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Department of the Treasury Internal Revenue

Return of Organization Exempt From Income Tax

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

► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 Inspection

Servi	ce						
A Fo	rthe 2	008 calenda	r year, or tax year beginning 06	-01-2008 and ending 05-3	31-2009	D Sumlawaria	lentification number
B Che	ck ıf ap	· i icas	1100DITARD ACADELLI IIIC			D Employer Id	lentification number
☐ Add	ress cha	ange use I label				58-06255 E Telephone n	
☐ Nar	ne chan	ge print type.	or				
☐ Init	al returi	n Speci	ific Number and street (or P.O. h	ox if mail is not delivered to stree	et address) Roc	(404) 765	
┌ Ten	mınatıor	Instructions	I IDDZ KUGDI AVENUE			G Gross receip	pts \$ 76,684,682
┌ Am	ended re	eturn	City or town, state or country	, and ZIP + 4	L		
☐ App	lication	pending	COLLEGE PARK, GA 3033721	99			
			Name and address of Principa	l O fficer	11/->		
			s barbara egan	Officer	п(а)) Is this a group retur affiliates?	n for
			562 rugby avenue OLLEGE PARK,GA 30337				
	r-evemi		501(c) (3) 4 (insert no)	(a)(1) or	——————————————————————————————————————	Are all affiliates includ	,
						(If "No," attach a lis	
J W	eb site	: 🕨 www wood	dward edu		H(c)	Group Exemption N	umber F
К Туре	e of orga	anızatıon 🔽 Co	rporation trust association of	her 🕨	L Ye	ear of Formation 1900	1 State of legal domicile GA
		C	_				
Pa	t I		t be the organization's mission or	most significant activities			
		·	ACADEMY PROVIDES COLLE	-		STIIDENTS IN Pra-k	THROUGH GRADE 12
Governance		WOODWARD	ACADEMI I NO VIDEO COLLE	GET KETAKATOKT EDGE	ATTONTON	STODENTS IN THE K	THROUGH GRADE 12
<u> </u>							
<u>\$</u>	2	Check this bo	ox Γ if the organization discont	nued its operations or disp	osed of more	than 25% of its asse	ts
	3	Number of vo	ting members of the governing l	oody (Part VI, line 1a) .		3	28
න් ග්	4	Number of ind	dependent voting members of th	4	25		
Activities &	5	Total number	of employees (Part V, line 2a)	5	854		
贫	6	Total number	of volunteers (estimate if neces	ssary)		6	0
रॅ	7a ⁻	Total gross u	nrelated business revenue from	Part VIII, line 12, column	(C)	7a	31,352
	ь	Net unrelated	business taxable income from	Form 990-T, line 34		7b	-2,395
						Prior Year	Current Year
а.	8	Contribution	is and grants (Part VIII, line 1h)		10,112,760	3,920,750
Ĭ.	9	Program ser	vice revenue (Part VIII, line 2g)		51,199,378	53,533,335
Revenue	10		ıncome (Part VIII, column (A),			3,771,072	-3,943,400
ш.	11		ue (Part VIII, column (A), lines			4,445,728	78,249
	12	Total revenu 12)	ue—add lines 8 through 11 (mus	t equal Part VIII, column (A), line	69,528,938	53,588,934
	13	•	sımılar amounts paıd (Part IX, c	olumn (A), lines 1-3)		, ,	0
	14		d to or for members (Part IX, co				0
	15		ner compensation, employee bei		lines 5-		
\$		10)		, , , , , , , , , , , , , , , , , , , ,		36,705,164	37,992,236
Expenses	16a	Professional	l fundraising fees (Part IX, colui	nn (A), line 11e)			0
ਡੌ	b	(Total fundraisi	ing expenses, Part IX, column (D), line	25 1,706,936)			
	17	Other expen	ises (Part IX, column (A), lines	11a-11d, 11f-24f)		21,314,778	22,073,687
	18	Total expens	ses—add lines 13–17 (must eq	ual Part IX, line 25, columr	ı (A))	58,019,942	60,065,923
- 09	19	Revenue les	s expenses Subtract line 18 fro	om line 12		11,508,996	-6,476,989
Net Assets or Fund Balances						Beginning of Year	End of Year
6 6 6 6 7 6 8 6 8 6	20	Total assets	(Part X, line 16)			230,606,904	241,477,284
A P	21	Total liabilit	ies (Part X, line 26)		87,235,069	120,546,079	
žĬ	22	Net assets o	or fund balances Subtract line 2	1 from line 20	143,371,835	120,931,205	
Par	t II	Signatur	e Block	<u>'</u>			
			of perjury, I declare that I have exam				
DI	_		true, correct, and complete Declaration	n or preparer (other than officer)	ıs pased on all	1	arer nas any knowledge
Plea Sign		****** Signature of	f officer			2009-11-16 Date	
Here							
			GAN vice president name and title				
		.,	it flame and the				
		<u>,</u>		Date		Preparer's PTI	[N (See Gen Inst)
——Paic	<u> </u>	Preparer's signature		Date 2009-11-16	Check self-	Preparer's PTI	IN (See Gen Inst)

PO BOX 82472

CHERRY BEKAERT & HOLLAND LLP

Preparer's

Use

Only

Firm's name (or yours

if self-employed), address, and ZIP + 4

Phone no 🕨 (404) 762-7758

empolyed 🕨

EIN 🕨

Form 990 (2008) Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization's mission PROVIDED COLLEGE PREPARATORY EDUCATION	N FOR STUDENTS IN PRESC	CHOOL THROUGH GRADE TW	ELVE (APPROXIMATELY 3,000 STUD	ENTS)
2	Did the organization undertake any si the prior Form 990 or 990-EZ? .	gnıfıcant program serv	vices during the year wh	nich were not listed on	Yes ▼ No
	If "Yes," describe these new services	on Schedule O			
3	Did the organization cease conductin services?	g or make significant o	changes in how it condu	icts any program	Yes 🗸 No
	If "Yes," describe these changes on S	chedule O			
4	Describe the exempt purpose achieve Section 501(c)(3) and (4) organization others, the total expenses, and reven	ns and 4947(a)(1) tru	ists are required to rep		
4a	(Code) (Expenses \$ PROVIDED COLLEGE PREPARATORY EDUCAT		including grants of \$ ESCHOOL THROUGH GRADE ⁻) (Revenue \$ TWELVE (APPROXIMATELY 3,000 ST	53,533,335) UDENTS)
4b	(Code) (Expenses \$		ncluding grants of \$) (Revenue \$)
4c	(Code) (Expenses \$		ncluding grants of \$) (Revenue \$)
					·
4d	Other program services (Describe i	n Schedule O)			
	(Expenses \$	including grants of \$	3) (Revenue \$)
4e	Total program service expenses \$	53,380,833	Must equal Part IX, Lii	ne 25, column (B).	

art IV	Chec	klist of	Require	d Sc	hedules
		AIISL OI	IXC quii C	u J	cuuics

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes		
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o	
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο	
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5			
6	Did the organization maintain any donor advised funds or any accounts where 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		Νο	
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	Yes		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No	
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes		
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes		
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes		
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes		
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νo	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		Νο	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		N o	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Νο	
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		N o	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo	
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο	
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νο	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a	Yes		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο	
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο	
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	Yes		

Part IV Checklist of Required Schedules (Continued)

			163	110
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
	IV	28a	Yes	
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	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		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
36	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		Νο
37	Did the organization conduct more than 5 percent 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,	37		Νο
	Part VI 📆			

Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal				
	of U.S. Information Returns . Enter -0- if not applicable				
	1a	129			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0			
_	Did the organization comply with backup withholding rules for reportable payments to vendors				
	gaming (gambling) winnings to prize winners?		1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements filed for the calendar year ending with or within the year covered by this	854			
h	return				
U	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.		2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the yea	r covered by this			
	return?	⊢	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		3Ь	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature over, a financial account in a foreign country (such as a bank account, securities account, or account)?	other financial	4a		Νο
b	If "Yes," enter the name of the foreign country				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Fo Financial Accounts.	reign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	year?	5a		Νo
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelt	er transaction?	5ь		Νo
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity R</i>	-			
	Tax Shelter Transaction?		5с		
6a	Did the organization solicit any contributions that were not tax deductible?		6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such of were not tax deductible?	_	6Ь		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution more?	of \$75 or	7a		Νο
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for wh	•			
_	file Form 8282?		7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premium	ns on a personal			
	benefit contract?		7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene	fit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as r	required?	7g		Νo
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form		,,		N. a
8	required?	· · · · · ⊢	7h		No
0	supporting organizations. Did the supporting organization, or a fund maintained by a sponsorin				
	excess business holdings at any time during the year?		8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		1		
	Did the organization make any taxable distributions under section 4966?	.	9a		
ь			9b		
10	Section 501(c)(7) organizations. Enter		\neg		
	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				
11	Section 501(c)(12) organizations Enter				
а	Gross income from members or shareholders				
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo	orm 1041? 1	.2a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the		T		
	year 12b				

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A.	Governing	Body a	nd Mana	geme	ent			
						_		

			Yes	No				
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.							
1a	Enter the number of voting members of the governing body 1a 28							
Ь	Enter the number of voting members that are independent 1b 25							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο				
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No				
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo				
6	Does the organization have members or stockholders?							
7a	a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?							
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	the governing body?	8a	Yes					
ь	each committee with authority to act on behalf of the governing body?	8b	Yes					
9a	Does the organization have local chapters, branches, or affiliates?	9a		Νo				
Ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b						
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes					
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		No				

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	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			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed GA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website another's website upon request
- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization sarah cavender 1662 RUGBY AVENUE

college park, GA 303372119 (404) 765-4023

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- * List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- * List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

The check this box in the organization and i	(B) Average hours per week	Posit	(C) chec	:k al				(E)	(F)
(A) Name and Title		Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII Continued

	(B) Average hours per week	(C) Position (check all that apply)							(E)	(F)
(A) Name and Title		Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
			<u> </u>							
			-							
				\vdash			\vdash			
			+				\vdash			
			1							
1b Total							 -	1,513,700		229,338

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►11

			Yes	No				
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee							
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo				
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such							
	ındıvıdual	4	Yes					
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule I for such person	5		Νο				

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

\$100,000 or compensation from the organization		
(A) Name and business address	(B) Description of services	(C) Compensation
DUNN SOUTHEASTDBA RJ GRIFFIN & CO 800 MOUNT VERNON Hwy ATlanta, GA 30328	GENERAL CONTRACTOR	8,021,279
sg contracting inc 1170 peachTREE stNEste 2350 atlanta, GA 30309	general contractor	6,073,000
perkins & will 1382 peachTREE street ne atlanta, GA 30309	architects	1,251,074
the ray landers co inc 482 hannah road newnan, GA 30263	landscaping	665,734
MARTIN ELECTRICAL SERVCIES Inc 376 JONES ROAD HAMPTON, GA 30228	ELECTRICAL SERVICES	276,793
2 Total number of independent contractors (including those in 1) who received more than \$ from the organization	'	15

Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated can	npaigns 1a					
ats uts	b	Membership d	ues					
gra		Fundraising ev	1b					
æ. ∰		runuraising ev	1c					
<u> </u>	d	Related organ	izations1d					
n M M M	e	Government gran	its (contributions) 1e					
ibutio ther:	f		tions, gifts, grants, and not included above 1f	3,920,750				
a t	g	Noncash cont	rıbutıons ıncluded ın					
S ၕ		lines 1a-1f \$			2 020 750			
	h	Total (Add line	es 1a-1f)	· · · · ·	3,920,750			
an a				Business Code				
эш	2a	TUITION AND FEE		900,099	52,702,236	52,702,236		
, S 28	ь	AUXILiary ACTIVI	TIES	900,099	831,099	831,099		
- 33 - 33	С							
er F	d							
8	e							
ाब इ	f	All other prog	ram service revenue					
ç	g	Total. Add line ► \$ 53,533,33	es 2a-2f 5					
	3		come (including divi	dends, interest				
		other sımılar a	amounts)	[3,052,607			3,052,607
	4	Income from inve	estment of tax-exempt b	ond proceeds				
	_	Dovaltica		►				
	5	Royalties .	(ı) Real	(II) Personal				
	6a	Gross Rents	67,946	(II) F el solial				
	ь	Less rental	59,741					
	b c d e f g h 2a b c d e f g 3 4 5 6a b c d 2 8a b c d 2 10a b c 10a b c 11a b c 12	expenses Rental income	8,205					
Other Revenue Service Revenue Service Revenue Service Revenue 10 11 11 11 12 13 14 15 16 16 17 17 18 18 18 19 10 11 11 11 11 11 11 11 11	_	or (loss)	ome or (loss)		8,205			8,205
		Net rental inco	ome or (loss)	· · · · ·	0,203			0,203
	_	Grace amount	(i) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	16,040,000					
	ь	Less cost or other basis and sales expenses	22,938,786	97,221				
	с	Gain or (loss)	-6,898,786	-97,221				
	d	Net gain or (lo	ss) 	. ▶	-6,996,007	-97,221		-6,898,786
	8a	Gross income events (not in \$	from fundraising cluding					
Other Revenue Program Service Revenue and other similar amounts and other similar amounts		of contribution 1c) See Part 1	ns reported on line IV, line 18 ie G if total exceeds					
		\$15,000	a					
her	ь		xpensesb					
₹	С	Net income or	(loss) from fundrais	ıng events ►				
Other Revenue	9a	Gross Income activities See Complete Sched exceeds \$15,00	e part IV , line 19 dule G if total					
			a					
	shring and other similar amounts. 3 4 5 6a b c d 7a b c d 8a b c 10a b c de	Less directe	xpensesb					
	С	Net income or	(loss) from gaming a	activities				
Other Revenue	10a	Gross sales or returns and al						
	h	less cost of	a goods sold b					
	, c		(loss) from sales of	inventory				
		Miscellaneou		Business Code				
	11a	MISC INCOM		900,099	38,692	38,692		
	ь	MISC INCOM		531,390	31,352		31,352	
	С							
Other Revenue	ے ا	All other reve	nue					
			es 11a-11d	·				
				\$ 70,044				
	12	8c,	. Add lines 1h, 2g, 3		53,588,934	53,474,806	31,352	-3,837,974

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re				
	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21		·		<u> </u>
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	938,774		708,061	230,713
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	30,194,954	27,813,140		743,412
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,164,317	1,120,302	29,750	14,265
9	Other employee benefits	3,392,475	3,151,169	165,166	76,140
10	Payroll taxes	2,301,716	2,061,954	169,242	70,520
11	Fees for services (non-employees)				
а	Management				
b	Legal	281,073		281,073	
С	Accounting	49,800		49,800	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	117,479		117,479	
13	Office expenses	9,666		6,910	2,756
14	Information technology	759,527	759,527		
15	Royalties				
16	Occupancy	1,242,432	1,242,432		
17	Travel	6,292		6,292	
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings				
20	Interest	5,112,157	5,112,157		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,609,075	3,609,075		
23	Insurance	289,827		289,827	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	EDUCATIONAL PROGRAM EXP	3,552,550	3,552,550		
ь	EQUIPMENT RENTAL & MAIN	2,517,354	2,517,354		
c	DINING EXPENSES	1,543,231	1,543,231		
d	OTHER FUNDRAISING EXPEN	569,130			569,130
e	PROFESSIONAL DEVELOPMEN	531,929		531,929	
f	All other expenses	1,882,165	897,942	984,223	
25	Total functional expenses. Add lines 1 through 24f	60,065,923	53,380,833	4,978,154	1,706,936
26	Joint Costs. Check if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X	Balance	Shoot

						(A) Beginning of year		(B End of	
	1	Cash—non-interest-bearing				Degining of year	1	Liid Oi	year
	2	Savings and temporary cash investments				16.332.413		2	8,108,178
	3	Pledges and grants receivable, net							4,719,973
	4	Accounts receivable, net		· · · ·	• •				1,339,395
	5	Receivables from current and former officers, directors, trustee		emploves	s or	,			.,,
		other related parties Complete Part II of Schedule L		•			5		
	6	persons described in section 4958(c)(3)(B) Complete Part II of					6		
	7	Notes and loans receivable, net					7		
	8	Inventories for sale or use	•			· · · · · · · · · · · · · · · · · · ·	8		121,284
şte	9	Prepaid expenses and deferred charges				4,323	9		32,294
Assets	10a	Land, buildings, and equipment cost basis	10a	14	9,660,196				
	ь	Less accumulated depreciation Complete Part VI of							
	-	Schedule D	10b	3	34,841,890	93,746,269	10 c	11-	4,818,306
	11	Investments—publicly traded securities				93,050,087	11	7-	4,237,107
	12	Investments—other securities See Part IV, line 11 <i>Complete B Schedule D</i>	Part VI	I of		18,279,568	12	1:	3,994,747
	13	Investments—program-related See Part IV, line 11 Complete of Schedule D .	Part VI	!II			13		
	14	Intangible assets					14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule				3,249,680	15	,	4,106,000
	16	D Total assets. Add lines 1 through 15 (must equal line 34)				230 606 904	-	24	1,477,284
	17								7,451,182
	18	Accounts payable and accrued expenses .		0,010,301	-		7,431,102		
	19	Grants payable		6 674 702			8,764,012		
	20	Deferred revenue		· · · ·			6,600,000		
Ø.		·	•			00,000,000			0,000,000
Liabilities	21 22	Escrow account liability $\mbox{\it Complete Part IV of Schedule D}$. Payable to current and former officers, directors, trustees, key			21				
jab		employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L					22		
	23	Secured mortgages and notes payable to unrelated third partie							
	24	Unsecured notes and loans payable							
	25	Other liabilities Complete Part X of Schedule D				5,743,986			7,730,885
	26	Total liabilities. Add lines 17 through 25	16,332,413 2 5,651,619 3 187,492 4 187,492 19 187,49		0,546,079				
_		Organizations that follow SFAS 117, check here ▶ ✓ and com	plet e l	lines 27					
		through 29, and lines 33 and 34.	•						
e D	27	Unrestricted net assets				128,396,596	27	10	6,853,026
Balances	28	Temporarily restricted net assets				6,260,851	28		4,767,877
Þ	29	Permanently restricted net assets				8,714,388	29	!	9,310,302
		Organizations that do not follow SFAS 117, check here ► □ a lines 30 through 34.	nd cor	nplet e					
O.	30	Capital stock or trust principal, or current funds					30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund							
4 00 €	32	Retained earnings, endowment, accumulated income, or other f		·					
Net /	33	Total net assets or fund balances				143,371,835		12	0,931,205
Ž	34	Total liabilities and net assets/fund balances					-		1,477,284
	-								
Pa	rt XI	Financial Statements and Reporting						_	
								Yes	No

Dart VI	Einancial	Statements	and D	oporting
7. 1 4 2 . 1 2	FINANCIAL	Statements	ann R	emmetiliki.

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νο
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		N o
b	If "Yes," did the organization undergo the required audit or audits?	3b		

OMB No 1545-0047

Open to Public Inspection

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue

1

Service

Name of the organization WOODWARD ACADEMY Inc

Employer identification number 58-0625584

Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

A church, convention of churches, or association of churches described in Section 170(b)(1)(A)(i).

The organization is not a private foundation because it is (Please check only **one** organization)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)

nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

2	굣	A school d	escribed in Sec	tion 170(b)(1)(A)(ii). (Attac	ch Schedu	ıle E)								
3	Γ	A hospital	or a cooperativ	e hospital service organizati	ıon descrı	bed in Sec	ct ion 170(b)(1)(A)(i	i ii). (Atta	ch Schedul	e H)			
4	Γ	A medical	research organ	ızatıon operated ın conjunctı	on with a	hospital d	lescribed i	n Sect ion	170(b)(1)(A)(iii). E	nter the			
		hospital's	name, city, and	state										
5	Γ	An organız	ation operated	for the benefit of a college or	universit	y owned c	or operated	by a gove	ernmenta	l unıt desc	rıbed ın			
		Section 17	0(b)(1)(A)(iv).	. (Complete Part II)										
6	Γ	A federal, s	state, or local g	overnment or governmental	unıt desci	rıbed ın S e	ection 170	(b)(1)(A)	(v).					
7	Γ	An organız	atıon that norm	ally receives a substantial p	art of its	support fr	om a gove	rnmental u	ınıt or fro	m the gene	ral publi	с		
		described	n Section 170 (b)(1)(A)(vi) (Complete Par	tII)									
8	Γ	A commun	ıty trust descril	oed in Section 170(b)(1)(A)	(vi) (Con	nplete Par	tII)							
9	Γ	An organiz	atıon that norm	ally receives (1) more than	3 3 1/3% 0	of its supp	ort from c	ontributior	ns, memb	ership fees	, and gro	ss		
		receipts fro	om activities re	lated to its exempt functions	s—s ubject	to certai	n exceptio	ns, and (2) no more	than 331/	3% of			
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses												
		acquired b	y the organizati	on after June 30, 1975 See	Section 5	509(a)(2).	(Complet	e Part III)					
10	Γ	acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See Section 509(a)(4). (See instructions)												
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of												
		one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check												
		the box that describes the type of supporting organization and complete lines 11e through 11h a												
e	Г		•	· · · · · · · · · · · · · · · · · · ·			•	tly or indirectly by one or more disqualified persons						
Ī	'	other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or												
		section 50												
f		If the organ		ed a written determination fro	om the IRS	S that it is	a Type I,	Type II o	r Type II	I supportin	ig organi:	zation,		
g				as the organization accepte	d anv gift	or contrib	ution from	anv of the	<u> </u>			ļ		
9		following persons?												
		(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No												
		and (III) be	low, the govern	ing body of the the supported	d organıza	ition?				11g	(i)			
		(ii) a famıl	y member of a p	erson described in (i) above	13					11g(ii)	<u> </u>		
		(iii) a 35%	controlled ent	ity of a person described in ((ı) or (ıı) a	bove?				11g(iii)			
h		Provide the	following infor	mation about the organizatio	ns the or	ganızatıon	supports							
			T	1	1		T		1		1			
		ame of	(ii) EIN	(iii) Type of organization		[s the	1	ou notify		Is the	1	nount of		
		oorted nization		(described on lines 1-9 above or IRC section	_	ation in Iisted in	_	anızatıon i) of your		zation in organized	supp	ort?		
	Organ	iizatioii		(See Instructions))		verning	1 -	port?		e US?				
						ment?								
					Yes	No	Yes	No	Yes	No				
Γota	ıl													
				•	•	•	•	•	•	•	•			

Part II	Support Schedule for Organizations Described in IRC 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.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					 		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in							
	Part IV)							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns)		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization qualifies a				,			▶ □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							► □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, check this	oox an	u see	▶ □
	ınstructions							F-1

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
				-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

DLN: 93493352002009

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasurv Internal Revenue Service

► Attach to Form 990. To be completed by organizations that

Supplemental Financial Statements

answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization **Employer identification number** WOODWARD ACADEMY Inc 58-0625584 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate Contributions to (during year) Aggregate Grants from (during year) 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 ┌ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a Total number of conservation easements 2 2b 1 16 Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c 2 Number of conservation easements included in (c) acquired after 8/17/06 2d 0 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? 220 00 Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 272,104 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section

the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes

- If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

-\$

Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2008

Part		Organizations Maintaining Co	llections of Art,	Hist	<u>tori</u>	<u>cal Trea</u>	sures, or Otl	ner	<u>Similar</u>	Asse	ts (co	ntınued)
3		g the organization's accession and other s (check all that apply)	records, check any o	of the	e foll	owing that	are a significan	tuse	of its co	llection	ו	
а	\sqcap	Public exhibition		d	Γ	Loan or e	xchange progra	ms				
b	Γ	Scholarly research		e	Γ	Other						
С	Γ	Preservation for future generations										
4	Prov Part	ide a description of the organization's co XIV	llections and explain	how	they	further th	e organization's	exer	mpt purpo	se in		
5		ng the year, did the organization solicit o ts to be sold to raise funds rather than t						sımıla	ar	Г	Yes	┌ No
Par	t IV	Trust, Escrow and Custodial A Part IV, line 9, or reported an am					ganızatıon an	swer	ed "Yes	" to Fo	orm 9	90,
1a		e organization an agent, trustee, custod ded on Form 990, Part X?	ıan or other ıntermedı	ary	for c	ontribution	ns or other asset	s no	t	Г	Yes	┌ No
b	If"Y	es," explain why in Part XIV and comple	te the following table				_					
										A mou	ınt	
С	Begi	nning balance					1	С				
d	Add	itions during the year					1	d				
e	Dıst	ributions during the year					1	e				
f	Endi	ng balance					1	f				
2a	Dıd t	he organization include an amount on Fo	rm 990, Part X, line 2	21?						Γ	Yes	┌ No
b	If "Y	es," explain the arrangement in Part XIV										
Pai	rt V	Endowment Funds. Complete i									\ F\	DI-
1a	Bogi	nning of year balance	(a)Current Year 9,824,783	(D)	Prior '	rear (c)Two Years Back	(a)ın	ree Years B	аск (е)Four Ye	ars back
b		tributions	382,926									
c		stment earnings or losses	-278,615									
d		nts or scholarships	<u> </u>									
e		er expenditures for facilities										
	and	programs										
f	Adm	unistrative expenses										
g		of year balance	9,929,094									
2	Prov	ide the estimated percentage of the year	r end balance held as									
а	Boar	d designated or quasi-endowment 🕨	10 000 %									
b	Perm	nanent endowment 🕨 90 000 %										
c	Term	n endowment 🕨										
3a		there endowment funds not in the posses	ssion of the organizati	on t	hat a	re held an	d administered f	or th	е			NI-
		nization by nrelated organizations		_					[3a(i)	Yes	No No
		elated organizations							` . [*] . [*]	3a(ii)		No
b		es" to 3a(II), are the related organization			ched	ule R?				3b		
4	Desc	cribe in Part XIV the intended uses of the	e organization's endo	wme	nt fu	nds			-			
Par	t VI	Investments—Land, Buildings	s, and Equipment	t. S	ee F	orm 990,	Part X, line 1	0.				
		Description of investment				Cost or other (investment		er ((c) Deprecia	ation	(d) Boo	ok value
1a l	and					2,229,00	0 10,324,1	43			12	2,553,143
b E	Buildii	ngs					127,163,6	62	27,30	4,909	99	9,858,753
c l	ease	hold improvements		.								
d E	Equip	ment					9,906,8	91	7,53	6,981		2,369,910
e (Other						36,5	00				36,500

uncertain tax positions under FIN 48

Part VII Investments—Other Securities. See	Form 990, Part X, line 1		
(a) Description of security or cateory (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value	
nancial derivatives and other financial products		Cost of end-of-year market value	
osely-held equity interests			
ther CASH SURRENDER LIFE INSURANCE	194,677		
her SHORT TERM INVESTMENTS	49,066		
ther ASSETS HELD IN TRUST	379,326		
ther KING STREET CAPITAL - CLASS S SERIES 4 4 78 SHS)	682		
ther KING STREET CAPITAL - CLASS S SERIES 5 9 41 SHS)	5,575		
ther kING STREET CAPITAL - CLASS S SERIES 7 99 SHS)	872		
otal. (Column (b) should equal Form 990, Part X, col (B) line 12)	13,994,747		
art VIII Investments—Program Related. See	e Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
		_	
otal. (Column (b) should equal Form 990, Part X, col (B) line 13)			
art IX Other Assets. See Form 990, Part X, III	ne 15.		
(a) Descrip		(b) Book value	
otal. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X	(, line 25.		
(a) Description of Liability	(b) A mount		
deral Income Taxes			
ABILITIES DUE TO BENEFICIARIES	125,896		
e to other funds	2,888,476	1	
set retirement obligation	171,996		
VAP INTEREST AGREEMENTS	4,544,517		
otal. (Column (b) should equal Form 990, Part X, col (B) line 25)	7,730,885		

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	53,588,934
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	60,065,923
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-6,476,989
4	Net unrealized gains (losses) on investments	4	-15,963,641
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-15,963,641
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-22,440,630
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	40,887,117
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	3,261,824
3	Subtract line 2e from line 1	3	37,625,293
4	A mounts 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 . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	15,963,641
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	53,588,934
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	63,390,822
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	-	
Ь	Prior year adjustments	-	
c	Losses reported on Form 990, Part IX, line 25	-	
d	Other (Describe in Part XIV)	-	
е	Add lines 2a through 2d	2e	3,324,899
3	Subtract line 2e from line 1	3	60,065,923
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	4	
Ь	Other (Describe in Part XIV)	-	
С	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	60,065,923

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
Part II, Line 3	Explanation of Changes to Conservation Easements	LINE 9 THERE IS NO SPECIAL ACCOUNTING FOR THE SCHOOL'S CONSERVATION EASEMENTS THE TWO HISTORICAL STRUCTURES ARE USED IN THE NORMAL OPERATIONS OF THE SCHOOL AS OFFICES THE MONITORING, INSPECTING AND ENFORCING OF EASEMENTS IS PART OF THE NORMAL HOUSEKEEPING AND MAINTENANCE ACTIVITIES OF THE SCHOOL'S FACILITIES DEPARTMENT THE HISTORICAL CHARACTER OF THE BUILDINGS IS MAINTAINED WHEN REPAIRS AND MAINTENANCE ARE MADE TO THE BUILDINGS THERE IS AN ENDOWED FUND FOR THE MAINTENANCE OF ONE OF THE BUILDINGS AN AMOUNT EQUAL TO 4% OF THE MARKET VALUE OF THE FUND IS UTILIZED EACH YEAR TO PARTIALLY OFFSET THE COSTS OF MAINTAINING THIS BUILDING
Part V , Line 4	Description of Intended Use of Endowment Funds	THE SCHOOL'S ENDOWMENT FUNDS ARE INTENDED FOR USE IN PROVIDING FINANCIAL AID TO WOODWARD ACADEMY STUDENTS, AWARDS TO OUTSTANDING WOODWARD ACADEMY STUDENTS, FUNDS FOR CURRICULUM ENRICHMENT AND ENHANCEMENT IN FACULTY SALARIES AND MAINTENANCE OF THE ALUMNI CENTER
		

Part XIV Supplemental Information(continued)											
Ident if ier	Return Reference	Explanation									
Part II, Line 3	Explanation of Changes to Conservation Easements	LINE 9 THERE IS NO SPECIAL ACCOUNTING FOR THE SCHOOL'S CONSERVATION EASEMENTS THE TWO HISTORICAL STRUCTURES ARE USED IN THE NORMAL OPERATIONS OF THE SCHOOL AS OFFICES THE MONITORING, INSPECTING AND ENFORCING OF EASEMENTS IS PART OF THE NORMAL HOUSEKEEPING AND MAINTENANCE ACTIVITIES OF THE SCHOOL'S FACILITIES DEPARTMENT THE HISTORICAL CHARACTER OF THE BUILDINGS IS MAINTAINED WHEN REPAIRS AND MAINTENANCE ARE MADE TO THE BUILDINGS THERE IS AN ENDOWED FUND FOR THE MAINTENANCE OF ONE OF THE BUILDINGS AN AMOUNT EQUAL TO 4% OF THE MARKET VALUE OF THE FUND IS UTILIZED EACH YEAR TO PARTIALLY OFFSET THE COSTS OF MAINTAINING THIS BUILDING									
Part V , Line 4	Description of Intended Use of Endowment Funds	THE SCHOOL'S ENDOWMENT FUNDS ARE INTENDED FOR USE IN PROVIDING FINANCIAL AID TO WOODWARD ACADEMY STUDENTS, AWARDS TO OUTSTANDING WOODWARD ACADEMY STUDENTS, FUNDS FOR CURRICULUM ENRICHMENT AND ENHANCEMENT IN FACULTY SALARIES AND MAINTENANCE OF THE ALUMNI CENTER									

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization WOODWARD ACADEMY Inc

Schools

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

2008
Open to Public

Employer identification number

58-0625584

	, 55 552555.		YES	NO
			1.25	
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"			
	please explain	3	V	
	THE APPLICATION FOR ADMISSION AND ALL THE SCHOOL'S ADVERTISING TO SOLICIT POTENTIAL STUDENTS STATES THAT THE SCHOOL HAS A NONDISCRIMINATORY POLICY OF ADMISSION THE SCHOOL'S ADMISSIONS WEBSITE STATES THAT SCHOOL HAS A NONDISCRIMINATORY POLICY		Yes	
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
ŀ	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
•	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
c	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
5	Does the organization discriminate by race in any way with respect to			
ā	Students' rights or privileges?	5a		Νo
ŀ	Admissions policies?	5b		No
•	Employment of faculty or administrative staff?	5c		No
C	Scholarships or other financial assistance?	5d		No
•	Educational policies?	5e		Νo
f	Use of facilities?	5f		No
ç	a Athletic programs?	5g		No
ŀ	other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
		_		
		_		
	Does the organization receive any financial aid or assistance from a governmental agency?	6a		No
ŀ	Has the organization's right to such aid ever been revoked or suspended?	6b		Νο
-	If you answered "Yes" to either 6a or b, please explain using an attached statement			
,	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05	_		
	of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," attach an explanation	7	Yes	

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DLN: 93493352002009

OMB No 1545-0047

2008

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SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service ► Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

Statement of Activities Outside the United States

	ne of the organization O DWARD A CADEMY Inc					Employer ide	ntification numbe	r
VVO (ODWARD ACADEMY INC					58-0625584	1	
Pā	General Infor "Yes" to Form 9			de the United States	. Complete	e if the orgar	nization answere	d
1	For grantmakers. Doe assistance, the grants or assistan	rıa used to a	ward	√ No				
2	For grant makers. Descri United States	be in Part IV the	organization's pr	ocedures for monitoring th	ne use of gran	nt funds outsıd	e the	
3	Activites per Region (U	se Schedule F-1	(Form 990) ıf add	ditional space is needed)				
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	ıs a progr describe sp	ty listed in (d) am service, pecific type of s) in region	(f) Total expendit region	ures ir
SUE	3-SAHARAN AFRICA	0	0	PROGRAM SERVICES				C

Totals .

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
	•	SUB-SAHARAN AFRICA	COMPUTER FOR CLASSROOMS AND AN INFIRMARY	40,56	WIRE TRANSFER		SALARIES OF SCHOOL EMPLOYEES PAID DURING TRIP TO TERRANOVA SCHOOL TO INSTALL THE COMPUTERS	SALARY RATES

	F-1 (Form 990) if a			tea States. Complete	if the organization a	inswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+					
		1					
		+					
			•				

Schedule F (Form 990) 2008

Complete this part t	o provide the information required	ın Part I, line 2, and any other additional information.
Identifier	ReturnReference	Explanation

Software ID:

Software Version:

EIN: 58-0625584

Name: WOODWARD ACADEMY Inc

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		AFRICA	COMPUTER FOR CLASSROOMS AND AN INFIRMARY	40,561	WIRE TRANSFER		SALARIES OF SCHOOL EMPLOYEES PAID DURING TRIP TO TERRANOVA SCHOOL TO INSTALL THE COMPUTERS	SALARY RATES

Return to Form

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DLN: 93493352002009

Schedule J

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008
Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization
WOODWARD ACADEMY Inc

Employer identification number

58-0625584

Рa	Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments	ᅜ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "I			1b	Yes	
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive		, , , , , , , , , , , , , , , , , , ,	2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all t	hat appl	у			
	Compensation committee	<u> </u>	Written employment contract			
	Independent compensation consultant	<u> </u>	, ,			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	Part VI	I, Section A, line 1a			
а	Receive a severance payment or change of control	payment	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ental non	nqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-b	ased co	empensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	rovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	omplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
ь	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		No
Ь	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III			8		No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	FW-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
MS BARBARA EGAN	(ı) (ıı)	246,625			22,000	17,717	286,342	
MR DAVID R MCcOLLUM	(ı) (ıı)	252,204			50,000	41,301	343,505	
mr ROBERT HAWKS	(ı) (ıı)	217,654			20,000	22,655	260,309	
mr RUSSELL SLIDER	(ı) (ıı)	169,153			40,000	12,565	221,718	
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
-		
	·	

Software ID:

Software Version:

EIN: 58-0625584

Name: WOODWARD ACADEMY Inc

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Reference	Explanat ion
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DLN: 93493352002009

OMB No 1545-0047

Open to Public **Inspection**

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O.

Name of the organization WOODWARD ACADEMY Inc

Department of the Treasury

Internal Revenue Service

Employer identification number

WO	ODWARD ACADEMY Inc									58-0625	584			
Р	art I Bond Issues (Required	for 2008)						_		'				
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	Price	(f) Description of Purpose		Purpose	(g) Defeased		(h) O n ed Behalf of Issuer	
											Yes	No	Yes	No
A	DEVELopment AUTHORITY OF FULTON COUNTY	58-1506878	359900FK8	12-10-	1997	17,	000,000	CONSTRUC SCHOOL CA		WER		×		×
В	DEVELOPMENT AUTHORITY OF FULTON COUNTY	58-1506878	359900ММ6	10-24-	2002	27,	000,000	CONSTRUC MIDDLE SC & ARTS FAC CAMPUS	HOOL CLA	SSROOMS		x		х
С	DEVELOPMENT AUTHORITY OF FULTON COUNTY	58-1506878	359900MSD	08-10-	2006	11,	000,000	CONSTRUC SCHOOL CA		MARY		×		×
D	DEVELOPMENT AUTHORITY OF FULTON COUNTY	58-1506878	359900UX3	06-10-	2008	32,	000,000	CONSTRUC ATHLETIC F SUPPORT S	ACILITIE			х		х
E	DEVELOPMENT AUTHORITY OF FULTON COUNTY	58-1506878	359900TZ0	08-23-	2007	13,	000,000	CONSTRUCT & RENOVATE UPPER SCHOOL CLASSROOM FACILITIES				х		×
Pa	art III Proceeds (Optional for 2	2008)												
	Total Proceeds of Issue				A	E	3	c		D			E	
1	Gross Proceeds in Reserve Funds											+		
2 	Proceeds in Refunding or Defeasan											+		
4	Other Unspent Proceeds											_		
	Issuance Costs from Proceeds					1						+		
6	Working Capital Expenditures from	Proceeds										+		
7	Capital Expenditures from Proceed	is												
8	Year of Substantial Completion					1								
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	s	No
9	Were the bonds issued as part of a	current refunding iss	sue?											
10	Were the bonds issued as part of a	n advance refunding	ıssue?											
11	Has the final allocation of proceeds been made?													
12														
Pa	final allocation of proceeds? Int IIII Private Business Use (Optional for 2008	<u> </u>											
		<u> </u>		A	<u> </u>	E	3	С	1	D			E	
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	s	No
1	Was the organization a partner in a which owned property financed by t		mber of an LLC,											
2	Are there any lease arrangements which may result in private busines	with respect to the fi	nanced property											
_														

Schedule K	(Form 990) 20	800	
Part III	Private Bu	siness Use	(Continued)

		4	A	E	3	(С	I	D	I	E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4 Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government											
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										
Pai	rt IV Arbitrage (Optional for 2008)										
		ı	Α	E	3	(<u>c</u>	ı	<u> </u>	ı	Ε
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?										
2	Is the bond issue a variable rate issue?										
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5											
	Were any gross proceeds invested beyond an available temporary period?										

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Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

DLN: 93493352002009 OMB No 1545-0047

<u>Serv</u>ice

Inspection Name of the organization **Employer identification number** WOODWARD ACADEMY Inc. 58-0625584 Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only). To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? (a) Name of disqualified person 1 (b) Description of transaction Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under f 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . Part II Loans to and/or From Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) (b) Loan to or (a)Written (e) In Approved from the (a) Name of interested person and (c)O riginal principal by board or (d)Balance due default? lagreement? organization? purpose amount committee? No Τо From Yes Yes Nο No Yes Part III Grants or Assistance Benefitting Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between interested person (a) Name of interested person (c)A mount of grant or type of assistance and the organization SON IVAN WON Jr CLASS SCI prize FOR \$2.300 & AN alumni SCHOLARSHIP FOR MR XAVIER DURALDE BOARD MEMBER \$800 Part IV Business Transactions Involving Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (b) Relationship between interested (c) A mount of organızatıon's (a) Name of interested person (d) Description of transaction person and the revenues? transaction organization Yes No MR BEN JOHNSON CHAIRMAN OF 193,107 FORMER PARTNER AT ALSTON Νo BOARD AND BIRD - ALSTON AND BIRD advises WOODWARD ACADEMY regarding LEGAL AFFAIRS MR JAMES SUTHERLAND BOARD MEMBER 1,122,938 OWNER OF SUTHERLAND lνο FOODS - WOODWARD ACADEMY PURCHASES FOOD FOR DINING SERVICES FROM SUTHERLAND FOODS MR SHI SHAILENDRA BOARD MEMBER 6,073,000 PRESIDENT OF S G Νo CONTRACTING. INC - S G CONTRACTING WAS THE GENERAL CONTRACTOR ON A CONSTRUCTION PROJECT AT WOODWARD ACADEMY DURING THE YEAR MR KENNETH HOPKINS SON-IN-LAW OF MR 150,700 OWNER OF TROPIC DESIGNS, lνο SUTHERLAND (board INC - TROPIC DESIGNS PROVIDES TURF member) MANAGEMENT SERVICES FOR

WOODWARD ACADEMY ATHLETIC FIELDS

SCHEDULE M (Form 990)

Non-Cash Contributions

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue <u>Servi</u>ce

Part I Types of Property

Name of the organization **Employer identification number** WOODWARD ACADEMY Inc 58-0625584

		(a)	(b)	(c)	(d))		
		Check	Number of Contributions	Revenues reported on	Method of de	etermir	ning	
		ıf		Form 990, Part VIII, line	reven	ues		
		applicable		1 g				
1	Art—Works of art	X	1	12,000	APPRAISAL			
2	Art—Historical treasures .							
3	Art—Fractional Interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
	Boats and planes					-		
	•					-		
	Intellectual property			27.672	MARKET CALECER			
	Securities—Publicly traded .	X	14	37,673	MARKET SALES PR	ICE_		—
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Q ualified conservation contribution (historic							
14	structures)							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts					-		
	Other (describe)							
	Other (describe)							
	Other (describe)							
	Other (describe)							
	Number of Forms 8283 received	l hy the ora	nization during the tax ve	ar for contributions for				
	which the organization complete				29			1
	Acknowledgement							
							Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it must			
	hold for at	. 6					ı	
	least three years from the date of			not required to be used for a	exempt purposes			
						30a		No
b	If "Yes", describe the arrangeme							
31	Does the organization have a gif			·		31	Yes	
32a	Does the organization hire or us contributions?	•	es or related organizations	to solicit, process, or sell	non-cash • • • • •	32a		No
ь	If "Yes", describe in Part II							
33	If the organization did not report	revenuesı	n Column (c) for a type of p	roperty for which Column (a	a) is			
	checked, describe in Part II			•				
For P	aperwork Reduction Act Notice, see	the Instruct	tions for Form 990.	Cat No 512271	Schedule	M (For	m 990\	2008

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.								
Identifier	ReturnReference	Explanation						
240111111	Notal III Colored	Explanation						
	1	1						

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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

DLN: 93493352002009

Name of the organization WOODWARD ACADEMY Inc

 ${\bf Employer\ identification\ number}$

58-0625584

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		AUDIT COMMITTEE AND THE FINANCE AND EXECUTIVE COMMITTEE REVIEW AND APPROVE THE FORM 990 PRIOR TO FILING ALL OTHER BOARD MEMBERS WILL REVIEW THE FORM 990 AT THE NEXT FULL BOARD MEETING

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		EACH YEAR BOARD MEMBERS, OFFICERS AND KEY EMPLOYEES COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE AND CERTIFY THAT THEY HAVE READ AND ARE IN COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY BOARD MEMBERS WHO HAVE A POTENTIAL CONFLICT OF INTEREST ABSTAIN FROM VOTING ON ISSUES INVOLVING THE CONFLICT OF INTEREST

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		THE VP FOR FINANCE AND ADMINISTRATION RESEARCHES COMPARABLE COMPENSATION DATA AND PROVIDES THE INFORMATION TO THE PRESIDENT AND THE COMPENSATION COMMITTEE COMPARABLE DATA FROM THE FOLLOWING GROUPS ARE USED ALL MEMBER SCHOOLS OF THE NATIONAL ASSOCIATION OF INDEPENDENT SCHOOLS(NAIS), ALL NON-MEMBER SCHOOLS THAT REPORT TO NAIS, ALL GEORGIA INDEPENDENT SCHOOLS, AND THE 30 LARGEST INDEPENDENT SCHOOLS IN THE US IN DETERMINING COMPENSATION SOME OF THE FACTORS CONSIDERED INCLUDE THE EXPERIENCE OF THE EMPLOYEE AND THE SIZE AND COMPLEXITY OF THE SCHOOL IN RELATION TO THE SCHOOLS IN THE COMPARISON DATA THE COMPENSATION COMMITTEE APPROVES AND DOCUMENTS THE COMPENSATION OF OFFICERS AND KEY EMPLOYEES AND ALL OFFICERS AND KEY EMPLOYEES RECEIVE ANNUAL WRITTEN CONTRACTS

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 18		THE SCHOOL'S FORM 1023, 990 AND 990T ARE AVAILABLE TO THE PUBLIC UPON REQUEST

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		THE SCHOOL'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST

ldentifier	Return Reference	Explanation
PAGE 11, SECTION XI, LINE 2C	AUDITED FINANCIAL STATEMENTS	THE AUDIT COMMITTEE OF THE BOARD OF GOVERNORS IS RESPONSIBLE FOR THE OVERSIGHT OF THE AUDIT PROCESS AND THE SELECTION OF INDEPENDENT AUDITORS

ldentifier	Return Reference	Explanation
SCHEDULE F,	ASSISTANCE TO ORGANIZATIONS OUTSIDE THE US	EACH YEAR THE MIDDLE SCHOOL STUDENTS OF WOODWARD ACADEMY RAISE MONEY TO SEND TO A SCHOOL IN ZAMBIA CALLED THE TERRANOVA SCHOOL. THIS IS A PRIVATE SCHOOL LOCATED ON A COFFEE FARM AND OPERATED FOR THE BENEFIT OF THE FARM'S WORKERS AND OTHERS IN THE AREA STUDENTS PAY A NOMINAL FEE OF \$8 PER TERM TO ATTEND THE COFFEE FARM PAYS THE TEACHERS PAST FUND RAISING EFFORTS OF THE WOODWARD ACADEMY STUDENTS HAVE PAID FOR TEACHING MATERIALS AS WELL AS BUILDING A LIBRARY AND FURNISHING IT WITH BOOKS DURING THIS FISCAL YEAR \$23,501 THAT HAD BEEN RAISED THE PREVIOUS SCHOOL YEAR WAS USED TO PURCHASE COMPUTERS AND COMPUTER SUPPLIES AND FOR WOODWARD ACADEMY EMPLOYEES TO TRAVEL TO THE SCHOOL TO INSTALL THE COMPUTER EQUIPMENT AS PART OF THE FUNDRAISING EFFORTS AN ADDITIONAL \$25,000 WAS RECEIVED FROM THE JULIA BURKE FOUNDATION AND THESE FUNDS WERE SENT TO TERRANOVA TO ASSIST IN BUILDING AN INFIRMARY ON THE SCHOOL GROUNDS FOR THE STUDENTS AND THEIR FAMILIES EACH YEAR SEVERAL EMPLOYEES OF WOODWARD ACADEMY TRAVEL TO TERRANOVA TO VISIT THE STUDENTS AND OBSERVE THE PROGRESS OF WOODWARD SPONSORED PROJECTS

ldentifier	Return Reference	Explanation
FORM 990, PART V, LINES 1C, 7G & 7H	BACKUP WITHHOLDING, FORMS 8899 AND 1098-C	THE ORGANIZATION DID NOT RECEIVE CONTRIBUTIONS OF QUALIFIED INTELLECTUAL PROPERTY AND WAS THEREFORE NOT REQUIRED TO FILE FORM 8899 LIKEWISE, THERE WERE NO CONTRIBUTIONS OF CARS, BOATS, AIRPLANES, OR OTHER VEHICLES, AND FORM 1098-C WAS NOT REQUIRED THE ORGANIZATION DID NOT HAVE ANY REPORTABLE PAYMENTS TO VENDORS OR REPORTABLE GAMING(GAMBLING) WINNINGS TO PRIZE WINNERS AND THEREFORE THE BACKUP WITHHOLDING RULES DID NOT APPLY

ldentifier	Return Reference	Explanation
FORM 990, SCH R, PART V, LINE 1D	LOAN GUARANTEES	WOODWARD ACADEMY GUARANTEES THE LOAN TO PURCHASE BUSES

ldentifier	Return Reference	Explanation					
FORM 990, SCH R, PART V, LINE 1I	PERFORMANCE OF SERVICES	WOODWARD ACADEMY PAYS STUDENT TRANSPORT FOR TRANSPORTING STUDENTS FOR SCHOOL ACTIVITIES					

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51056K

Schedule O (Form 990) 2008

DLN: 93493352002009

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2008

Department of the Treasury Internal Revenue Service Open to Public Inspection

Name of the organization WOODWARD ACADEMY Inc	Employer identification number				
Part I Identification of Disregarded Entities				58-0625584	
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
Part II Identification of Related Tax-Exempt Organiza	itions				
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (stat or foreign country)	te Exempt Code sectio	n Public charity stati (if section 501(c)(3	(F) us Direct controlling entity
STUDENT TRANSPORT INC	BUS TRANSPORTATION OF				
2836 RN MARTIN STREET	WOODWARD ACADEMY STUDENTS	GA	501(C)(3)	509(A)(1), TYPE 1	WOODWARD ACADEMY

(A) Name, address, and EIN of related organization	Prim	(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	Share	(F) e of total income	(G) Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

Part V Transactions with R	Related Organizations
----------------------------	-----------------------

Part '	Transactions with Related Organizations					
No	te. Complete line 1 if any entity is listed in Parts II, III or IV			Ye	s No	
1 Durir	g the tax year, did the orgranization engage in any of the following transactions with o	one or more related organizations listed in Parts II-IV	7			
a Re	ceipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a	•	No	
b G	ft, grant, or capital contribution to other organization(s)		16	•	No	
c Gı	ft, grant, or capital contribution from other organization(s)		10	:	No	
d Lo	ans or loan guarantees to or for other organization(s)		10	l Ye	s	
e Lo	ans or loan guarantees by other organization(s)		16	•	No	
f Sa	le of assets to other organization(s)				No	
	rchase of assets from other organization(s)		19	,	No	
_	change of assets		1h		No	
	ase of facilities, equipment, or other assets to other organization(s)		1 i		No	
j Le	ase of facilities, equipment, or other assets from other organization(s)		1 <u>j</u>		No No	
k P6	k Performance of services or membership or fundraising solicitations for other organization(s)					
I Pe	rformance of services or membership or fundraising solicitations by other organizatio	n(s)	11	Ye	:s	
m Sh	aring of facilities, equipment, mailing lists, or other assets		<u>1n</u>	n	No	
n Sh	naring of paid employees		1n	<u> </u>	No	
o Re	embursement paid to other organization for expenses		10	+	No	
p Re	embursement paid by other organization for expenses		1p	•	No	
- 0			14		No	
-	ther transfer of cash or property to other organization(s)		10 1r		No	
r Ot	her transfer of cash or property from other organization(s)		<u></u>		140	
	the answer to any of the above is "Yes," see the instructions for information on who m	nust complete this line, including covered relationship	s and transaction thresholds			
	(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved			
(1)	STUDENT TRANSPORT INC	D		753,	198	
(2)	CTUDENT TRANSPORT INC					

(A) Name of other organization(s)	Transaction type(a-r)	(C) Amount Involved
(1) STUDENT TRANSPORT INC	D	753,198
(2) STUDENT TRANSPORT INC	L	775,000
(3)		
(4)		
(5)		
(6)		

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets			(G) Code V—UBI amount on Box 20 of K-1		r J			
			Yes	No		Yes	No		Yes	No			
			•			•	•	Sabadula	D / Form	000) 2000			

DLN: 93493352002009

OMB No 1545-0172

Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

Attachment

	-	occ separa	te motractions	r rictaen	to your		ocurrin.			Sequence No 67
Name(s) shown on return	na		Business or ac	tivity to which	this fo	rm rela	ates	Iden	t if y ing	g number
WOODWARD ACADEMY I	nc		Form 990 Pag	e 10				58-0	6255	84
	To Expense (•		
	ou have any li					u con	nplete Pai	rt I.		
1 Maximum amount See		-			•			•	1	250,000
2 Total cost of section 1			•	•		•		•	2	
3 Threshold cost of sect	ion 179 propert	y before red	uction in limita	ition (see instr	uctions) .		•	3	800,000
4 Reduction in limitation	Subtract line 3	from line 2	If zero or less	s, enter - 0 -		•		•	4	
5 Dollar limitation for tax	•	line 4 from	line 1 Ifzero o	or less, enter - 0	O- If m	arrıed	filing			
separately, see instruc	tions	• •	<u> </u>			•	• •		5	
(a) D	escription of pro	nertv		(b) Cost	(busine	ss us	e (c) FI	lected	cost	
6				-	only)		(3) 2.			-
										1
7 Listed property Enter	the amount from	ı lıne 29				7	<u> </u>			
8 Total elected cost of s	ection 179 prop	erty Adda	mounts ın colu	mn (c), lines 6	and 7				8	
9 Tentative deduction E	nter the smaller	of line 5 or	line 8 .						9	
10 Carryover of disallowed	d deduction from	n line 13 of	vour 2007 Fori	m 4562 .					10	
11 Business income limitation			•		ee instruc	tions)			11	
12 Section 179 expense of									12	
13 Carryover of disallowed			•		h.		T			
					.F	13				
Note: Do not use Part . Part II Special De				•			t include li	stad ni	ronerty	() (See instructions)
14 Special depreciation al									l openty	(See mistractions)
tax year (see instruction			., (51	,	, ,				14	
15 Property subject to sec	tion 168(f)(1)	election							15	
16 Other depreciation (inc	luding ACRS)								16	3,609,075
	preciation (Do not inc	clude listed p	roperty.) (Se	e insti	uctio	ns.)			· · ·
			Sec	ction A			_			
17 MACRS deductions for	assets placed ı	n service in	ı tax years beg	ınnıng before 2	800				17	
18 If you are electing t	o group any a	ssets plac	ed in service:	during the t	ax yea	r into	one or r	nore		
general asset accou	nts, check he	re						▶ □		
Section B—Asse	ets Placed in	Service	During 200	8 Tax Year	Using	the	General	Dep	recia	tion System
(a) Classification of property	(b) Month and year placed in service	depre (business	easis for eciation /investment use instructions)	(d) Recovery period	(e) Convention (f) Meth		Method I 'S' '		(g)Depreciation deduction	
19a 3-year property										
b 5-year property										
c 7 - year property										
d 10-year property										
e 15-year property					-					
f 20-year property					1			- "	_	
g 25-year property				25 yrs	 			S/L		
h Residential rental property			+	27 5 yrs	+	IM IM		S/L S/L	_	
i Nonresidential real				27 5 yrs 39 yrs	+	1 M 1 M		5/L S/L		
property				39 yıs	1	1 M		5/L S/L	-+	
	n C—Assets Plac	ced in Servi	ce Durina 2008	Tax Year Using			I		Svste	em
20a Class life								S/L		
b 12-year				12 yrs				S/L		
c 40-year				40 yrs	1	1 M		S/L		
Part IV Summar	y (See ınstrud	ctions)								
21 Listed property Enter a	amount from line	28 .							21	
22 Total. Add amounts fro and on the appropriate	•	_	•				e 21 Ente	r here	22	3,609,075
23 For assets shown abov portion of the basis att			-	year, enter the	e • •	23				
				- · · ·	- •		<u> </u>			4E63 (2000)

Form 4562 (2008) Page 2 Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and Part V property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (c) (i) (e) (b) Business/ (d) (h) (a) (g) Basis for depreciation Flected Type of property (list Date placed in investment Cost or other Recovery Method/ Depreciation/ section 179 (business/investment Convention deduction vehicles first) service basis use period cost use only) percentage 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L -% S/L -28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) (f) 30 Total business/investment miles driven during the Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 1 Vehicle 5 Vehicle 6 year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No Yes No Yes No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? **36** Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No **38** Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . . 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? _ 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) . . . Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI **Amortization** (b) (e) (d) (f) (c) (a) Date A mortization A mortizable Code A mortization for Description of costs amortization period or

amount section this year beains percentage 42 A mortization of costs that begins during your 2008 tax year (see instructions) 43 A mortization of costs that began before your 2008 tax year 43 44 Total. Add amounts in column (f) See the instructions for where to report 44

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(-)	(F)
		Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
MR MITESH SHAH , BOARD MEMBER	1 00	Χ						0	0	0
MR SHI SHAILENDRA , BOARD MEMBER	1 00	Х						0	0	0
MR JAMES E SUTHERLAND , BOARD MEMBER	1 00	Х						0	0	0
MS BARBARA EGAN , VICE PRESIDENT/TREASURER	40 00			х				246,625	0	36,798
MR DAVID R MCcOLLUM , VP/HEADMASTER	40 00			х				252,204	0	88,532
mr ROBERT HAWKS , VICE PRESIDENT	40 00				Х			217,654	0	33,059
mr RUSSELL SLIDER , VICE PRESIDENT	40 00				Х			169,153	0	30,149
mr EDWIN NOTESTINE , ADMINISTRATOR	40 00					Х		138,822	0	0
mr DAVID CHANDLER , ADMINISTRATOR	40 00					Х		133,186	0	12,000
MR WILLIAM LINEBERRY , ADMINISTRATOR	40 00					Х		122,054	0	12,000
MR WALLACE L VINCENT , ADMINISTRATOR	40 00					Х		117,244	0	16,800
MS KELLY SANDERSON , ASSISTANT VICE PRESIDENT	40 00					х		116,758	0	0

Software ID: Software Version:

EIN: 58-0625584

Name: WOODWARD ACADEMY Inc

Form 990, Part VII - Section Aaa

								,		1
(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(5)	(F)
		Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
GARY JONES , FORMER PRESIDENT							Х	0	0	0
WILLIAM R BREWSTER , FORMER PRESIDENT							×	0	0	0
DON WOLFF, FORMER OFFICER							Х	0	0	0
JAMES CHANDLER , FORMER OFFICER							Х	0	0	0
A THOMAS JACKSON , FORMER OFFICER							×	0	0	0
MR BEN F JOHNSON III , CHAIRMAN	2 00	Х						0	0	0
MR J RUSSELL WELCH , VICE- CHAIRMAN	2 00	×						0	0	0
MS MADELYN ADAMS , BOARD MEMBER	1 00	Х						0	0	0
MR ROBERT E BOWERS , BOARD MEMBER	1 00	Х						0	0	0
MR ROBERT L BRAND JR , BOARD MEMBER	1 00	Х						0	0	0
MR RONALD M BRILL , BOARD MEMBER	1 00	Х						0	0	0
MRS THALIA CARLOS , BOARD MEMBER	1 00	Х						0	0	0
MR CLARENCE DAVIS , BOARD MEMBER	1 00	X						0	0	0
MR ADAIR DICKERSON , BOARD MEMBER	1 00	X						0	0	0
MRS KITTY DUKEHART , BOARD MEMBER	1 00	Х						0	0	0
DR XAVIER A DURALDE , BOARD MEMBER	1 00	Х						0	0	0
DR NANCY GALLUPS , BOARD MEMBER	1 00	Х						0	0	0
MR STEPHEN R HENNESSY , BOARD MEMBER	1 00	Х						0	0	0
DR JAMES F JONES JR , BOARD MEMBER	1 00	Х						0	0	0
MRS TERRI J KIGHT , BO ARD MEMBER	1 00	Х						0	0	0
MR IAN LLOYD-JONES , BOARD MEMBER	1 00	X						0	0	0
DR ANTHONY A MALIZIA , BOARD MEMBER	1 00	Х						0	0	0
MR GENE W MILNER JR , BO ARD MEMBER	1 00	X						0	0	0
MR GEORGE S MORGAN SR , BOARD MEMBER	1 00	Х						0	0	0
MRS MARIE L NYGREN , BOARD MEMBER	1 00	Х						0	0	0
MR TIM A O'BRIEN , BOARD MEMBER	1 00	Х	_					0	0	0
MRS VICKI R PALMER , BO ARD MEMBER	1 00	Х						0	0	0
MR JOHN D RANDOLPH , BOARD MEMBER	1 00	Х						0	0	0
MRS PAULA REYNOLDS , BOARD MEMBER	1 00	Х						0	0	0
MR STEPHEN E ROBERTS , BOARD MEMBER	1 00	Х						0	0	0
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