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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2008

Department of the Treasury

Tax-exempt status x	~		ue Service				e a copy of this return							- upile in	specilo
Agrees cannys Access cannys Pranklin Christian Academy Substitute Substitut				lar year, c			<u> 1</u>	, 2008, and	<u>d endin</u>	g May					
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Name change Code		Addr	ess change	IRS label	Franklin	Christian	Academy				80-	011	<u> 7857</u>		
Application permitted P. O. BOX 157 State Ze code + 4 Going receipts Tox		Nam	e change	or type.	Number and st	reet (or PO box if	mail is not delivered t	o street addr)	Room/st	uite	E Telepi	hone nur	nber		
Termusted return Frank1 TN 37065 C Gross recepts \$ 554,846. 846.		initia	il return	specific	P.O. Box	157			<u> </u>		(61	L5) 5	<u> 599-9</u>	9229	
Application pending F. Name and address of principal offices. Hugh Harris P.O. 157 Franklin TN 37055 1 1 1 1 1 1 1 1 1		Term	nnation		City, town or ci	ountry		State ZIP	code + 4						
Application pending F. Name and address of principal officers Hugh Harris P.O. 157 Franklin TN 3705		Ame	nded return		Franklin			TN 3	7065		G Gross	receipts	\$ 5	54,848	3.
Hugh Harris P.O. 157 Franklin TN 37065 Hob Are almites included? The status X 501(c) (3) ** (Insert no.) 4947(a)(1) or 527 Hit0 Group exemption number The status X 501(c) (3) ** (Insert no.) 4947(a)(1) or 527 Hit0 Group exemption number The status X 501(c) (3) ** (Insert no.) 1 Website: ** www. franklinchistianacademy.org Hit0 Group exemption number The status X 501(c) The status		☐ Appl	cation pending	F Name a		pal officer.				H(a) Is this	a group reti	urn for a	ffiliates?	Yes	ΧN
Take-exempt status							Franklin	TN 3'	7065						. Fin
Website:		Tayle								If 'No,'	attach a lis	t (see ir	nstruction	15) —	_
Part Summary 1 Brefly describe the organization's mission or most significant activities: Private School					~~~~			1) 01 1.5	<u> </u>	H(a) Croup	ovemetica	numbar	•		
Part	<u>K</u>							I Van			_			- TN	
Briefly describe the organization's mission or most significant activities: Private School					ation Trust	Association	Other	L Tear	or Format	ION 200	4 1111	State 0	i legal uc	miche 11	
2 Check this box					anization's miss	CION OF MOST S	anificant activitie	c Priz	rato 9	School	· · · · · · · · · · · · · · · · · · ·				
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21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 23 Net assets or fund balances. Subtract line 21 from line 20 24 Net assets or fund balances. Subtract line 21 from line 20 25 Net assets or fund balances. Subtract line 21 from line 20 26 Net assets or fund balances. Subtract line 21 from line 20 27 Not 0. 38, 28 Net assets or fund balances. Subtract line 21 from line 20 27 Not 0. 38, 28 Net assets or fund balances. Subtract line 21 from line 20 27 Not 0. 38, 28 Net assets or fund balances. Subtract line 21 from line 20 27 Not 0. 38, 28 Net assets or fund balances. Subtract line 21 from line 20 27 Not 0. 38, 28 Net assets or fund balances. Subtract line 21 from line 20 27 Not 0. 38, 28 Net assets or fund balances. Subtract line 21 from line 20 27 Not 0. 38, 28 Net assets or fund balances. Subtract line 21 from line 20 27 Not 0. 38, 28 Net assets or fund balances. Subtract line 21 from line 20 27 Not 0. 38, 28 Net assets or fund balances. Subtract line 21 from line 20 27 Not 0. 38, 27 Not 0. 38, 27 Not 0. 38, 28 Net assets or fund balances. Subtract line 21 from line 20 27 Not 0. 38, 27 Not 0. 38, 27 Not 0. 38, 28 Net assets or fund balances. Subtract line 21 from line 20 27 Not 0. 38, 28 Not 0. 38, 27 Not 0. 38, 28 Not 0. 38, 27 Not 0. 38, 27 Not 0. 38, 28 Not 0. 38, 27 Not 0. 38, 28 Not 0. 38, 27 Not 0. 38, 27 Not 0. 38, 28 Not 0. 38, 27 Not 0. 38, 28 Not 0. 38, 27 Not 0. 38, 28 Not 0. 38, 28 Not 0. 38, 27 Not 0. 38, 28 Not 0	7 58									Begi	inning of	Year			
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Part II Signature Block Under penalties of pelury. Order that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it true, correct, and complete oetal ation of preparer (other than officer) is based on all information of which preparer has any knowledge O1/10/10	4 E	21 T	otal liabilitie	s (Part X,	line 26)						28,	430		3	9,080
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Sign Here Signature of dick Date	Pa	rt II	Signatu	re Bloc	ck //										
Sign Here Signature of dick Date			Under penajtie	s of perjury,	are that I have	e examined this ret	urn, including accompa	anying schedule	es and sta	tements, an	d to the bes	t of my i	knowledg	e and belief	, it is
Here Signature of dick Date			true, correct, a	ind complete	Declaration of prep	parer (other than of	ficer) is based on all'ir	nfórmation of w	hich prepa	arer has any	knowledge	-			
Paid Preparer's signature of the signatu	Sig	n	> 9	YXX.X	#12am					lo	01/10/	10			
Paid Preparer's signature Pirm's name (or yours if self-employed), address and self-employed, address and self-employed properties are self-employed properties and self-employed properties are self-employed properties and self-employed properties are self-employed p	Hei	Signature of officer							D	ate					
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Paid Preparer's signature Parer's Use Only Preparer's only Self-employed, address and parer's property of the								_				- /			
Paid Pre- signature parer's Use Only Preparer's signature FIRM'S name (or yours if self- employed), address and a self- employed FRANKLIN CHRISTIAN ACADEMY PO BOX 157 EIN								Date			Check if	T	Prepare	's identifyin	g numbe
Pre- parer's Use Only Preparer's signature FRANKLIN CHRISTIAN ACADEMY PO BOX 157 EIN EIN	Pai	d									self-		(see ins	tructions)	
Parer's Use Only Firm's name (or yours if self-employed), address and address			Preparer's signature	>						,	Simployeu	니			
Only yours if self- employed), address and	par	er's			MICI TAL CUID	COULDS FO	A DEMY			+					
address and			yours if self-			LSTIAN AC.	ADEMY								
ZIP+4 FRANKLIN TN 37065-0157 Phone no ▶	Onl	ly	employed), address, and												
May the IRS discuss this return with the preparer shown above? (see instructions) X Yes			ZIP + 4				TN		0157		Phone no	<u> </u>			No

Form	990 (20	(800	Fran	ıklin Ch	ristia	in Acader	my				80-	01178	57		Page 2
Par	t III	Sta	temer	nt of Proq	ram Se	rvice Acco	ompli	ishments (see	instruc	tions)					
				organization											
-	-			_			Aca	demy provid	les a (Christia	n world-v	iew cı	ırric	ulun	n
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				2, Part III <u>,</u>											
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2					iny signif	icant progran	n serv	ices during the ye	ar which v	were not list	ed on the prior			<u> </u>	
	Form 9	190 or	990-EZ	?	• •			•	•	•			Yes	X	No
	If 'Yes.	' desc	ribe the	se new serv	rices on S	Schedule O.								_	
3	Did the	orgai	nızatıon	cease cond	ucting, oi	make signif	icant d	changes in how it	conducts,	any prograi	m services?	. [_]	Yes	x	No
	If 'Yes,	' desc	ribe the	se changes	on Sched	dule O									
4	Describ	e the	exemple	t purpose ac	hievemei	nts for each o	of the	organization's thre	e largest	program se	rvices by exper	ses. Sec	tion 50	1(c)(3)
	and 50	1(c)(4) organi	izations and	section 4	1947(a)(1) tru	usts ar	e required to repo	rt the am	ount of gran	its and allocatio	ns to oth	ers, the	e total	
	expens	ses, ar	na rever	nue, it any, t	or each p	orogram serv	ice rep	portea.							
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4				ices. (Descr											
	(Exper		\$			including g		of \$							
4	e Total p	progra	am serv	ice expense	s ► \$	į	515,	029. (Must equ	al Part IX	, Line 25, co	olumn (B))			,	_

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete			
	Schedule A	1	Х	
	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u>x</u>	
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		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		_ <u>X</u> _
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		<u> </u>
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		<u>x</u> _
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>x</u>
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		<u>x_</u>
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		<u> </u>
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	X	
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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		<u> </u>
1	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		х
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		х
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		x
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		Х
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		Х
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19	<u> </u>	X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21 22	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 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	<u> </u>	X
	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete			_^_
	Schedule J	23	-	X
24	a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and			
	complete Schedule K. If 'No, go to question 25	24a	<u> </u>	X
1	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
	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		
(Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d	 	-
25	a 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		х
1	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		х
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	х	
27	contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		x
$\square \wedge \wedge$			- 000	(2000)

гаг	tiv Checkist of Required Schedules (Continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
á	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee),	l		
	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		Х
ŧ	Have a family member who had a direct or indirect business relationship with the organization? If 'Yes.' complete Schedulc L, Part IV	28b		Х_
•	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		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i> .	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		x
_		<u> </u>		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		х
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		х
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		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		x
RA/		Form	990	(2008

Form 990 (2008) Franklin Christian Academy	80-0117857	P	age 5
Part'V Statements Regarding Other IRS Filings and Tax Compliance			
		Yes	No
1 a 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 0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		ļ
c Did the organization comply with backup withholding rules for reportable payments to vendors a (gambling) winnings to prize winners?	nd reportable gaming	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 16		
2b If at least one is reported on line 2a, did the organization file all required federal employment ta	x returns? . 2t	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return	. (see instructions)		}
3a Did the organization have unrelated business gross income of \$1,000 or more during the year of this return?			х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	31		
4a At any time during the calendar year, did the organization have an interest in, or a signature or financial account in a foreign country (such as a bank account, securities account, or other financial	other authority over, a ncial account)?		_x_
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 For Financial Accounts.	reign Bank and		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax ye	ear? 5	<u> </u>	Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter to	transaction? 51	<u> </u>	X
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt E Prohibited Tax Shelter Transaction?	Entity Regarding		
6a Did the organization solicit any contributions that were not tax deductible?	6:	a	Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contideductible?	ributions or gifts were not		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization provide goods or services in exchange for any quid pro quo contribution of	more than \$75? . 7	a	х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7	b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for whice Form 8282?	h it was required to file	إ	x
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7d	1	1
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums benefit contract?	on a personal		ļ
			X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit		+	Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as req	· · · · · · · · · · · · · · · · · · ·		
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a For	in the second	<u>h</u>	X
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and s supporting organizations. Did the supporting organization, or a fund maintained by a sponsoril excess business holdings at any time during the year?	ng organization, have	\vdash	x
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9	a	Х
b Did the organization make any distribution to a donor, donor advisor, or related person?	. 9	b	Х
10 Section 501(c)(7) organizations. Enter:			1
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1	
11 Section 501(c)(12) organizations. Enter:			
a Gross income from other members or shareholders	11a		
	11 Б		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F		a	<u> </u>
	12b		
BAA	For	m 990	(2008)

Form 990 (2008) Franklin Christian Academy

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 and Management

	For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions		Yes	No					
1 a	Enter the number of voting members of the governing body] [
Ŀ	Enter the number of voting members that are independent]]		į					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		х					
4	Did the organization make any significant changes to its organizational documents	4		X					
	since the prior Form 990 was filed?								
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u> </u>					
6	Does the organization have members or stockholders?	6		X					
7 a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		x					
t	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .	7 b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
a	The governing body?	8a	Х						
Ł	Each committee with authority to act on behalf of the governing body?	8b		<u> </u>					
9 a	a Does the organization have local chapters, branches, or affiliates?	9a		X					
b 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?									
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									
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									
Sec	tion B. Policies								
		F==	Yes	No					
128	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х						
				-					
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b							
C	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12c	x						
C	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy?	12c	x x x						
C	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy?	12c	x						
13	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy?	12c	x x x						
13 14 15	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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 a The organization's CEO, Executive Director, or top management official?	12c 13 14	x x x	X					
13 14 15	to conflicts? C Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization?	12c 13 14	x x x	X					
13 14 15	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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 a The organization's CEO, Executive Director, or top management official?	12c 13 14	x x x						
13 14 15 3	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	12c 13 14	x x x						
13 14 15 16	to conflicts? C Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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	12c 13 14 15a 15b	X X X	х					
13 14 15 16 16	to conflicts? C Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	12c 13 14 15a 15b	X X X	х					
13 14 15 16 16 16	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Dif '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?	12c 13 14 15a 15b	X X X	х					
13 14 15 16 16 17	to conflicts? C Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	12c 13 14 15a 15b	X X X	X					
13 14 15 16 16 17	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Dif '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? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) av	12c 13 14 15a 15b	X X X	X					
13 14 15 16 16 17 18	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Dif '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? Extince. Disclosures List the states with which a copy of this Form 990 is required to be filed. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) avinspection. Indicate how you make these available. Check all that apply	12c 13 14 15a 15b 16a	X X X	X					
13 14 15 16 16 17 18	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) Describe the process in Schedule O. (see instructions) Dif '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? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) avinspection Indicate how you make these available Check all that apply Own website Another's website	12c 13 14 15a 15b 16a	X X X	X					
13 14 15 16 16 17 18	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) Describe the process in Schedule O. (see instructions) If 'Yes,' has the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If 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? Extron C. Disclosures List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) avinspection Indicate how you make these available Check all that apply Own website Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest polic statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the organization to make the process of the organization of the person who possesses the books and records of the organization.	12c 13 14 15a 15b 16a	X X X X for pu	X X x iblic					

Form 990 (2008)

BAA

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

- 1 a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), 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) or more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did no		ate an	y of			ector,	trus			(F)
(A)	(B)	Poer	tion (•	C)	hat appl	W	(D)	(E)	(F)
Name and Title	Average hours per week	ਰਾ ਗੁਪਤਾਨਾ ਹੈ "ਪਾਰਨਾਨ੍ਸ ਕ੍ਰਾਪਤਾਵਰ	institutional forstee		s key amployee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Hugh Harris President	40.00	х		х	х	Х		53,000.	0.	0.
Ghislain Vander Elst Board Chairman	0.00							0.	0.	0.
Tom Clark Treasurer	0.00							0.	0.	0.
Jim Davis Secretary	0.00							0.	0.	0.
	-									
	-									
	-									
	-									
	-									

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Part VII Section A. Officers, Directors, Trust		(ey	Em			es,	and		pensated Em	<u>oloy</u>			<u>1t.)</u>
(A)	(B)		4	(((D)	(E)			(F)	
Name and Title	Average hours per week			Officer		Mighest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)		amour comp fro orga and	imated nt of oth pensatio om the inization I related nization	n 1 1
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1 b Total 2 Total number of individuals (including those in 1a) w	ho rece	ived	moi	re th	an	\$100	0,00	53,000. O in reportable co	npensation from t				0.
organization												Yes	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or truste	e, k	еу е	mpi	oye	e, or	hıgl	hest compensated	l employee	-	3		х
For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the	ortable	com	pen	Isatı İ'Ye	on a	and o	othe	r compensation fr	om ech				
ındıvıdual								•		-	4		X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sch	edule J	for s	uch	m ai per	son	ınreı	ateo	organization for s	services		5		Х
Section B. Independent Contractors 1 Complete this table for your five highest compensate	ad inder	ond:	ant (cont	ract	ore :	that	received more tha	an \$100 000 of				
compensation from the organization			SIII (COITE			triat	Tecerved more and					
(A) Name and business addres	s							Description	of Services	Co	mpe	C) nsatio	<u>on</u>
									-				
	_												
2 Total number of independent contractors (including to compensation from the organization.	those in	1) v	vho	rece	eived	d mo	ore ti	han \$100,000 in					

Par	t VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c	20.500			
	h Total. Add lines 1a-1f Business Code	38,602.			
PROGRAM SERVICE REVENUE	2a School Tuition & Related Fees 0 b c	516,246.	516,246.	0.	0.
S	<u> </u>				
ROGRA	f All other program service revenue g Total. Add lines 2a-2f	516,246.			
OTHER REVENUE	Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal Gaross Rents (ii) Real (iii) Personal Royalties (ii) Real (iii) Personal Royalties (iii) Real (iii) Personal Royalties (iv) Real (iv) Personal (iv) Person				
	Miscellaneous Revenue Business Code 11 a b c				
	d All other revenue .				
	e Total. Add lines 11a-11d			-	
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	554,848.	516,246.	0	. 0.

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do i	not include amounts reported on lines 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	1,245.	1,245.		
2	Grants and other assistance to individuals in the U.S. Soc 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	53,000.	37,100.	7,950.	7,950.
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	237,198.	237,198.	0.	0.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	18,069.	18,069.	0.	0.
10	Payroll taxes	25,914.	25,914.	0.	0.
11	Fees for services (non-employees) .				
á	Management .	7,561.	0.	0.	7,561.
ı	Legal	160.	160.	0.	<u> </u>
•	Accounting , .	2,782.	2,782.	0.	0.
•	Lobbying				
•	Prof fundraising svcs. See Part IV, In 17				
1	Investment management fees .				
	g Other				
12	Advertising and promotion				
13	Office expenses	17,423.	17,423.	0.	0.
14	Information technology	4,027.	4,027.	0.	0.
15	Royalties				
16	Occupancy	28,850.	28,850.	0.	0.
17 18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials	4,487.	4,487.	0.	0.
19	Conferences, conventions, and meetings	5,515.	5,515.	0.	0.
20	Interest	261.	261.	0.	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
	Insurance 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.)				
	Camp Expense	13,852.	13,852.	0.	0.
	Membership Dues	3,113.	0.	3,113.	<u> </u>
•	Marketing Expense	12,356.	12,356.	0.	0.
	Insurance	7,236.	7,236.	0.	<u> </u>
	Athletics	21,104.	21,104.	0.	0.
	All other expenses	80,260.	77,450.	0.	2,810.
	Total functional expenses Add lines 1 through 24f	544,413.	515,029.	11,063.	18,321.
26 BAA	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				Form 990 (2008)
					. 31111 330 (2000)

<u> </u>		- Dalatice office		(A) Beginning of year		(B) End of year		
	1	Cash – non-interest-bearing		-7,760.	1	-23,149.		
	2	Savings and temporary cash investments			2	9,343.		
	3	Pledges and grants receivable, net		0.	3			
	4	Accounts receivable, net		42,710.	4	40,555.		
	5	Receivables from current and former officers, directors, tr or other related parties. Complete Part II of Schedule L.	ustees, key employees,		5			
	6	Receivables from other disqualified persons (as defined u	nder section 4958(f)(1))					
		and persons described in section 4958(c)(3)(B) Complete	Part II of Schedule L		6			
A S S E T S	7	Notes and loans receivable, net		0.	7			
S E	8	Inventories for sale or use	•		8			
T S	9	Prepaid expenses and deferred charges			9			
	10a	Land, buildings, and equipment cost basis 1	0 a					
		Less accumulated depreciation Complete Part VI of						
		• • • • • • • • • • • • • • • • • • • •	0ъ		10 c			
	11	Investments – publicly-traded securities			11			
	12	Investments – other securities See Part IV, line 11			12	0.		
	13	Investments – program-related See Part IV, line 11	•		13			
	14	Intangible assets			14	 		
	15	Other assets See Part IV. line 11		20,480.	15	50,608.		
	16	Total assets. Add lines 1 through 15 (must equal line 34)		55,430.	16	77,357.		
—	17		·		17	22,080.		
	17 Accounts payable and accrued expenses16,430. 1718 Grants payable18							
	19	Deferred revenue			19			
Ļ	20	Tax-exempt bond liabilities			20			
Ā	21	Escrow account liability Complete Part IV of Schedule D		······································	21			
A B I L I T	22	Payables to current and former officers, directors, trustee	s kov omplovoos					
Ļ	22	highest compensated employees, and disqualified person	s, key employees, s. Complete Part II					
- 1		of Schedule L	·	12,000.	22	12,000.		
E S	23	Secured mortgages and notes payable to unrelated third	parties		23	5,000.		
	24	Unsecured notes and loans payable			24			
	25	Other liabilities Complete Part X of Schedule D			25			
	26	Total liabilities. Add lines 17 through 25		28,430.	26	39,080.		
		Organizations that follow SFAS 117, check here	and complete lines					
N E T	İ	27 through 29 and lines 33 and 34.	,	ļ	1			
Ą	27	Unrestricted net assets		27,000.	27	38,277		
ASSE	28	Temporarily restricted net assets			28			
Š	29	Permanently restricted net assets			29			
Q R		Organizations that do not follow SFAS 117, check here	► and complete					
		lines 30 through 34.			} }			
F, DND	30	Capital stock or trust principal, or current funds			30			
	31	Paid-in or capital surplus, or land, building, and equipme	nt fund		31			
ţ	32	Retained earnings, endowment, accumulated income, or			32			
BALAZCES	33	Total net assets or fund balances.	ottioi iailao	27,000.	33	38,277		
Ĕ	34	Total liabilities and net assets/fund balances		55,430.	34	77,357		
Pa	art X			3371301	13.1	,,,,,,,,,		
		Theretal otatomores and itoporting				Yes No		
1	Αc	counting method used to prepare the Form 990: X Cas	h Accrual	Other				
		ere the organization's financial statements compiled or revi	<u> </u>			2a X		
-		ere the organization's financial statements complied by an in		Coountain		2b X		
		Yes' to 2a or 2b, does the organization have a committee t		for oversight of the au	- -			
	rev	riew, or compilation of its financial statements and selection	n of an independent accou	intant?	411,	2c		
3		a result of a federal award, was the organization required dit Act and OMB Circular A-133?			ıngle			
						3a X		
_	_	Yes,' did the organization undergo the required audit or au	dits?			3b		
BA	A					Form 990 (2008		

SCHEDULE A (Form'990 or 990-EZ)

Public Charity Status and Public Support

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

nonexempt charitable trusts.

Open to Public Inspection

OMB No 1545-0047

2008

Total

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

Department of the Treasury Internal Revenue Service Employer Identification number Name of the organization 80-0117857 Franklin Christian Academy Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 1 2 X A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 11 Type III- Other d l Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) 11 g (i) below, the governing body of the supported organization? 11 g (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the organizations the organization supports. h (iii) Type of organization (described on lines 1-9 above or IRC section (v) Did you notify the organization in col (i) of your support? (vii) Amount of Support (i) Name of Supported Organization (II) EIN (iv) Is the (vi) Is the organization in col (i) organized in the US? organization in co isted in your) governing document? (see instructions)) Yes No Yes No Yes No

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

Schedule A (Form 990 or 990-EZ) 2008

Par	t II Support Schedule for (-			(b)(1)(A)(iv) and	d 170(b)(1)(A)(v	vi)		
	(Complete only if you checke	d the box on line	5, 7, or 8 of Part	l.)					
<u>Sec</u>	tion A. Public Support		Г.		T				
begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total		
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')								
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf								
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					-			
4	Total. Add lines 1-3								
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)								
6	Public support. Subtract line 5 from line 4								
Sec	tion B. Total Support	·		T	<u> </u>				
	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total		
7	Amounts from line 4								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources								
9	Net income form unrelated business activities, whether or not the business is regularly carried on								
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV.)								
11	Total support. Add lines 7 through 10				<u>.</u>	<u> </u>			
12	Gross receipts from related active	rities, etc. (see in:	structions)			12			
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	or fifth tax year as	a section 501(c)(3	⁾ ► □		
	tion C. Computation of Pu						1 2		
14 15				e 11, column (f)		. 15	% %		
16	a 33-1/3 support test — 2008. If th and stop here. The organization	e organization did qualifies as a pul	I not check the bo blicly supported o	x on line 13, and rganization	the line 14 is 33-	1/3 % or more, che	eck this box		
1	b 33-1/3 support test — 2007. If th and stop here. The organization	e organization did qualifies as a pul	l not check a box olicly supported or	on line 13, or 16a ganization.	a, and line 15 is 33	8-1/3% or more, ch	eck this box ►		
17	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstances	s' test, check this	box and stop here	e. Explain in Part I'	V how		
ļ	b 10%-facts-and-circumstances test — 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.								
18	Private foundation. If the organi						tructions		

Page 3 Schedule A (Form 990 or 990-EZ) 2008 Franklin Christian Academy 80-0117857 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal yr beginning in) (a) 2004 (c) 2006 **(d)** 2007 (f) Total **(b)** 2005 (e) 2008 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1-5 7a Amounts included on lines 1, 2, 3 received from disqualified persons b Amounts included on lines 2 and 3 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 Add lines 7a and 7b

7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b Net income from unrelated business activities not included inline 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 Ins 9, 10c, 11, and 12)						
14 First five years. If the Form 990 organization, check this box and	is for the organiza stop here .	ition's first, second	d, third, fourth, or	r fifth tax year as a	section 501(c)(3)	▶ □

Sec	tion C. Computation of Public Support Percentage		
15	Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
_16	Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%
Sec	ction D. Computation of Investment Income Percentage		
17	Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%
19 a	a 33-1/3 support tests – 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3% more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	, and	line 17 is not . ►
ı	o 33-1/3 support tests – 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33- is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organiza	1/3%, ation	and line 18 ►
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instruction	ons	▶□

Public support (Subtract line

Schedule A	(Form 990 or	990-EZ)	2008_	Frank	lin Ch	risti	an Acad	lemy_	80-011	.7857 <u>F</u>	age 4
Part IV	Supplemer	ntal Info	ormatio	on. Con	nplete t	his par	t to prov	ide the	explanation required by Fadditional information. (se	art II, line 10;	
	Part II, line	: 17a oı	r 17b; մ	or Part	III, line	12. Pro	ovide any	y other	additional information. (se	e instructions)	
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Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Schedule **D** (Form 990) 2008

Name of the organization	Employer Identification number							
Franklin Christian Academy	80-0117857							
Part I Organizations Maintaining Donor Advised F								
the organization answered 'Yes' to Form 990	, Part IV, line 6.							
(a	Donor advised funds (b) Funds and other accounts						
1 Total number at end of year								
Aggregate contributions to (during year)								
Aggregate grants from (during year) .								
4 Aggregate value at end of year								
5 Did the organization inform all donors and donor advisors in funds are the organization's property, subject to the organiza-		d . Yes No						
6 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?? No Yes No								
Part II Conservation Easements Complete if the or	ganization answered 'Yes' to Form	990, Part IV, line 7.						
1 Purpose(s) of conservation easements held by the organizat								
Preservation of land for public use (e.g , recreation or pl		orically important land area						
Protection of natural habitat	Preservation of certified	d historic structure						
Preservation of open space								
2 Complete lines 2a-2d if the organization held a qualified con of the tax year	servation contribution in the form of a cons	ervation easement on the last day						
er tro tax year		Held at the End of the Year						
a Total number of conservation easements								
b Total acreage restricted by conservation easements	2b							
c Number of conservation easements on a certified historic str	ucture included in (a) 2c							
d Number of conservation easements included in (c) acquired	after 8/17/06 2d							
3 Number of conservation easements modified, transferred, re	eased, extinguished, or terminated by the	organization during the taxable						
year ▶								
4 Number of states where property subject to conservation eas	ement is located >							
5 Does the organization have a written policy regarding the peenforcement of the conservation easement it holds?	riodic monitoring, inspection, violations, an	d Yes No						
6 Staff or volunteer hours devoted to monitoring, inspecting, a								
7 Amount of expenses incurred in monitoring, inspecting, and	enforcing easements during the year <a> \$	<u> </u>						
8 Does each conservation easement reported on line 2(d) abo 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	ve satisfy the requirements of section	Yes No						
9 In Part XIV, describe how the organization reports conserval include, if applicable, the text of the footnote to the organiza- conservation easements	ion easements in its revenue and expense tion's financial statements that describes the	statement, and balance sheet, and ne organization's accounting for						
Part III Organizations Maintaining Collections of A	rt, Historical Treasures, or Other	Similar Assets						
Complete if the organization answered 'Yes								
1 a If the organization elected, as permitted under SFAS 116, not treasures, or other similar assets held for public exhibition, of the text of the footnote to its financial statements that described the statements.	ducation, or research in furtherance of pub	lance sheet works of art, historical blic service, provide, in Part XIV,						
b If the organization elected, as permitted under SFAS 116, no treasures, or other similar assets held for public exhibition, amounts relating to these items	ot to report in its revenue statement and ba education, or research in furtherance of pub	olic service, provide the following						
(i) Revenues included in Form 990, Part VIII, line 1		. > \$						
(ii) Assets included in Form 990, Part X		. •\$						
2 If the organization received or held works of art, historical tr amounts required to be reported under SFAS 116 relating to	easures, or other similar assets for financia these items:	I gain, provide the following						
a Revenues included in Form 990, Part VIII, line 1		► \$						
b Assets included in Form 990, Part X	••	. * \$						

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

Schedule D (Form 990) 2008 Frank	lin Christ	ian Academi		00 011	7057	Page 9
Part III Organizations Maintai			rical Traccuras at	Other Similar Acc		Page 2
Using the organization's accession that apply)				**		
		. معمدات الم	or ovehenge programs			
=			or exchange programs			
b Scholarly research		e U Other			· · · · · · · · · · · · · · · · · · ·	
c Preservation for future genera			Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale and Ale an			
4 Provide a description of the organ Part XIV			-		ın	
5 During the year, did the organizat assets to be sold to raise funds ra	ion solicit or rece	eive donations of art,	historical treasures, or of	other similar	☐ Yes 「	No
						
IV, line 9, or reported	an amount or	n Form 990, Part	X, line 21.	answered res to r	-onii 990, F	
1a is the organization an agent, trust included on Form 990, Part X?	tee, custodian, o	r other intermediary t	for contributions or other	assets not	Yes [No
b If 'Yes,' explain the arrangement	in Part XIV and	complete the followin	g table:			
					Amount	
c Beginning balance			•	1c		
d Additions during the year		•		1 d		
e Distributions during the year				1 e		
f Ending balance			•	1 f		
2a Did the organization include an ar	mount on Form 9	90, Part X, line 21?			Yes	No
b If 'Yes,' explain the arrangement	ın Part XIV					_
Part V Endowment Funds Cor	mplete if orga	anization answer	ed 'Yes' to Form 99	0, Part IV, line 10.		
	(a) Current yea	r (b) Prior yea	r (c) Two years back	(d) Three years back	(e) Four yea	rs back
1 a Beginning of year balance						
b Contributions .						
c Investment earnings or losses						- h.
d Grants or scholarships						
Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage	of the year end	balance held as:		•		
a Board designated or quasi-endow	-	8				
b Permanent endowment						
c Term endowment ►						
3a Are there endowment funds not in	the possession	of the organization t	hat are held and admını	stered for the		No.
organization by					Yes	No
(i) unrelated organizations			•		3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(ıı), are the related o	_	*		•	3b	<u> </u>
4 Describe in Part XIV the intended						
Part VI Investments-Land, B						
Description of investment	(a	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book \	√alue ————
1 a Land		-			<u> </u>	
b Buildings				· · · · · · · · · · · · · · · · · · ·		
c Leasehold improvements						
d Equipment						
e Other						

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Schedule **D** (Form 990) 2008

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

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Part VII Investments—Other Securities See		80-0117837 Tage 3
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products	0.	
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990 Part X, col. (B) line 12.)	0.)\
Part VIII Investments—Program Related (Se		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. Column (b)(should equal Form 990, Part X, Col (B) line 13.)	V line 15)	
Part IX Other Assets (See Form 990, Part		(b) Book value
Furniture & Fixtures) Description	7,650.
Equipment		20,392.
Investments-Other		0.
Other Assets	-	0.
Land Escrow Fund (96 West Property)	10,000.
Architectural & Engineering - New		12,566.
Total. Column (b) Total (should equal Form 990, Part X,		. ▶ 50,608.
Part X Other Liabilities (See Form 990, P	art X, line 25)	
(a) Description of Liability	(b) Amount	
Federal Income Taxes		
T. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.		
Total. Column (b) Total (should equal Form 990, Part X, col (B) line 25		I II
In Part XIV, provide the text of the footnote to the organ positions under FIN 48.	nization's financial statements that	reports the organization's liability for uncertain tax

	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	-0117657 Tage 4
		
1	Total revenue (Form 990, Part VIII,column (A), line 12)	
2	Total expenses (Form 990, Part IX, column (A), line 25)	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	<u> </u>
6	Investment expenses	ļ
7	Prior period adjustments	•
8	Other (Describe in Part XIV)	•
9	Total adjustments (net) Add lines 4-8	•]
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
á	Net unrealized gains on investments]
ł	Donated services and use of facilities 2b	<u>.</u>
•	Recoveries of prior year grants 2c]
(Other (Describe in Part XIV)	
•	Add lines 2a through 2d	
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	1
á	Investments expenses not included on Form 990, Part VIII, line 7b	<u> </u>
ŀ	Other (Describe in Part XIV)	
	Add lines 4a and 4b	4c
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return
1	Total expenses and losses per audited financial statements .	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
á	Donated services and use of facilities 2a	<u>.</u> 1
ŀ	Prior year adjustments 2b]
•	Losses reported on Form 990, Part IX, line 25	1
(Other (Describe in Part XIV)	
•	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
	Investments expenses not included on Form 990, Part VIII, line 7b	_
I	Other (Describe in Part XIV)	
(Add lines 4a and 4b	4c
	Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)	5
Pa	t XIV Supplemental Information	
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, li 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b	
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Schedule D (Form 990) 2008 Franklin Christian Academy Part XIV Supplemental Information (continued)	80-0117857	Page 5
Fart AIV Supplemental Information (Continued)		
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Schedule **D** (Form 990) 2008

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SCHEDULE E (Form 990 or 990-EZ)

Schools

OMB No 1545-0047

Employer Identification number

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

e Educational policies?

f Use of facilities?

g Athletic programs?

h Other extracurricular activities?

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

80-0117857 Franklin Christian Academy YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 X 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 Х 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 had 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 . X 3 Included policy in newspaper, magazine, web site, school newsletter, applications & marketing materials. Does the organization maintain the following? Х 4a a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially 4b Х nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c X d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Х If you answered 'No,' to any of the above, please explain (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to 5a Х a Students' rights or privileges? **b** Admissions policies? 5b Х 5 c X c Employment of faculty or administrative staff? 5d X d Scholarships or other financial assistance?

6a Does the organization receive any financial aid or assistance from a governmental agency? **b** Has the organization's right to such aid ever been revoked or suspended?

If you answered 'Yes,' to any of the above, please explain (If you need more space, attach a separate statement.)

b Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes,' to either line 6a or line b, please explain using an attached statement.

7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4 05 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If 'No,' attach an explanation

Schedule E (Form 990 or 990-EZ) 2008

5e

5f

5g

5h

6a

6b

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Х

Х

X

X

Х

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047 2008

Open to Public

Department of the Treasury

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

Internal Revenue Service	or	Form 99	0-EZ, Part V, line 38a or 4	10b.				Insp	ection	
Name of the organization	Employer identification number									
Franklin Christian Academy					80-011	1785	7			
Part I Excess Benefit Transactions To be completed by organizations the	s (sect	tion 50 ered 'Yes	1(c)(3) and section 5 on Form 990, Part IV, III	01(c)(4) organ ne 25a or 25b, or Fe	ızations orm 990-l	only Z, Pa	y). rt V, lı	ne 40	 o.	
1 (a) Name of disqualified person			(h) Description of transacti					(c) Cor	rected?
1 (a) Name of disqualified person									Yes	No
2 Enter the amount of tax imposed on the or section 4958 3 Enter the amount of tax, if any, on line 2, a Part II Loans to and/or From Intere To be completed by organiza	above, i sted F	reimburs Persons	ed by the organization			► \$ ► \$	orm	990	·EZ,	
Part V, line 38a. (a) Name of interested person and purpose	(b) Loar	n to or from	(c) Original	(d) Balance due	e due (e) In default?		(f) Approved		(g) W	/ritten
	the org	From	principal amount				comm	cómmittee?		ment?
Hugh Harris Operating Funds	+	7 10111	12,000.	12,00		Х	х		Yes	110
	-					ļ		<u> </u>		
								<u> </u>		
Total			▶ \$_	12,00	0.	l		<u>. </u>		<u> </u>
Part III Grants or Assistance Benefit To be completed by organization	i tting ations	Interes that an	ted Persons. Iswered 'Yes' on For	m 990, Part IV	, line 2	7.				
(a) Name of interested person		(b) Relation	ship between interested person a the organization	and (c) Amount o	f grant	or type o	of assis	ance	
	1							_		
	<u> </u>	 -						_		

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 organization's revenues? (b) Relationship between interested person and the organization (d) Description of transaction (a) Name of interested person (c) Amount of transaction \$ Yes

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

Schedule L (Form 990 or 990-EZ) 2008

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

 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.

Name of the organization	Employer identification number
Franklin Christian Academy	80-0117857
Pt VI-A, Line 10 Review of return during monthly board meeting.	~
Pt VI-B, Line 12c Review of & monitoring during annual board retrea	t of board policy manual.
Pt_VI-C, Line 19 Available in corporate office and in annual repo	ort available to public.
Pt VI-A, Line 8 Review of policy within board meeting.	~·
	~

Supporting Statement of:

Form 990 p 2/Line 4a Expenses

Description	Amount
Program Exp from Pg 10	515,029.
Total	515,029.

Supporting Statement of:

Form 990 p 2/Line 4a Revenue

Description	Amount
Inc per Prog Serve	516,245.
Total	516,245.

Supporting Statement of:

Form 990 p 9/Fundraising Events

Description	Amount
Coffee House	11,826.
Total	11,826.

Supporting Statement of:

Form 990 p 9/Line 2 Total Revenue-1

Description	Amount
All other lines from Inc Stmt	516,246.
Total	516,246.

Supporting Statement of:

Form 990 p 9/Line 2f Oth Rel/Exmpt -1

Description	Amount
Income From Income Stmt	516,246.
Total	516,246.

Supporting Statement of:

Form 990 p 9/Other amt. not included

Description	Amount
Donations (from Inc Stmt)	12,398.
Capital Campaign Donations (from Inc Stmt)	14,378.
Total	26,776.

Supporting Statement of:

Form 990 p 10/Line 1 col (B)

Description	Amount
Giving from Inc Stmt	1,245.
Total	1,245.

Supporting Statement of:

Form 990 p 10/Line 10 col (B)

Description	Amount
Payroll Taxes from Inc Stmt	25,914.
Total	25,914.

Supporting Statement of:

Form 990 p 10/Line 11a col (D)

Description	Amount
Contract Labor from Inc Stmt	7,561.
Total	7,561.

Supporting Statement of:

Form 990 p 10/Line 13 col (B)

Description	Amount
Office Supplies from Inc Stmt	11,354.
Equipment from Inc Stmt	-27.
Telephone from Inc Stmt	4,347.
Postage & Shipping from Inc Stmt	951.

Continued

Ciimmodine Cielenced	
Supporting Statement	ot:

Form 990 p 10/Line 13 col (B)

Description	Amount
School Supplies from Inc Stmt	298.
Filing Fees from Inc Stmt	500.
Total	17.423.

Supporting Statement of:

Form 990 p 10/Line 14 col (B)

Description	Amount
Administrative Software from Inc Stmt Equipment from Inc Stmt	2,070. 1,957.
Total	4,027.

Supporting Statement of:

Form 990 p 10/Line 19 col (B)

Description	Amount
Conference Exp from Inc Stmt	1,754.
Meetings Exp from Inc Stmt	3,365.
Student Meetings from Inc Stmt	396.
Total	5,515.

Supporting Statement of:

Form 990 p 10/Line 20 col (B)

Description	Amount
Interest from Inc Stmt	21.
Bank Fees from Inc Stmt	240.
Total	261.

Supporting Statement of:

Form 990 p 10/Line 24 col (B)-5

Description	Amount
Football from Inc Stmt	7,199.
Basketball from Inc Stmt	7,892.
Volleyball from Inc Stmt	1,714.
Soccer from Inc Stmt	1,930.
Baseball from Inc Stmt	2,369.
Total	21,104.

Supporting Statement of:

Form 990 p 10/Line 24f col (B) -1

Description	Amount
Textbooks from FCA Inc Stmt	8,704.
Week Without Walls from FCA Inc Stmt	18,428.
End of Yr Student Activities from FCA Inc Stmt	6,348.
Tution Refund from FCA Inc Stmt	
Testing Fees from FCA Inc Stmt	1,372.
Teachers Resources & Supplies	681.
Science Supplies	256.
Cost of Sales Books	1,344.
Cost of Sales Mercg	2,397.
Total	39,530

Supporting Statement of:

Form 990 p $10/Line\ 24f\ col\ (D)\ -3$

Description	Amount	
Fundraiser -Coffee House from Inc Stmt	2,147.	
Golf tour from Inc Stmt	663.	
Total	2.810.	

Supporting Statement of:

Form 990 p 10/Line 5 col (A)

Description	Amount
Harris compensation	53,000.

Total _____53,000.

Supporting Statement of:

Form 990 p 10/Line 5 col (D)

Description	Amount
15% of Harris compensation	7,950.
Total	7,950.

Supporting Statement of:

Form 990 p 10/Line 7 col (B)

Description	Amount
Salaries & Wages from FCA Inc Stmt less Harris	237,198.
Total	237,198.

Supporting Statement of:

Form 990 p 10/Line 9 col (B)

Description	Amount
Health Ins. from Inc Stmt	17,794.
Other Employee Benefits from Inc Stmt	275.
Total	18,069

Supporting Statement of:

Form 990 p 11/Line 1, column (A)

Description	Amount
Pinnacle Checking from FCA Bal Sheet	-13,782.
Pinnacle Savings from FCA Bal Sheet	5,568.
Commonwealth Schol Fund from FCA Bal Sheet	454.
Total	-7,76

Supporting Statement of:

Form 990 p 11/Line 1, column (B)

Description	Amount
Pinnacle Checking from FCA Bal Sheet	-25,527.
Pinnacle Capital Campaign Fund	1,924.

Continued

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Sup	porting	Statement	of:

Form 990 p 11/Line 1, column (B)

Description	Amount
Commonwealth Schol Fund from FCA Bal Sheet	454.
Total	-23,149.

Supporting Statement of:

Form 990 p 11/Line 17, column (A)

Description	Amount
Accounts Payable from FCA Bal Sheet Federal Payroll Taxes Pay from FCA Bal Sheet	16,633. -203.
Total	16,430.

Supporting Statement of:

Form 990 p 11/Line 17, column (B)

Description	Amount
Accounts Payable from FCA Bal Sheet	22,080.
Total	22,080.

Supporting Statement of:

Form 990 p 11/Line 2, column (B)

Description	Amount
Pinnacle Savings from FCA Bal Sheet	9,343.
Total	9,343.

Supporting Statement of:

Form 990 p 11/Line 22, column (A)

Description	Amount
Temporary Loan H. Harris from FCA Bal Sheet	12,000.

Total

12,000.

Supporting	Statement of:
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Form 990 p 11/Line 22, column (B)

Description	Amount
Temporary Loan H. Harris from FCA Bal Sheet	12,000.
Total	12,000.

Supporting Statement of:

Form 990 p 11/Line 23, column (B)

Description	Amount
Pinnacle Bank Line of Credit	5,000.
Total	5,000.

Supporting Statement of:

Form 990 p 11/Line 27, column (A)

Description	Amount
Total Fund Balance (Capital) from FCA Bal Sheet	27,000.
Total	27,000.

Supporting Statement of:

Form 990 p 11/Line 27, column (B)

Description	Amount
Total Fund Balance (Capital) from FCA Bal Shee	38,277.
Total	38.277.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

to pursue rigorous college-bound academics within a caring community, experienced through vital, committed relationships among faculty, students, and parents. We honor Jesus Christ by integrating Christian discipleship into an academic setting that includes fine arts, athletics and global missions.