, INTERNSHIP MINISTRIES, COMMUNITY
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	PARTNER MINISTRY OF MISSIOSERVE ALLIANCE IN HONDURAS WHICH IS CARRIE OUT BY OUR MISSIONARIES AND THEIR'S AND INCLUDES GOSPEL PROCLAMATION DISCIPLE MAKING, CHURCH PLANTING, CHURCH STRENGTHENING, PASTORAL TRAINING, SHORT-TERM MISSION TRIPS, INTERNSHIP MINISTRIES, COMMUNITY RELIEF, AND THE BLOSSOM CREEK FARM PROJECT.
	PARTNER MINISTRY OF MISSIOSERVE ALLIANCE IN HONDURAS WHICH IS CARRIE OUT BY OUR MISSIONARIES AND THEIR'S AND INCLUDES GOSPEL PROCLAMATION DISCIPLE MAKING, CHURCH PLANTING, CHURCH STRENGTHENING, PASTORAL TRAINING, SHORT-TERM MISSION TRIPS, INTERNSHIP MINISTRIES, COMMUNITY RELIEF, AND THE BLOSSOM CREEK FARM PROJECT.
4d	PARTNER MINISTRY OF MISSIOSERVE ALLIANCE IN HONDURAS WHICH IS CARRIE OUT BY OUR MISSIONARIES AND THEIR'S AND INCLUDES GOSPEL PROCLAMATION DISCIPLE MAKING, CHURCH PLANTING, CHURCH STRENGTHENING, PASTORAL TRAINING, SHORT-TERM MISSION TRIPS, INTERNSHIP MINISTRIES, COMMUNITY RELIEF, AND THE BLOSSOM CREEK FARM PROJECT. Other program services (Describe on Schedule O.) (Expenses \$ 18,916. including grants of \$ 18,916.) (Revenue \$ 5,000.)
4d	PARTNER MINISTRY OF MISSIOSERVE ALLIANCE IN HONDURAS WHICH IS CARRIE OUT BY OUR MISSIONARIES AND THEIR'S AND INCLUDES GOSPEL PROCLAMATION DISCIPLE MAKING, CHURCH PLANTING, CHURCH STRENGTHENING, PASTORAL TRAINING, SHORT-TERM MISSION TRIPS, INTERNSHIP MINISTRIES, COMMUNITY RELIEF, AND THE BLOSSOM CREEK FARM PROJECT.
łd łe	PARTNER MINISTRY OF MISSIOSERVE ALLIANCE IN HONDURAS WHICH IS CARRIE OUT BY OUR MISSIONARIES AND THEIR'S AND INCLUDES GOSPEL PROCLAMATION DISCIPLE MAKING, CHURCH PLANTING, CHURCH STRENGTHENING, PASTORAL TRAINING, SHORT-TERM MISSION TRIPS, INTERNSHIP MINISTRIES, COMMUNITY RELIEF, AND THE BLOSSOM CREEK FARM PROJECT. Other program services (Describe on Schedule O.) (Expenses \$ 18,916. including grants of \$ 18,916.) (Revenue \$ 5,000.) Total program service expenses ▶ 632,388.
łd łe	PARTNER MINISTRY OF MISSIOSERVE ALLIANCE IN HONDURAS WHICH IS CARRIE OUT BY OUR MISSIONARIES AND THEIR'S AND INCLUDES GOSPEL PROCLAMATION DISCIPLE MAKING, CHURCH PLANTING, CHURCH STRENGTHENING, PASTORAL TRAINING, SHORT-TERM MISSION TRIPS, INTERNSHIP MINISTRIES, COMMUNITY RELIEF, AND THE BLOSSOM CREEK FARM PROJECT.

Form	990	(2021)	۱

 Form 990 (2021)
 BIBLE
 BASICS
 INTERNATIONAL
 INC

 Part IV
 Checklist of Required Schedules
 International
 Inc

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		v	
-	If "Yes," complete Schedule A	1	X X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Δ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		x
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		- 23
-	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	· ·		
Ū	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 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
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
11	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
	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	Х	
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
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
1Lu	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any		х	
16	foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	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	0.4		x
12000	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	990	^ (2021)
10200	3 12-09-21			(

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3

Form	990	(2021)

22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			v
~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete</i>			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i>	24.0		x
b	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		- 23
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	210		
	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		
.5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
_	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	250		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
8	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	28a		X
b	"Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?If			
	"Yes," complete Schedule L, Part IV	28c		X
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		x
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		X
3	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
4	Part V, line 1	34		X
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	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		X
87	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
8	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	x	
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	30	- 21	
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	N
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 2			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		
2004	(gambling) winnings to prize winners?	Form	990	(201
	4			4
41	10375957425302021.05000BIBLEBASICSINTERNATIONAL	253	30_	

Form 990	
Part V	Sta

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1				
	filed for the calendar year ending with or within the year covered by this return	2a	14			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	irns? .		2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instruction	ıs				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	еО .		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	ority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	acco	unt)?	4a		
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accou	nts (FBAR).			
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 trans-	action	?	5b		
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		Γ
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t					
	any contributions that were not tax deductible as charitable contributions?			6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contribu					T
	were not tax deductible?		-	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the pavor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		t
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					┢
2	to file Form 8282?		-	7c		
Ч	If "Yes," indicate the number of Forms 8282 filed during the year	7d	1	10		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	-		7e		
	Did the organization receive any failed, directly of indirectly, to pay premiums on a personal benefit cont Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			76 7f		┢
						┢
	If the organization received a contribution of qualified intellectual property, did the organization file F			7g 7h		┢
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			70		┝
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			•		
~				8		┝
	Sponsoring organizations maintaining donor advised funds.			0-		
				9a		┝
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		┝
0	Section 501(c)(7) organizations. Enter:	1	1			
	Initiation fees and capital contributions included on Part VIII, line 12	10a		-		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		-		
1	Section 501(c)(12) organizations. Enter:	I	1			
	Gross income from members or shareholders	11a		-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against	1.				
_	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	1	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
3	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1			
	organization is licensed to issue qualified health plans	13b				
с	Enter the amount of reserves on hand	13c				
4a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	ıle O		14b		
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remun	eratio	n or			
	excess parachute payment(s) during the year?			15		
	If "Yes," see the instructions and file Form 4720, Schedule N.					
6	Is the organization an educational institution subject to the section 4968 excise tax on net investme	nt inco	ome?	16		
	If "Yes," complete Form 4720, Schedule O.					
	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in	n any				Γ
7				17		
7	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?					
7	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.			17		

Form 99	0 (2021)
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BIBLE BASICS INTERNATIONAL INC

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

X

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

			Yes	s
	Enter the number of voting members of the governing body at the end of the tax year 1a	6		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.	_		
	Enter the number of voting members included on line 1a, above, who are independent 1b	5		
	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		
	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			
	Did the organization become aware during the year of a significant diversion of the organization's assets?			
	Did the organization have members or stockholders?	. 6		_
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	70		
	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	. 7a		
		76		
	persons other than the governing body?	. 7b		
		8a	x	
	The governing body?		X	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	. 00		
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		
	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	s
0a	Did the organization have local chapters, branches, or affiliates?	10a		-
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	. 12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	120	x	
13	Did the organization have a written whistleblower policy?	13	X	
	Did the organization have a written document retention and destruction policy?		x	
	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		
	Other officers or key employees of the organization			
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
	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		
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	. 16b		
ect	tion C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed NONE			
7	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)	(3)s on	y) ava	aila
8	for public inspection. Indicate how you made these available. Check all that apply.			
8	Own website Another's website X Upon request Other (explain on Schedule O)	and fina	ancial	
18 19		and fina	ancial	
18 19	Own website Another's website X Upon request Other (<i>explain on Schedule O</i>) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, statements available to the public during the tax year.	and fina	ancial	
18 19 20	Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,	and fina	ancial	
18 19 20	Own website Another's website X Upon request Other (<i>explain on Schedule O</i>) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records ►	and fina	ancial	
8 9 20	Own website Another's website X Upon request Other (<i>explain on Schedule O</i>) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records ► CEDARSTONE HOLDINGS LLC - 630-580-5750		ancial m 99	

Part VII	Compensation of Officers,	Directors, T	Frustees,	Key Employees,	Highest	Compensated
	Employees, and Independe	nt Contract	tors			

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

____ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title Avera			not c	Pos heck	ition	l than	one	Reportable	Reportable	Estimated
	hours per	box	, unle cer ar	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week		cer ar		recio	n/trus	lee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	e or d	ee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the
	organizations	ustee	trust		ee	npen		1099-NEC)	1099-NEC)	organization and related
	below	dual ti	tiona		nploy	st cor	<u> </u>	1000 1120)		organizations
	line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former			5
(1) STEPHEN BEST	45.00									
EXECUTIVE DIRECTOR		Х		X				17,500.	0.	60,000.
(2) JOHN R MITTEN	3.00									
CHAIRMAN		Х		X				0.	0.	0.
(3) ROBERT BRADBURY	3.00									
SECRETARY		Х		X				0.	0.	0.
(4) CHARLES BLACK	3.00									
TREASURER		Х		X				0.	0.	0.
(5) JOHN LEMON	3.00									
BOARD MEMBER		Х						0.	0.	0.
(6) GLENN PRIDDY	3.00									
BOARD MEMBER		Х						0.	0.	0.
132007 12-09-21						-				Form 990 (2021)

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	990 (2021) BIBLE BAS									23-73	328	667	Pa	age 8
Par	t VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st C					(5)	
	(A) Name and title	(B) Average hours per week	box offic	not c , unle	Pos heck ss pe	more rson i	than is bot pr/trus	h an	(D) Reportable compensation from	(E) Reportable compensatio from related	in I	an	(F) stimate nount other	of
		(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization: (W-2/1099-MIS 1099-NEC)		fr org an	pensa om the anizat d relat anizatio	e ion ed
				IL	0	ž	Ξe	4						
1b	Subtotal								17,500.		0.	6	0,0	00.
c d	Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A							0. 17,500.		0. 0.		0,0	0.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	iose	liste	ed al	bove	e) wh	no re	eceived more than \$100	1,000 of reportabl	e		Yes	0 No
3	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J</i> for s	uch individual										3		X
4 5	For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual			4		X
Sec	rendered to the organization? If "Yes," com tion B. Independent Contractors	plete Schedule	e J f	or si	uch ,	pers	son .					5		Х
1	Complete this table for your five highest co the organization. Report compensation for										ipens	ation 1	from	
	(A) Name and business	address	NC	ONE	3				(B) Description of s	ervices	С	(C ompe	C) nsatio	n
								_						
2	Total number of independent contractors (i \$100,000 of compensation from the organi	•	ot lii	nite	d to		se lis)	stec	above) who received n	nore than				
												Form	990 (2	2021)

132008 12-09-21

						'S	INTERNAT	IONAL INC		23-7328	667 Page
Pa	rt \	/111									
			Check if Schedule O	conta	ains a respo	nse	or note to any lir		(B)	(C)	[]
								(A) Total revenue	Related or exempt function revenue	Unrelated	Revenue excluded
nts nts	1	а	Federated campaigns		1a						
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues		1b						
Am (с	Fundraising events		1c						
ilar		d	Related organizations		1d						
Sin',			Government grants (conti								
utio		f	All other contributions, gifts,	-			600 701				
<u>e</u> ti			similar amounts not included				690,701.				
Du		-	Noncash contributions included in				>	690,701.			
<u>9 0</u>		n	Total. Add lines 1a-1f				Business Code	090,701			
e	2	а	PROGRAM/PROJE	сст	INCOM	E	900099	62,400.	62,400.		
vic	2	b	BROADCAST PRO			_	900099	10,985.			
Ser		č									
am		d				_					
Program Service Revenue		e									
Ъ		f	All other program service	rever	nue						
		g	Total. Add lines 2a-2f				►	73,385.	•		
	3		Investment income (inclue								
			other similar amounts)					26.	,		26
	4		Income from investment of		-						
	5		Royalties	· · · · · · ·							
					(i) Real		(ii) Personal				
	6		Gross rents	6a							
			Less: rental expenses	6b							
			Rental income or (loss) Net rental income or (loss	6c							
	7		Gross amount from sales of	"	(i) Securit		(ii) Other				
	'	u	assets other than inventory	7a	()		175,231.				
		b	Less: cost or other basis	14			,				
ne			and sales expenses	7b			51,618.				
evenue		с	Gain or (loss)	7c			123,613.				
Ě			Net gain or (loss)				►	123,613.	,		123,613
Other	8	а	Gross income from fundraisi	ng ev	ents (not						
ð			including \$		of						
			contributions reported on								
			Part IV, line 18			8a					
			Less: direct expenses			8b	L				
	•		Net income or (loss) from				>				
	9	а	Gross income from gamin	•		9a					
		h	Part IV, line 19 Less: direct expenses			9a 9b					
			Net income or (loss) from				►				
	10		Gross sales of inventory,								
			and allowances			10a					
		b	Less: cost of goods sold			10b					
			Net income or (loss) from			у	>				
Ś							Business Code				
Miscellaneous Revenue	11	а									
ent		b									
See		С							ļ		ļ
Ξ.			All other revenue				L				
			Total. Add lines 11a-11d					887,725.	73,385.	0.	123,639
13200	12		Total revenue. See instructio	7112			▶	007,723			Form 990 (202

9

Part IX Statement of Functional Expenses

BIBLE BASICS INTERNATIONAL INC

	Check if Schedule O contains a respons				L
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
~	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	17 173	17 173		
	individuals. See Part IV, lines 15 and 16	47,173.	47,173.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	77,500.	62,000.	11,625.	3,875
_	trustees, and key employees	77,500.	02,000.	11,025.	5,075
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
_	persons described in section 4958(c)(3)(B)	419,102.	382,703.	16,905.	10 /0/
7	Other salaries and wages	419,102.	504,705.	10,903.	19,494
8	Pension plan accruals and contributions (include				
~	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	17,407.	15,303.	1,293.	811
0	Payroll taxes	1/,4U/•	13,303.	1,293.	10
11	Fees for services (nonemployees):				
	Management				
b	Legal	45 202		45 202	
	Accounting	45,203.		45,203.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	3,048.	3,048.		
	column (A), amount, list line 11g expenses on Sch 0.)	24,581.	5,040.		24,581
12	Advertising and promotion	30,881.		22,182.	8,699
13	Office expenses	30,001.		22,102.	0,095
14	Information technology				
15	Royalties	34,259.		34,259.	
16		36,957.	27,484.	196.	9,277
17			27,404.	190.	5,411
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	56,378.		56,378.	
22	Depreciation, depletion, and amortization	4,343.		4,343.	
23	Insurance	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Ŧ, JŦJ•	
24	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
~	amount, list line 24e expenses on Schedule 0.)	94,749.	94,677.		72
a h		54,149.	54,077•		12
b					
c c					
d	All other evinences				
e	All other expenses	891,581.	632,388.	192,384.	66,809
25 De	Total functional expenses. Add lines 1 through 24e		0.52,500.	±, 504•	00,003
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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10 2021.05000 BIBLE BASICS INTERNATIONAL Form **990** (2021)

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BIBLE BASICS INTERNATIONAL INC Part X Balance Sheet

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

23-7328667 Page 11

			(A) Beginning of year		(B) End of year
	1	Cash pan interact bearing	4 64 0 5 0	1	176,551
	2	Cash - non-interest-bearing		2	309,079
	2	Savings and temporary cash investments		2	505,015
	4	Pledges and grants receivable, net	0 010	3	
	4 5	Accounts receivable, netLoans and other receivables from any current or former officer, director,		4	
	5				
		trustee, key employee, creator or founder, substantial contributor, or 35%		E	
	6	controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined		6	
~	7	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6 7	
Assets	7	Notes and loans receivable, net		8	
Ast	8	Inventories for sale or use	E 000	0 9	2,134
	9	Prepaid expenses and deferred charges		9	2,131
	IUa	Land, buildings, and equipment: cost or other	80		
	h	Land, buildings, and equipment cost of otherbasis. Complete Part VI of Schedule DLess: accumulated depreciation10b691, 3	57. 527,219.	10c	419,223
				11	417,225
	11	Investments - publicly traded securities		12	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	400
	15	Other assets. See Part IV, line 11		16	907,387
	16	Total assets. Add lines 1 through 15 (must equal line 33)		10	31,089
	17	Accounts payable and accrued expenses		17	51,005
	18	Grants payable		10	
	19	Deferred revenue		20	
	20	Tax-exempt bond liabilities			
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ties	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%		00	
Lia	~	controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
				05	
	26	of Schedule D Total liabilities. Add lines 17 through 25		25 26	31,089
	20	Organizations that follow FASB ASC 958, check here X	20,302.	20	51,005
es		and complete lines 27, 28, 32, and 33.			
anc	27	ki i ni i i i i i i i i i i i i i i i i	649,464.	27	614,200
3al	27 28		230,690.	21	262,098
Π	20	Net assets with donor restrictions		20	202,050
μ		and complete lines 29 through 33.			
P	20			20	
ets	29 20	Capital stock or trust principal, or current funds		29 20	
Ass	30 21	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31 32	876,298
z	32 33	Total net assets or fund balances Total liabilities and net assets/fund balances		32 33	907,387
	55	ו טומו וומטווווודט מווע דודו מטשביט ועדוע שמומדועדט		00	Form 990 (2021

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	1990 (2021) BIBLE BASICS INTERNATIONAL INC	23-732	8667	Paç	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
			0.01		<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1			$\frac{25}{01}$
2	Total expenses (must equal Part IX, column (A), line 25)	2			81.
3	Revenue less expenses. Subtract line 2 from line 1	3			56.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	880),1	54.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	876	5,2	98.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			_
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		Зb		
			Form	aan	2001)

Form **990** (2021)

132012 12-09-21

Department of the Treasury

Internal Revenue Service

(Form 990)

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. Go to www.irs.gov/Form990 for instructions and the latest information.

2021	
Open to Public Inspection	

OMB No. 1545-0047

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Nan	ne of t	the organization	E DACTOC T	ΝΠΕΌΝΙΛΠΙΟΝΙΛΙ	TNO				identification number 3 – 7 3 2 8 6 6 7
Pa	rt I	Reason for Public		NTERNATIONAL		his nart) S	ee instruction		5-1520001
								15.	
1 1	lorgan	ization is not a private found A church, convention of ch							
2	H	A school described in sect					·)(A)(I).		
2	H	A hospital or a cooperative				<u></u>			
4	H	A medical research organiz						Viii) Entor	the bosnital's name
-		city, and state:	allon operated in co	njunction with a nospita	ruescriber	a in Sectio			the hospital's hame,
5		An organization operated for	or the benefit of a co	llege or university owned	d or opera	ted by a d	overnmental ı	unit descrit	ped in
-		section 170(b)(1)(A)(iv). (C							
6		A federal, state, or local go		nental unit described in	section 17	70(b)(1)(A)	(v).		
7	Χ	An organization that norma						he general	public described in
		section 170(b)(1)(A)(vi). (C			5			5	,
8		A community trust describe		(1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org				ed in conju	unction with a	land-grant	college
		or university or a non-land-							
		university:							
10		An organization that norma	ally receives (1) more	than 33 1/3% of its sup	port from	contributic	ons, members	hip fees, a	nd gross receipts from
		activities related to its exen	npt functions, subjec	ct to certain exceptions;	and (2) no	more that	n 33 1/3% of	its support	from gross investment
		income and unrelated busin	ness taxable income	(less section 511 tax) fr	om busine	esses acqu	ired by the or	ganization	after June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)						
11		An organization organized a	and operated exclus	ively to test for public sa	afety. See	section 50	09(a)(4).		
12		An organization organized a	•	•	•				
		more publicly supported or							Check the box on
	_	lines 12a through 12d that				-		-	
а		Type I. A supporting orga	-	-	•				
		the supported organization			a majority	of the dire	ctors or truste	es of the s	supporting
		organization. You must o	-						
b		Type II. A supporting org	-				-		-
		control or management o			ame perso	ons that co	ontrol or mana	ige the sup	ported
		organization(s). You mus			in connoc	tion with	and functions	lly intograt	adwith
C		J Type III functionally inte	•					ny megrat	ea with,
d		its supported organizatio Type III non-functionally						rtad argan	ization(a)
u	L	that is not functionally int		• • •				-	
		requirement (see instruct	0	• •	•		-	u an allem	1001033
<u>م</u>		Check this box if the orga	-						
Ŭ		functionally integrated, or					x 1 ypc 1, 1 ypc	n, type m	
f	Ente	er the number of supported of	• •	inally integrated cappert					
		vide the following information	•	ed organization(s).			•••••		·
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in vour governi	inization listed ing document?	(v) Amount of	monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)
.									
Tota	31						1		

Schedule A (Form 990) 2021

Part II

BIBLE BASICS INTERNATIONAL INC

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

fails to qualify under the tests listed below, please complete Part III.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	805,556.	720,741.	747,335.	758,921.	690,701.	3,723,254.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
4	Total. Add lines 1 through 3	805,556.	720,741.	747,335.	758,921.	690,701.	3,723,254.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						3,723,254.
See	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	805,556.	720,741.	747,335.	758,921.	690,701.	3,723,254.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots	255.	130.	129.	29.	26.	569.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on \dots						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)			1,011.	310.		1,321.
11	Total support. Add lines 7 through 10						3,725,144.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	285,019.
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third, ⁻	fourth, or fifth tax	year as a section 5	501(c)(3)	
_	organization, check this box and stor		······			<u></u>	
	ction C. Computation of Publ						00.05
	Public support percentage for 2021 (14	99.95 %
	Public support percentage from 2020					15	99.95 %
16a	33 1/3% support test - 2021. If the o	-					
	stop here. The organization qualifies						
b	33 1/3% support test - 2020. If the c	•				•	
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact			-		-	
	meets the facts-and-circumstances te	•	• •		•		
b	10% -facts-and-circumstances tes						10% or
	more, and if the organization meets the				• •		
40	organization meets the facts-and-circ		•				
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 100, 17a, or 17t	b, check this box a		
						Schedule A (Form 990) 2021

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BIBLE BASICS INTERNATIONAL INC

(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.)

Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 per-							
	formed, or facilities furnished in any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that							
	are not an unrelated trade or bus-							
	iness under section 513							
1	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge \dots							
3	Total. Add lines 1 through 5							
7 a	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							
	Public support. (Subtract line 7c from line 6.)							
	ction B. Total Support							
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	6	e) 2021	(f) Total
	Amounts from line 6	(-) = - · ·	(-)	(-,	(-,		- -	(-)
	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties, and income from similar sources							
	Unrelated business taxable income							
D								
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
	Add lines 10a and 10b							
1	Net income from unrelated business activities not included on line 10b,							
	whether or not the business is							
	regularly carried on							
2	Other income. Do not include gain							
	or loss from the sale of capital assets (Explain in Part VI.)							
3	Total support. (Add lines 9, 10c, 11, and 12.)							
	First 5 years. If the Form 990 is for th	e organization's f	irst. second. third.	fourth. or fifth tax	vear as a section	501(c)	3) organizati	on.
	check this box and stop here							
Sec	ction C. Computation of Publ	ic Support Pe	ercentage					
	Public support percentage for 2021 (I			column (f))		15		Q
	Public support percentage from 2020					16		9
	tion D. Computation of Invest							,
	Investment income percentage for 20					17		ġ
8 0-	Investment income percentage from 2					18		7 in not
эа	33 1/3% support tests - 2021. If the	-						
	more than 33 1/3%, check this box an							
b	33 1/3% support tests - 2020. If the	•			•			
	line 18 is not more than 33 1/3%, che	ck this box and s	top here. The orga	anization qualifies a	as a publicly supp	orted c	rganization	▶∟_
0	Private foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structi	ons	►
202	23 01-04-22						Schedule A	(Form 990) 202
_				15				
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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b Schedule A (Form 990) 2021

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).
- 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on 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.
- 10a 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 line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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2021.05000 BIBLE BASICS INTERNATIONAL

Schedule A (Form 990) 2021 BIBLE BASICS INTERNATIONAL INC

Dor				
Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in</i> Part VI <i>how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, or trustees were allocated among the</i>			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (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			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		

3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If* "Yes," *describe in* **Part VI** *the role the organization*'s *supported organizations played in this regard.*

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).
- a ____ 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.*
- c L The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If* "Yes," *then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**
- 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.* 132025 01-04-22

3b | Schedule A (Form 990) 2021

3

2a

2b

За

Yes No

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Part V	Iype III Non-Functionally Integrated 509(a)(3) Support Check here if the organization satisfied the Integral Part Test as a qualifyi			Part VI) See instructio
• •	All other Type III non-functionally integrated supporting organizations must	•		
Section	A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 N	et short-term capital gain	1		
	ecoveries of prior-year distributions	2		
	ther gross income (see instructions)	3		
	dd lines 1 through 3.	4		
	epreciation and depletion	5		
	ortion of operating expenses paid or incurred for production or			
	ollection of gross income or for management, conservation, or			
	aintenance of property held for production of income (see instructions)	6		
	ther expenses (see instructions)	7		
	djusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Ag	ggregate fair market value of all non-exempt-use assets (see			
in	structions for short tax year or assets held for part of year):			
a Av	verage monthly value of securities	1a		
	verage monthly cash balances	1b		
	air market value of other non-exempt-use assets	1c		
	otal (add lines 1a, 1b, and 1c)	1d		
	iscount claimed for blockage or other factors			
	xplain in detail in Part VI):			
	cquisition indebtedness applicable to non-exempt-use assets	2		
	ubtract line 2 from line 1d.	3		
	ash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	ee instructions).	4		
	et value of non-exempt-use assets (subtract line 4 from line 3)	5		
	ultiply line 5 by 0.035.	6		
	ecoveries of prior-year distributions	7		
	inimum Asset Amount (add line 7 to line 6)	8		
	C - Distributable Amount			Current Year
1 A	djusted net income for prior year (from Section A, line 8, column A)	1		
2 Er	nter 0.85 of line 1.	2		
3 M	inimum asset amount for prior year (from Section B, line 8, column A)	3		
	nter greater of line 2 or line 3.	4		
	come tax imposed in prior year	5		
	istributable Amount. Subtract line 5 from line 4, unless subject to			
	nergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function		d Type III supporting are	unization (acc

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2021

132026 01-04-22

7

and 4c. 8 Breakdown of line 7: a Excess from 2017 b Excess from 2018

d Excess from 2020 e Excess from 2021

132027	01-04-22	

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4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pr		5		
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive	е		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	าร	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
c	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				

BIBLE BASICS INTERNATIONAL INC Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Current Year

Schedule A (Form 990) 2021

1

2 3

1 Amounts paid to supported organizations to accomplish exempt purposes

organizations, in excess of income from activity

Excess distributions carryover to 2022. Add lines 3j

Amounts paid to perform activity that directly furthers exempt purposes of supported

Administrative expenses paid to accomplish exempt purposes of supported organizations

Schedule A (Form 990) 2021

Section D - Distributions

2

3

Part VI Supplemental Informa Part IV, Section A, lines 1, 2, 3	3b, 3c, 4b, 4c, 5a, 6, 9a	anations required by Pa , 9b, 9c, 11a, 11b, and	rt II, line 10; Part II, line 11c; Part IV, Section B	, lines 1 and 2; Part IV, Section C,
line 1; Part IV, Section D, line Section D, lines 5, 6, and 8; a (See instructions.)	s 2 and 3; Part IV, Secti	on E, lines 1c, 2a, 2b, 3	a, and 3b; Part V, line 1	I; Part V, Section B, line 1e; Part V
SCHEDULE A, PART II,	LINE 10, EXE	LANATION FO	R OTHER INCO	OME:
MISCELLANEOUS INCOME				
2019 AMOUNT: \$ 1,01	1.			
2020 AMOUNT: \$ 310.				
32028 01-04-22		20		Schedule A (Form 990)

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

202⁻

Employer identification number

BIBLE BASICS	INTERNATIONAL INC	23-7328667
Organization type (check one):		

Filers of:	Section:
Form 990 or 990-EZ	\boxed{X} 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year 🕨 \$ _

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

23-7328667

BIBLE BASICS INTERNATIONAL INC

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
<u> 1</u>	SALEM BAPTIST CHURCH 429 S BROAD STREET WINSTON SALEM, NC 27101	\$19,460.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
2	CHARLES BLACK 11345 WINDSTAR CT NEW PORT RICHEY, FL 34654	\$ <u>15,400.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
3	OAKWOOD COMMUNITY CHURCH 11209 CASEY ROAD TAMPA, FL 33618	\$ <u>17,700.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
4	PAULINE MNIECKOWSKI 1244 KISKADEE CIR NEW PORT RICHEY, FL 34654	\$ <u>24,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
5	MICHAEL/CASEY GIBSON 14009 PARADISE LN DADE CITY, FL 33525	\$ <u>15,712.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
<u> </u>	HAROLD L DIMMITT 7333 BEECHBARK LN MECHANICSVILLE, VA 23111 1-21 22	\$ <u>16,900.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2021)	

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2021.05000 BIBLE BASICS INTERNATIONAL

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Schedule B	(Form	990)	(2021)	
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Type of contribution

Person Payroll Noncash

Person Payroll Noncash

(Complete Part II for noncash contributions.)

(d)

Type of contribution

(Complete Part II for noncash contributions.)

(d)

Type of contribution

Total contributions

(c)

Total contributions

(c)

Total contributions

\$

\$

\$

2021.05000 BIBLE BASICS INTERNATIONAL

Schedule	B (10111 990) (2021)			гау
Name of o	organization		Emplo	over identification numbe
BIBLE	BASICS INTERNATIONAL INC		23	8-7328667
Part I	Contributors (see instructions). Use duplicate copies of Part I	if additional space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribu	tions	(d) Type of contribution
7	JOHN MITTEN			Person X Payroll
	24043 TWISTER LN	\$19	,860.	Noncash
	BROOKSVILLE, FL 34602			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribu	tions	(d) Type of contribution
		\$		Person Payroll Noncash Complete Part II for noncash contributions.)
(a)	(b)	(c)	ti	(d)
	Name, address, and ZIP + 4	Total contribu		Type of contribution Person
(a)	(b)	(c)		(d)

Name, address, and ZIP + 4

(b)

Name, address, and ZIP + 4

(b)

Name, address, and ZIP + 4

Schedule B (Form	990) (2021)

Person Payroll Noncash

(Complete Part II for noncash contributions.)

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23

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No.

(a)

No.

(a)

No.

123452 11-11-21

	(See instructions.)	Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	Schedule B (Form 990) (202 ⁻
	(b) Description of noncash property given (b) Description of noncash property given	(b) (c) Description of noncash property given (C) (b) (C) (C) FMV (or estimate) (See instructions.) (See instructions.) (b) (C) (b) (C) (b) (C) (C) FMV (or estimate) (See instructions.) (See instructions.) (b) (C) (b) (C) (Description of noncash property given (C) (b) (C) (b) (C) (C) FMV (or estimate) (See instructions.) (See instructions.) (b) (C) (b) (C) (b) (C) (Description of noncash property given (C) (See instructions.) (See instructions.) (See instructions.) (See instructions.) (See instructions.) (See instructions.) </td

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

BIBLE BASICS INTERNATIONAL INC

Name of organization

Part II

Employer identification number

23-7328667

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2530___1

Schedule E	B (Form 990) (2021)			Page 4	
Name of or	rganization			Employer identification number	
BIBLE	BASICS INTERNATIONAL IN	IC		23-7328667	
Part III	Exclusively religious, charitable, etc., contribution	ons to organizations described in			
	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, ch	through (e) and the following line er naritable, etc., contributions of \$1,000 or	Itry. For organizations • less for the year. (Enter this info. (once.) ► \$	
	Use duplicate copies of Part III if additional s	pace is needed.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	scription of how gift is held	
		(e) Transfer of git	ft		
-	Transferee's name, address, an	d ZIP + 4	Relationship of t	ransferor to transferee	
(a) No.			(1)		
from Part I	(b) Purpose of gift	(c) Use of gift	(d) De:	scription of how gift is held	
-		(e) Transfer of git			
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
ľ					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De:	scription of how gift is held	
	(e) Transfer of gift				
-	Transferee's name, address, an	d ZIP + 4	Relationship of t	ransferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	scription of how gift is held	
-	(e) Transfer of gift				
	Transferee's name, address, an			ransferor to transferee	
ľ	· · · · · · · · · · · · · · · · · · ·				
123454 11-11	1-21	25		Schedule B (Form 990) (2021)	

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2021.05000 BIBLE BASICS INTERNATIONAL 2530___1

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form	990)
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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.

Go to www.irs.gov/Form990 for instructions and the latest information.



Employer identification number

23-7328667

Name of the organization

BIBLE BASICS INTERNATIONAL INC

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I 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 _____ 1 Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 5 are the organization's property, subject to the organization's exclusive legal control? No Yes 6 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 No impermissible private benefit? Yes 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 (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure 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 Held at the End of the Tax Year day of the tax year. a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure d listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 ___ Yes No violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 Yes No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and 9 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB 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 FASB 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 📃 🕨 💲 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB 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) 2021 LHA For Paperwork Reduction Act Notice. see the Instructions for Form 990. 132051 10-28-21 26

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2021.05000 BIBLE BASICS INTERNATIONAL 2530___1

		ASICS INTE						23-73			ge 2
	rt III Organizations Maintaining C								ts (contin	ued)	
3	Using the organization's acquisition, access collection items (check all that apply):	ion, and other record	ds, check a	iny of the i	following tha	it make s	significant	use of its			
а				an or eych	nange progra	am					
b					lange progra						
c		e									
4	Provide a description of the organization's c	ollections and explai	in how the	/ further th	ne organizati	on's eve	mot ouroc	nse in Par	• XIII		
5	During the year, did the organization solicit c										
Ŭ	to be sold to raise funds rather than to be m		-						Yes		No
Pa	rt IV Escrow and Custodial Arran										110
	reported an amount on Form 990, Pa	-		gamzatio		100 011		, r arrr,			
1a	Is the organization an agent, trustee, custod	lian or other intermed	diary for co	ntribution	s or other as	sets not	included		_		
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing tab	ole:							
									Amount		
С	Beginning balance						1c				
d	Additions during the year						. 1d				
е	0,										
f	•								1		
	Did the organization include an amount on F							L	Yes		No
	If "Yes," explain the arrangement in Part XIII								<u></u>		
Pa	rt V Endowment Funds. Complete	-			rm 990, Part (c) Two year			ware back	(e) Four	voare k	
	5 · · · · · · ·	(a) Current year	(b) Pric	or year	(C) 1 WU year	SDACK	(a) Three y	Ears Dack	(e) roui	yearsi	
	Beginning of year balance										
b											
c											
d	• • • • • • • • • • • • • • • • • • • •										
е	Other expenditures for facilities										
	and programs										
t	• • • • • • • • • • • • • • • • • • • •										
g			 	aalumn (a)) hold oo;						
2	Provide the estimated percentage of the cur Board designated or quasi-endowment	rent year end baland	%	column (a	l)) heid as.						
a b	_	%	70								
c		%									
U	The percentages on lines 2a, 2b, and 2c sho										
3a	Are there endowment funds not in the posse		ation that :	are held ar	nd administe	ered for t	he organiz	vation			
04	by:						no organiz	ation	Г	Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on Sch	edule R?							
4	Describe in Part XIII the intended uses of the								LI	-	
Pa	rt VI Land, Buildings, and Equipn	nent.									
	Complete if the organization answere	d "Yes" on Form 99	0, Part IV, I	ine 11a. S	ee Form 990), Part X,	line 10.				
	Description of property	(a) Cost or o basis (investr		(b) Cost basis (• •	ccumulate preciation	d	(d) Book	value	
1a	Land				5,000.	-1			35	5,00	0.
	Buildings				8,057.		327,64	45.),41	
	Leasehold improvements				1,384.		9,8			, .,55	
d					6,139.		353,88			2,25	
	Other						-				
	II. Add lines 1a through 1e. (Column (d) must e		X, column	(B), line 1	0c.)	<u></u>	<u></u>		419),22	23.

Schedule D (Form 990) 2021

132052 10-28-21

Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests	·		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990. Part IV. line	e 11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	·		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 000 Part IV line	11d Soc Form 990 Part X line 15	
	Description	The see form 990, Part A, line 15.	(b) Book value
	Jeschption		(D) DOOK value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total (Column (b) must equal Form 000, Port X, col. (D) line	. 15 \	•	
Total. (Column (b) must equal Form 990, Part X, col. (B) line	; 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25.	
1.(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line			
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote t	o the organization's financial statements t	hat reports the
organization's liability for uncertain tax positions under			

BIBLE BASICS INTERNATIONAL INC

hat reports the	

23-7328667 Page 3

Schedule D (Form 990) 2021

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Schedule D (Form 990) 2021

Part VII Investments - Other Securities.

Sche	dule D (Form 990) 2021 BIBLE BASICS INTERNATIONAL	INC	23-7328667 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per F	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5
Par	t XII Reconciliation of Expenses per Audited Financial Statem	· · ·	r Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
а	Donated services and use of facilities		4
b	Prior year adjustments		4
С	Other losses		4
d	Other (Describe in Part XIII.)		-
-	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1	
a	Investment expenses not included on Form 990, Part VIII, line 7b		4
b	Other (Describe in Part XIII.)	4b	4.1
_	Add lines 4a and 4b		4c
	Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 18.</i>)		5

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 X, LINE 2:

THE ORGANIZATION HAS BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE TO BE				
EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE				
CODE AND IS EXEMPT FROM FEDERAL INCOME TAXES, EXCEPT FOR TAXES ON				
UNRELATED BUSINESS INCOME GENERATED FROM UNRELATED TRADE OR BUSINESS				
ACTIVITIES. THE ORGANIZATION FILES INFORMATIONAL RETURNS IN THE U.S.				
FEDERAL JURISDICTION AND FLORIDA. WITH FEW EXCEPTIONS, THE ORGANIZATION IS				
NO LONGER SUBJECT TO U.S. FEDERAL, STATE AND LOCAL, OR NON-U.S. INCOME TAX				
EXAMINATIONS BY TAX AUTHORITIES FOR FISCAL YEARS BEFORE 2018. THE				
ORGANIZATION DOES NOT EXPECT A MATERIAL NET CHANGE IN UNRECOGNIZED TAX				
BENEFITS IN THE NEXT TWELVE MONTHS.				

132054 10-28-21

Schedule D		2021
	-	

	Schedule D (Form 990) 202
32055 10-28-21	30
41103 759574 2530	2021.05000 BIBLE BASICS INTERNATIONAL 25301

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Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' on Form 930, Part IV, line 14b. 1 For grantmakers. Describe in Part V the organization is procedures for monitoring the use of its grants and other assistance outside the United States. Image: Complete 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 following Part I line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (e) activity listed in (d) (for and incepperators in the region (f) Total (e) prophysics. (f) Total (f) the region (f) Total (f) Total (f) the region SOUTH ASIA - Arcitaking Fark, BANGLARESK, BHOTEM, INDLA, MALDIVES, SOUTH ASIA - ANGOLA, BENTH, BOTEMAN, BURKINA PASO, O 1 2 SRANTS 18, 916. SUB-SARABAN APRICA - ANGOLA, BENTH, BOTEMAN, BURKINA PASO, O 0 0 FRAVEL 10, 592. SUB-SARABAN APRICA - ANGOLA, BENTH, BOTEMAN, BURKINA PASO, O 0 0 FRAVEL 10, 592. SUB-SARABAN APRICA - ANGOLA, BENTH, BOTEMANA, BURKINA PASO, O 0 0 FRAVEL 21, 542. CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BABEDDA, ANGOLA, BENTH, BOTEMANA, BURKINA PASO, O 0 0 FRANTS 6, 715. CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BABEDDA, ANUBA, BABAMAS, O 0 0 FRANTS <t< th=""><th>BIBLE BASICS IN</th><th>TERNATIO</th><th>NAL INC</th><th></th><th></th><th>23-73286</th><th>67</th></t<>	BIBLE BASICS IN	TERNATIO	NAL INC			23-73286	67
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule F (Form 990) 2021

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261,772.

132071 12-20-21

and 3b)

sheets to Part I c Totals (add lines 3a

14341103 759574 2530

Attach to Form 990.	
► Go to www.irs.gov/Form990 for instructions and the latest information	tion.

Statement of Activities Outside the United States

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

OMB No. 1545-0047 0 l Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE F

(Form 990)

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

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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		CENTRAL AMERICA						
		AND THE CARIBBEAN						
		- ANTIGUA &	COMMUNITY RELIEF AND					
		BARBUDA, ARUBA,	BASE BIBLICA	21,542.	WIRE	0.		
		SOUTH ASIA -						
		AFGHANISTAN,	MISSIONS INDIA -					
		BANGLADESH,	CABLE TV AND GENERAL					
		BHUTAN, INDIA,	SUPPORT	18,916.	WIRE	Ο.		
		SUB-SAHARAN						
		AFRICA - ANGOLA,						
		BENIN, BOTSWANA,						
		BURKINA FASO,	TOGO HOPE RADIO	6,715.	WIRE	Ο.		
			recognized as charities by the					
exempt 501(c)(3) orga	anization by the IRS,	or for which the grantee	or counsel has provided a sec	ction 501(c)(3) ec	quivalency letter	►		

Page 2

Schedule F (Form 990) 2021

23-7328667

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

(a) Type of grant or assistance	(b) Region	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2021

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2021

132074 12-20-21

Schedule F (Form 990) 2021	BIBLE	BASICS	INTERNATIONAL	INC
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Supplemental Information
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c)
(estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

Part V

MISSIOSERVE HAS WRITTEN MISSIONARY PARTNERSHIP AGREEMENTS WITH ITS

MISSIONARIES. MISSIOSERVE RECEIVES REPORTS FROM IT'S GRANTEES ON A

REGULAR BASIS TO MONITOR HOW THE FUNDS ARE BEING DISBURSED.

132075 12-20-21

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

BIBLE BASICS INTERNATIONAL INC

Employer identification number 23-7328667

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND ADVANCING THE GOSPEL TO THE UNREACHED AND UNENGAGED.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

MISSIONS INDIA IS A PARTNER MINISTRY OF MISSIOSERVE ALLIANCE WHICH

INCLUDES TRANSLATION, PRINTING, AND DISTRIBUTION OF BIBLE BASICS

TEACHING MATERIAL, CABLE TV BROADCASTS, PRODUCTION AND AIRTIME,

MISSIONARY SUPPORT, CHURCH PLANTING AND CONSTRUCTION, BIBLE TRAINING

INSITITUTE, PASTORAL TRAINING, PREACHING, TEACHING, AND BIBLE

CONFERENCES.

EXPENSES \$ 18,916. INCLUDING GRANTS OF \$ 18,916. REVENUE \$ 5,000.

FORM 990, PART VI, SECTION B, LINE 11B:

THE COMPLETE IRS FORM 990 AND ALL APPROPRIATE SCHEDULES ARE SCANNED AND

EMAILED TO ALL GOVERNING BOARD MEMBERS FOR THEIR REVIEW BEFORE IT IS FILED.

ANY QUESTIONS OR COMMENTS ARE ANSWERED AND IF NEEDED CORRECTIONS ARE MADE.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD HAS A CONFLICT OF INTEREST POLICY. EACH MEMBER IS REQUIRED TO

SIGN IT ANNUALLY AND DISCLOSE ANYTHING THAT WOULD BE CONSIDERED A CONFLICT OF INTEREST.

36

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD REVIEWS THE COMPENSATION OF THE PRESIDENT/CEO AND HE IS

DESIGNATED TO SET ALL OTHER COMPENSATION PACKAGES

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

Schedule O (Form 990) 2021

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		FINANCI										
		ENGTH O										
FORM 9	90, PA	RT XII,	LINE 2	2C:								
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BIBLE BASICS INTERNATIONAL INC

Page 2

Employer identification number 23-7328667

Schedule O (Form 990) 2021

Name of the organization

2021 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

UKH J.	90 PAGE IU							990							
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS														
7	BUILDING	VARIOUS	SL	.000		16	398,057.				398,057.	319,147.		8,498.	327,645
	* 990 PAGE 10 TOTAL BUILDINGS						398,057.				398,057.	319,147.		8,498.	327,645
	MACHINERY & EQUIPMENT														
1	OFFICE EQUIPMENT	VARIOUS	SL	.000		16	53,991.				53,991.	46,992.		2,442.	49,434
2	TEACHING & PUBLISHING EQUIPMENT	VARIOUS	SL	.000		16	15,168.				15,168.	15,167.		0.	15,167
3	STUDIO EQUIPMENT	VARIOUS	SL	.000		16	15,294.				15,294.	14,707.		306.	15,013
5	OVERSEAS STAFF EQUIPMENT	VARIOUS	SL	.000		16	83,542.				83,542.	78,514.		1,171.	79,685
6	MANGO BUILDING BROADCASTING	VARIOUS	SL	.000		16	471,272.				471,272.	142,736.		38,069.	180,805
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						639,267.				639,267.	298,116.		41,988.	340,104
	TRANSPORTATION EQUIPMENT														
4	MOTOR VEHICLES	VARIOUS	SL	.000		16	26,872.				26,872.	8,405.		5,374.	13,779
	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT						26,872.				26,872.	8,405.		5,374.	13,779
	LAND														
9	LAND	VARIOUS		.000	НҮ	16	35,000.				35,000.			٥.	
	* 990 PAGE 10 TOTAL LAND						35,000.				35,000.	٥.		٥.	0
	OTHER														
8	BUILDING IMPROVEMENTS	VARIOUS	SL	.000		16	11,384.				11,384.	9,311.		518.	9,829.

128111 04-01-21

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2021 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

	90 PAGE 10	_						990	_	_	_				
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 PAGE 10 TOTAL OTHER						11,384.				11,384.	9,311.		518.	9,829.
	* GRAND TOTAL 990 PAGE 10 DEPR						1,110,580.				1,110,580.	634,979.		56,378.	691,357.

128111 04-01-21

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone