

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# Form **990**

## **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 .

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A	For t	he 200	8 cale	ndar y	er, or tax y	ear beginnir	ng		07/01	, 20	08, and	ending			06/	/30 , 20	09	
В	Check if a	ppōcable	Picase	C Name	of organization	HUDSON	MON'	ressor:	I ASS	OCIA	TION		D Em	oloyer Id	entific	ation num	ber	
Г	Add		use IRS label or	I Down	Business As	HUDSON							34	-090	3793	3		
Γ		e change	print or		per and street	or PO box if ma						Room/se		phone n			-	
	Indu	d return	type. See	7545	DARROW	ROAD							13	30)6	50-0	1424		
<u> </u>	-	mination	Specific	City		country, and ZII	P + 4						1	<u> </u>	<u> </u>	7343		
┢	Ame	inded	Instruc- tions.	1	ON. OH. 4	14226							G Gm	ss receip	ts S	2	c c 1	FOC
⊢	retur	rn lication		TWODS	on. On 4	rincipal officer	' T OD:	T 1/0001						his a gro			Yes	,596. x No
L	pend	ding					. TOK	I MCCOI	NNAUG	HEI			aff	liates?	•			н
_	Taylo			$\overline{}$	C ABOVE		Π.	0.47(-)(4)	<u> </u>				<del></del>	e ali effila			Yes	No
<u> </u>		xempt st			1(c) ( 3 ) ◀	-		947(a)(1) o		527						(see instruc	lioris)	
<u></u>		ite: 🕨		$\overline{}$		SORI.ORG		Т			<del></del>					mber -		
K		of organ			rporation	Trust Ass	ociation	Othe	er 🕨			Year of for	mation 19	62 M	State c	of legal do	micile	OH
Р	art I		nmary	·														
	1					mission or me												
9	<b>≀</b>	<u>TO 1</u>	OSTI	ER A	<u>MONTESSO</u>	RI EDUCA	TION	AL_ENV	<u>IRON</u>	<u>ENT</u>	COND	<u>UCIVE</u>	TO EAC	H				
Ē		CHI	<u>D'S</u>	UNIQ	<u>UE QUALI</u>	TIES AND	<u>ABI</u>	<u>LITIES</u>	<b></b>									
9					<u></u>				<b>-</b>				- <b></b>		~			
Governance	2					anızation disco								sets				
ě	3	Numb	er of vo	oting me	mbers of the	governing bod	iy (Pari	VI, line 1a	)	Γ	·RF(	CEIV	ED	.	3		:	10
Activities &	4											<del></del>	••••	ا اد	4			10
Ξ	5	Total r	number	r of emp	loyees (Part V	mbers of the ( , line 2a) ite if necessary				1			010		5			42
Ac	6	Total r	number	r of volu	nteers (estima	te if necessary	η				. MAY	. Z 4 4	010 : 10	زاا	6		12	26
	7a	Total	ross u	ınrelated	l business rev	enue from Parl	t VIII, li	ne 12, colu	mn (C)	$\Gamma \Gamma$					7 a			
_	b	Net ur	related	d busine	ss taxable inc	ome from For	m 990-	T, line 34	<u></u>	1::-	001	DE AL	117		7 b			
	1									L	001		Prior	Year		Curr	ent Ye	ar
•	, 8	Contri	bution	and grai	nts (Part VIII, i	line 1h)						[	32	23,20	27.		184,	451.
Revenue	9	Progra	m serv	vice reve	nue (Part VIII,	line 2g)							2,2	25,58	13.	2,	329,	965.
ě	10	Invest	ment ir	ncome (I	Part VIII, colu	mn (A), lines 3	, 4, and	d 7d)						22,16	53.			128.
Œ	11	Other	revenu	ie (Part	VIII, column (	A), lines 5, 6d,	8c, 9c	, 10c, and	11e)			[	1:	17,47	0.			630.
	12	Total r	evenue	e - add li	nes 8 throug	h 11 (must equ	ual Parl	VIII, colun	nn (A), li	ne 12)		: : : : [		8.42				174.
	13					Part IX, column											<u> </u>	NONE
	14	Benefi	ts paid	to or fo	r members (P	art IX, column	(A), lin	e 4)						-				NONE
	15	Salarie	s. othe	er comp	ensation, emi	oloyee benefits	(Part I	X. column	(A), line:	 5-10)			1.4	70,99	15	1	555	406.
Expenses	16a					IX, column (A)								0,22	· · ·		<u> </u>	NONE
ē	h	Total f	undrais	sina exo	enses. Part IX	, column (D), li	ine 25)		٠	 873	• • • •		4-35		\ \(\begin{array}{c} \cdot \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	W. F. 188	Ī.	10 TONE
ŭ	17	Other	eynens	ses (Parl	IX column (/	A), lines 11a-11	id 11f.	 -24fi		وردري		+		0,30			020	190.
	18	Total e	vnense	es Add	lines 13-17 (r	nust equal Par	tiX co	dumn (A) h	ne 25\	• • •								
	19					ne 18 from line								$\frac{1.30}{17.12}$				<u>596.</u>
58		1CVCII	ue 1633	э схренз	es Gubilace II	ine to nomina	<u>. 12.</u>	<u> </u>	· · · · ·	<del></del>	<u></u>	• • • •	Beginnin		-	End	of Yea	<u>578.</u>
8	20	Total	eeste /	(Part X, ii	ne 16\							⊦			-			
Net Assets Fund Raisn	21				(, line 26)		• • •			• • •	• • • •	$\cdots \cdot \vdash$		2,98				105.
25	22			•		ract line 21 froi	• • •		· · · ·	• • •	• • • •	-		6, 69				<u>236.</u>
				e Block		act line 21 iroi	m iine a	20	<del></del>	• • •	• • • • •	• • • • • •	1,61	6.29	1.1	1.	660,	<u>869.</u>
	art II	<del></del>			_													
		and be	penalue مراه , elief	es or per	ury, i declare i	that I have exa mplete Declara	mined tation of	nis return, i preparer (o	including ther that	accom office	ipanying : ir) is base	schedules ed on all i	and statement Information of	nts, and f which	to the	e bestofr rerhas ar	ny kno Ny kno	wledge wledge
	Sign	١.	/#	10	18/-								1	M	11	.201	N	•
	lere	<b>D</b> 3	(_A)	re of office	. (/ [/ <del>5</del> 0] [/4				0					ate /	7 / 1	1001	<u> </u>	
•	1616					loom, to	ر. مراک	low B	$\mathcal{U}_{\cdot}$	T.	-							
		🕨 🥫	or	print nam		100m 1.	7 2 3 12	000	or or	J //	whee	<b>3</b>				-		
_		-	-	Pilit ilaii	- Land due					ate .		Check	<del>1</del>	Prens	ror'e k	dentifying r	umber	<del></del>
Paid	i	Prepa   signat		113	~ . li	3		r Pa		5/1	41.	self-			nstruct		101111001	
	- parer's	1 <del></del>			<u>~~~</u>	200				- [ ]	7/10	employ	<del></del>	Щ		028555		
,	Only	if self-e	name (c	d).		& MOORE,	LTD						EIN			<u>-18182</u>		
<del></del>			s, and Z			OR AVE, STE				114			Phone no		210	6-241-	$\neg  o$	
=	<u></u>					arer shown ab				• • •	<u></u>	• • • • •	<u></u>	<del></del>	<u> </u>	X Yes		No
For	Priva	cy Act	and Pa	perwork	Reduction	Act Notice, see	e the s	eparate ins	truction	<b>15.</b>						Form	990	(2008)

SX6809 5744

916-17

Form 990 (2008)	34-0903793	Page 2
Part III Statement of Program Service Accomplishments (se	e instructions)	
Briefly describe the organization's mission		
SEE STATEMENT 1		
2 Did the organization undertake any significant program serv	rices during the year which were not listed	on
the prior Form 990 or 990-EZ?	note that me your times were not noted.	Yes X No
If "Yes" describe these new services on Schedule O		
3 Did the organization cease conducting, or make significant c	hanges in how it conducts, any program	
services?		Yes X No
if "Yes," describe these changes on Schedule O		Lies Kino
4 Describe the exempt purpose achievements for each of the org	anization's three largest program services by 6	expenses
Section 501(c)(3) and 501(c)(4) organizations and section 494		
allocations to others, the total expenses, and revenue, if any, for		n or granto and
,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,	, caon program con nos reportes	
4a (Code ) (Expenses \$ 1,771,887. including gr	anto of \$	<del></del>
		2,068,362.
INSTRUCTIONAL - PRE-SCHOOL, ELEMENTARY A		
CLASSROOMS SERVING CHILDREN AGED 2 1/2 TO		
MONTESSORI METHOD OF EDUCATION IS BASED (		<del></del>
PEDAGOGY SET OUT BY DR. MARIA MONTESSORI		
CHILDREN WHO HAVE ATTENDED MONTESSORI SCI		
THEIR ABILITIES, MOTIVATED TO ACHIEVE NEW		
HAVE A LOVE OF LEARNING. 267 CHILDREN END	ROLLED IN FY2009.	
<b>4 b</b> (Code) (Expenses \$169,470including gi	ants of \$) (Revenue \$	109,104. )
CHILD CARE - BEFORE AND AFTER SCHOOL PROC	GRAMS CONTINUING	
THE MONTESSORI METHOD WITH ENRICHING CARE	£.	
·	<del></del>	
As (Code ) (Emerces \$ as as including gra	nte of \$	
4c (Code) (Expenses \$16,295, including gra		16,730.
SUMMER PROGRAMS - VARIOUS CAMP AND EDUCAT	'IONAL PROGRAMS ALSO	
INCORPORATING THE MONTESSORI METHOD.		
	<del></del>	
4d Other program services (Describe in Schedule O ) SEE S	TATEMENT 2	
(Expenses \$ including grants of \$	) (Revenue \$ 135,769. )	
4e Total program service expenses ▶\$ 1,957,652.(Me		<del></del>
SA SA		Form <b>990</b> (2008)
E1020 1 000		1 Unin 330 (2006)

**Checklist of Required Schedules** 

			Yes	No
ì	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u>_x</u>	ļ
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	L	<u>x</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete		<u>'</u>	1
	Schedule C, Part II	4	L	X
5	Sections 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	L	
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			ļ
-	Schedule D, Part I	_6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			! 
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III  Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	8		X
9	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	9		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,	10	_ X	
	Dada M. M. M. M. D. Car V. da amplicabile	44	v	
12	Did the organization receive an audited financial statement for the year for which it is completing this return	11	<u> X</u>	
`-	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	170		
_	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		х
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	X	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
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		Х
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		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5,? If "Yes," complete			
	Schedule J	23		<u>X</u>
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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		<u>_x</u>
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		<u>X</u>
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		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or		İ	
184	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<u> </u>
JSA 8E1021	1 000	Form	990	(2008)

### Part IV Checklist of Required Schedules (continued)

			Tes	No
28 a	During the tax year, did any person who is a current or former officer, director, trustee, or key employee 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		x
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		x
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a	200		
_	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		<u>x</u> _
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	-		
	Part I	31		х
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 section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u>х</u>
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		x
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			Δ
	VI	37		х

Form **990** (2008)

#### Form 990 (2008) 34-0903793 Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . . . . . . . . Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 1 c 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 . . . L2a If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . 2b 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 covered by За Х 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial 4a 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 Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . . . . Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . Х c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding 5 c 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b 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? . Х 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7с X Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7е X 7f Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . For all contributions of qualified intellectual property, did the organization file Form 8899 as required?.... For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as 7h Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring 8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?.............. 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 . . . . . . . . . . . . . b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . 10b Section 501(c)(12) organizations. Enter

b Gross income from other sources (Do not net amounts due or paid to other sources against

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . | 12b|

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? . . .

Form **990** (2008)

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

Sèct	ion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, process, or changes in Schedule O See instructions			
1a	Enter the number of voting members of the governing body	Ì		
b	Enter the number of voting members that are independent 10	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	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 since the prior Form 990 was filed?	4	_	Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	- 1	Х
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organizations contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	_ x	
9a	Does the organization have local chapters, branches, or affiliates?	9a		Х
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?	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	х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at		1	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X
Sect	on B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
4.0	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13		<u>X</u>
14 15	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	14	Х	
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а				
	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?	15a	X	
D	Describe the process in Schedule O (see instructions)	15b	Х	
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
		16a		v
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	10a	$\dashv$	<u>x</u>
-	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	ľ	1	
	the organization's exempt status with respect to such arrangements?	166	ł	
Secti	on C. Disclosure	1001		
17	List the states with which a copy of this Form 990 is required to be filed ▶ OH.			
18	Section 6104 requires an organization to make its Forms 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	~··· <i>y</i> /		
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inter-	est		
. •	policy, and financial statements available to the public	JJ1		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	_		
	organization ►LORI MCCONNAUGHEY 7545 DARROW ROAD HUDSON, OH 44236	_		
	330-650-0424			

## 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), 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, 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

(A)	(B)			-	C)		(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee	Institutional trustee	Officer		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
JOANNA SHORE .									
PRESIDENT	2.	х		x					
HALEH AYROM-KEUCHEL	_								
TRUSTEE	2.	х							
POLLY BLOOM									
SECRETARY	2.	x		х					
RUSSELL HOWARD VICE PRESIDENT	2.	х		x					
CLANCY LAVINS									
TRUSTEE	2.	x							
KRIS LIGHTCAP									
TRUSTEE	2.	x							
DAVID SHARP TRUSTEE	2.	х							
CURT VAN BLARCUM									
TRUSTEE	2.	х							
STEVE VASEK									
TREASURER	2.	$ \mathbf{x} $		х					
GEORGE VOINOVICH TRUSTEE	2.	х							
JULIA BROWN							<u></u>		
HEAD OF SCHOOL	40.			x		_x	 100,000.		2,169.
								-	

Ρ	art VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	plo	ye	es,	and	Hig	hest Compensat	ed Employ	yees (	continue	d)	
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average hours per week	Individual trustee or director	institutional trustee	Officer		a Highest compensated at employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reporta compens from rela organiza (W-2/1099	ation ated tions	am comp fro	imated ount of other ensated im the nizated	of Ion
_			ee	stee			nsated						relate nizatio	
													_	
													,	
							_						_	
				_			_							
						-						_		
- <del>-</del>										·				
 							<u></u>							
1 b	Total	<u> </u>	<u></u>	• •			<u></u>		100,000.				2,1	<u> 169</u>
_	Total number of individuals (including those organization ► NONE	e in 1a) w	no re	ecei	vea —	mo	ore ti	nan	\$100,000 in rep	ortable co	mpens			
3	Did the organization list any former offic	er, directo	r or	tru	stee	e, k	ey e	mpl	loyee, or highest	compensa	ated		Yes	No
4	employee on line 1a? If "Yes," complete Schedu For any individual listed on line 1a, is the	sum of	report	able	e c	omp	ensa	tion	and other comp	ensation f	rom	3		<u> </u>
_	the organization and related organizations individual											4		Х
5	Did any person listed on line 1a receive services rendered to the organization? If "Yes," ction B. Independent Contractors	complete S	ie co Schedu	ile J	ens <i>I for</i>	suc	n tro h per	m son	any unrelated of	ganization	tor 	5		Х
1	Complete this table for your five highest compensation from the organization	compensate	ed in	dep	end	ent	cont	ract	ors that received	more tha	n \$10	0,000	of	
	(A) Name and business addr	ess	-		-				(B) Description of sen	лсеѕ	c	(C) ompensa	ition	
_		<del></del>							· · · · · · · · · · · · · · · · · · ·					
_								F			-			
						-		$\vdash$				<del></del>		
2	Total number of independent contractors (in compensation from the organization ► N	ncluding th	ose i	n 1	) w	'no	rece	ived	more than \$100	),000 in				

Pai	rt VII	Statement of Revenue	<u>e</u>			34-0903793		
	•				(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 b c d e f	Federated campaigns Membership dues Fundraising events Related organizations	1b 1c 1d ons)					
	<u> </u>	Total. Add lines 1a-1f	· · · · · · · · ·		184,451.			
e				Business Code				
ě	2a	TUITION			2,068,362.	2,068,362.		
ë	b	CHILD CARE			109,104.	109,104.		
Ξ̈́	С	SUMMER PROGRAM			16,730.	16,730.		
Se	d	OTHER FEES			135,769.	135,769.		
Ē	е							
Program Service Revenue	f	All other program service rever	nue [					
Ę	g	Total. Add lines 2a-2f			2,329,965.			
	3	Investment income (including other similar amounts) Income from investment of tax	dividends, intere	est, and STMT 3	8,128. NONE	8,128.		
	5	Royalties · · · · · · · ·			NONE	-		
	3	Royalties	(ı) Real	(II) Personal	NONE		<del> </del>	<del> </del>
		_		()				}
	6 a		7,418.					
	b	Less rental expenses			İ			<u> </u>
	С	Rental income or (loss) L	7,418.					_
	d	Net rental income or (loss)			7,418.	7,418.		
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(II) Other				
	b	Less cost or other basis and sales expenses						
	C	Gain or (loss)						
	d	Net gain or (loss)	ſ		NONE		<del></del>	<del> </del>
Other Revenue		Gross income from fur events (not including \$ of contributions reported on line See Part IV, line 18	ne 1c)	131,634.				
ţ	b	Less direct expenses  Net income or (loss) from fund		33,422.			·	<del>                                     </del>
0	°		ď	31MT ·/· ▶	98,212.	98,212.		<del>                                     </del>
	9 a	Gross income from gaming act See Part IV, line 19	a					
	þ	Less direct expenses					<del></del>	
	C	Net income or (loss) from gam	-	· · · · · · • •	NONE		<del></del>	-
	10a	Gross sales of inventory returns and allowances	a					
	ь	Less cost of goods sold					<del></del>	
	<u> </u>	Net income or (loss) from sales			NONE			
		Miscellaneous Revenue		Business Code				
	11a							
	ь							
	_ َ ا							<del>                                     </del>
	٦	All other revenue				·	· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>
			· · · · · · · · · -		NONE			
	e	Total Revenue Add tree 45 6		- 1	NONE			
	12	Total Revenue. Add lines 1h, 2 9c, 10c, and 11e	_		2,628,174.	2,443,723.		

### 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).

14 Information technology         NONE           15 Royalties         NONE           16 Occupancy         695,375         617,530         77,845           17 Travel         24         24           18 Payments of travel or entertainment expenses for any federal, state, or local public officials         NONE           19 Conferences, conventions, and meetings         NONE           20 Interest         NONE           21 Payments to affiliates         NONE           22 Depreciation, depletion, and amortization         NONE           23 Insurance         NONE           24 Other expenses litemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)         87,753         87,753           a ACTIVITIES & FIELD_TRIPS         43,958         43,958         43,958           b MATERIALS         43,958         43,958         11,402           c PROF_DEV/TRAINING         31,123         19,721         11,402           d RANK_SERVICE_CHARGES         7,089         7,089		not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
2 Grants and Other assistance to individuals in the US See Part IV, line 22	1	Grants and other assistance to governments and				
the US See Part IV. line 2 2 NONE 3 Grants and other assistance to governments, organizations, and individuals outside the US See Part IV. lines 15 and 16 NONE 8 Benefits paid to of for members NONE 100,000		<del></del>	NONE			
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  6 Compensation in oriculated above, to disqualified persons (as defined under section 4958(r)(3)(8)  7 Other salaries and wages  8 Pension plan contributions (include section 401 (k) and section 4058(k) employer contributions)  9 Other employee benefits  6 Ro, 228 45, 2030  10 Payroll taxes  10 Payroll taxes  10 Payroll taxes  10 Payroll taxes  10 Post payroll taxes  100,000	2					
organizations, and individuals outside the US See Part IV, lines 15 and 16 NONE See Part IV, lines 15 and 16 NONE See Part IV, lines 16 and 16 NONE See Part IV, lines 16 and 16 NONE See Part IV, lines 17 and see the section 4958(r)(1) and persons (esderfied under section 4958(r)(1)) and persons described in section 4958(r)(8) NONE 1,254,932. 1,042,225. 212,707. See Penson plan contributions (include section 401 (k) and section 403(b) employer contributions) 68,028. 45,030. 22,998. 10 Payroll states 106,497. 78,699. 27,798. 11 Fees for services (non-employees) a Management NONE NO			NONE			
U.S. See Part IV, lines 15 and 16 NONE  8 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 100,000 100,000 100,000 100,000 6  6 Compensation not included above, to disqualified persons (as defined under section 4958(r)(1)) and persons described in section 4958(r)(3)(6) NONE  7 Other salense and weges . 1,254,932 1,042,225 212,707.  8 Penson plan contributions (include section 401 (k) and section 402(b) employer contributions) 68,028 45,030 22,998 10,240,112 10,240,1	3	•				
## Renefits paid to or for members   NONE						
5 Compensation of current officers, directors, trustees, and key employees						
trustees and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(p(1)) and persons described in section 4958(p(3)(8). 7 Other salaries and wages. 8 Pension plan contributions (include section 401 (k) and section 403(b) employer contributions). 9 Other employee benefits			NONE			
6 Compensation not included above, to disqualified persons (as defined under section 4958(n)(1)) and persons described in section 4958(n)(3)(8).  7 Other salaries and wages. 1,254,932. 1,042,225. 212,707.  8 Pension plan contributions (include section 401 (i) and section 403(b) employer contributions). 25,949. 19,236. 6,713.  9 Other employee benefits 68,028. 45,030. 22,998.  10 Payroll taxes. 106,497. 78,699. 27,798.  11 Fees for services (non-employees)  a Management NONE  b Legal NONE  c Accounting 7,678. 7,678.  d Lobbying NONE  e Professional fundraising services See Part IV, line 17 (investment management fees NONE  g Other 3,500. 3,500.  10 Advertising and promotion 18,209. 18,209.  13 Office expenses 56,300. 51,780. 4,5  14 Information technology. NONE  16 Occupancy 695,375. 617,530. 77,845.  17 Travel 24. 24. 24.  18 Payments of travel or entertainment expenses for any federal, state, or local public officials NONE  10 Interest NONE  20 Interest NONE  21 Payments to affiliates NONE  22 Depreciation, depletion, and amortization NONE  23 Insurance NONE  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)  a ACTIVITIES 6, FIELD TRIPS 87,753, 87,753, 87,753, b ATT NONE  b MATERIALS 43,958, 43,958, c PAPOF DBY/TRAINING 31,123, 19,721, 11,402, d BAMK SERVICE, CHARGES 7,089, 7,089, 7,089,	5	•	100 000		100 000	
persons (as defined under section 4958(0/(1)) and persons described in section 4958(c/(3)(8)	c		100,000.		100,000.	
Persons described in section 4958(c)(3)(B)   NONE	0					
7 Other salanes and wages.  8 Pension plan contributions (include section 401 (k) and section 403 (l) (h) and section 404 (l) and section 404 (l) and section 404 (l) and section 404 (l) and section			NONE			
8 Pension plan contributions (include section 401 (i) and section 403(b) employer contributions).  9 Other employee benefits	7	F		1 042 225	212 707	<u> </u>
(k) and section 403(b) employer contributions). 25,949, 19,236, 6,713.  9 Other employee benefits 68,028, 45,030, 22,998, 106,497, 78,699, 27,798.  11 Fees for services (non-employees) a Management NONE b Legal NONE c Accounting 7,678, 7,678, 7,678, 7,678. d Lobbying NONE e Professional fundraising services See Part IV, line 17 finvestment management fees NONE g Other 3,500, 3,500, 3,500, 18,209, 18,209, 13,500, 51,780, 4,5 11,000 more of the professional fundraising services See Part IV, line 17 NONE finvestment management fees NONE g Other 3,500, 3,500, 3,500, 51,780, 4,5 11,000 more of the professional fundraising services See Part IV, line 17 NONE g Other 3,500, 3,500, 3,500, 51,780, 4,5 11,000 more of the professional fundraising services See Part IV, line 17 NONE g Other 3,500, 3,500, 3,500, 51,780, 4,5 11,000 more of the professional fundraising services See Part IV, line 17 NONE 18,209, 18			1,233,332.	1,044,420.	414, 101.	<del></del> .
9 Other employee benefits 68, 028 45, 030 22, 998.  10 Payroll taxes 106, 497. 78, 699. 27, 798.  11 Fees for services (non-employees) a Management NONE b Legal NONE c Accounting 7, 678. 7, 678. 7, 678. d Lobbying NONE 9 Professional fundraising services See Part IV, line 17 NONE 9 Other 3,500. 3,500. 3,500.  12 Advertising and promotion 18, 209. 18, 209. 13 Office expenses 5,6,300. 51,780. 4,5 14 Information technology. NONE 15 Royaltes. NONE 16 Occupancy 695,375. 617,530. 77,845. 17 Travel 24. 24. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials NONE 10 Interest NONE 21 Payments to affiliates NONE 22 Depreciation, depletion, and amortization NONE 23 Insurance NONE 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) a ACTIVITIES_6_FIELD_TRIPS 87,753, 87,753, b MATERIALS 43,958. 43,958. 43,958. b MATERIALS 43,958. 43,958. 43,958. 57,089. 7,089.	•	,	25.949	19.236	6.713	
10 Payroll taxes	9					
11 Fees for services (non-employees) a Management						
a Management NONE b Legal NONE c Accounting 7,678 7,67		-				
b Legal	а	` ' ' '	NONE			
NONE   NONE						
Professional fundraising services See Part IV, line 17	С	Accounting	7,678.		7,678.	
f   Investment management fees   NONE   3,500   3,500       g   Other	d	Lobbying	NONE			
9 Other			NONE			
12 Advertising and promotion     18,209.       13 Office expenses     56,300.       14 Information technology     NONE       15 Royalties     NONE       16 Occupancy     695,375.       17 Travel     24.       18 Payments of travel or entertainment expenses for any federal, state, or local public officials     NONE       19 Conferences, conventions, and meetings     NONE       10 Interest     NONE       21 Payments to affiliates     NONE       22 Depreciation, depletion, and amortization     NONE       21 Insurance     NONE       24 Other expenses ltemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)     NONE       24 ACTIVITIES & FIELD_TRIPS     87,753.     87,753.       25 MATERIALS     43,958.     43,958.       26 PROF_DEV/TRAINING     31,123.     19,721.     11,402.       2 BANK_SERVICE_CHARGES     7,089.     7,089.						
13 Office expenses	g	F		3,500.		
14 Information technology       NONE         15 Royalties       NONE         16 Occupancy       695, 375.       617, 530.       77, 845.         17 Travel       24.       24.         18 Payments of travel or entertainment expenses for any federal, state, or local public officials       NONE         19 Conferences, conventions, and meetings       NONE         20 Interest       NONE         21 Payments to affiliates       NONE         22 Depreciation, depletion, and amortization       NONE         23 Insurance       NONE         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)       87,753.       87,753.         a ACTIVITIES & FIELD TRIPS       43,958.       43,958.         b MATERIALS       43,958.       43,958.         c PROF_DEV/TRAINING       31,123.       19,721.       11,402.         d BANK_SERVICE_CHARGES       7,089.       7,089.		- · ·				
15   Royalties   NONE   695,375   617,530   77,845   17   Travel   24   24   24   24   24   24   24   2					51,780.	4,520
16 Occupancy       695,375.       617,530.       77,845.         17 Travel       24.       24.         18 Payments of travel or entertainment expenses for any federal, state, or local public officials       NONE       NONE         19 Conferences, conventions, and meetings       NONE       NONE         20 Interest       NONE       NONE         21 Payments to affiliates       NONE       NONE         22 Depreciation, depletion, and amortization       NONE       NONE         23 Insurance       NONE       NONE         24 Other expenses ltemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)       87,753.       87,753.         a ACTIVITIES & FIELD TRIPS       87,753.       87,753.       43,958.         b MATERIALS       43,958.       43,958.       11,402.         c PROF_DEV/TRAINING       31,123.       19,721.       11,402.         d BANK_SERVICE_CHARGES       7,089.       7,089.						
17 Travel		·	- 1 -			<del></del> ·
18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings		` ´	- 1	617,530.		<del></del> ,
for any federal, state, or local public officials  19 Conferences, conventions, and meetings  20 Interest  21 Payments to affiliates  22 Depreciation, depletion, and amortization  23 Insurance  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)  a ACTIVITIES & FIELD TRIPS  b MATERIALS  c PROF_DEV/TRAINING  31,123  19,721  11,402  7,089  7,089			24.		24.	
Interest	10	· · · · · · · · · · · · · · · · · · ·	NONE			
20         Interest         NONE           21         Payments to affiliates         NONE           22         Depreciation, depletion, and amortization         NONE           23         Insurance         NONE           24         Other expenses ltemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)         87,753.           a ACTIVITIES & FIELD TRIPS         87,753.         87,753.           b MATERIALS         43,958.         43,958.           c PROF_DEV/TRAINING         31,123.         19,721.         11,402.           d BANK_SERVICE_CHARGES         7,089.         7,089.	10			·		
Payments to affiliates		- F-	ĺ			<del></del>
Depreciation, depletion, and amortization			· · · · · · · · · · · · · · · · · · ·			
Insurance NONE  Other expenses litemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  a ACTIVITIES_&_FIELD_TRIPS						
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)  a ACTIVITIES_&_FIELD_TRIPS		•				
covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  a ACTIVITIES_&_FIELD_TRIPS						
and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)  a ACTIVITIES_&_EIELD_TRIPS		,				
a ACTIVITIES_&_FIELD_TRIPS					Ì	
b MATERIALS 43,958. 43,958. c PROF_DEV/TRAINING 31,123. 19,721. 11,402. d BANK_SERVICE_CHARGES 7,089. 7,089.		5% of total expenses shown on line 25 below)				
c PROF_DEV/TRAINING	а	ACTIVITIES_&_FIELD_TRIPS	87,753.	87,753.		
d BANK_SERVICE_CHARGES 7,089. 7,089.	b	MATERIALS	43,958.	43,958.		
	c	PROF_DEV/TRAINING	31,123.	19,721.		
e MISCELLANEOUS 77,181. 71,828. 5,3			7,089.		7,089.	
		<del></del>	77,181.		71,828.	<u>5,353</u> .
f All other expenses						
			2,583,596.	1,957,652.	616,071.	9,873.
26 Joint Costs. Check here ▶ ☐ If following	26	• 🗀 • •				
SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a						
combined educational campaign and fundraising		combined educational campaign and fundraising				
solicitation				<u></u>		Form <b>990</b> (2008)

1	Pa	rt X	Balance Sheet					
2 Savings and temporary cash investments						End	(B) I of year	ar
2 Savings and temporary cash investments		1	Cash - non-interest-bearing	250.	1			250
3 Piedges and grants recevable, net		2	Savings and temporary cash investments	701,562.	2		832	
4 Accounts receivable, net		3	Pledges and grants receivable, net					
6   Receivables from current and former officers, directors, trustees, key employees, or other related parties Complete Part II of Schedule L		4	Accounts receivable, net					
6 Receivables from other disqualified persons (as defined under section 9.4958(f)(1) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L Notes and loans receivable, net Prepaid expenses and deferred charges Prepaid expenses and deferred expenses Prepaid expenses and expenses expenses and expenses expenses and expenses expenses expenses and expenses		5	Receivables from current and former officers, directors, trustees, key					
6 Receivables from other disqualified persons (as defined under section 9.4958(f)(1) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L Notes and loans receivable, net Prepaid expenses and deferred charges Prepaid expenses and deferred expenses Prepaid expenses and expenses expenses and expenses expenses and expenses expenses expenses and expenses			employees, or other related parties Complete Part II of Schedule L		5			
### ### ### ### ### ### ### ### ### ##		6	· · ·	·				
of Schedule L 7 Notes and loans receivable, net 1 niventories for sales or use 9 Prepard expenses and deferred charges 10 a Land, buildings, and equipment cost basis. 10a 5,870,387 b Less accumulated depreciation Complete Part V1 of Schedule D. 10b 1,487,621 4,567,642,10c 4,382,765 11 Investments - Other securities See Part IV, line 11 12 Investments - Other securities See Part IV, line 11 13 Investments - Other securities See Part IV, line 11 14 Intangible assets. 114 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 5,452,984, 16 5,250,105 17 Accounts payable and accrued expenses. 144,019, 17 158,698 18 Grants payable. 18 19 Deferred revenue. 484,747, 19 558,337 20 Tax-exampt bond liabilities. 20 Tax-examp			· · · · · · · · · · · · · · · · · · ·					
1					6			
Prepared expenses and deferred charges   2, 476, 9   2, 557	(C)	7			_	<del> </del>		
10a Land, buildings, and equipment cost basis	set	8	· .		<u> </u>			
10a	As	-	<b>.</b>	2 476	<u> </u>			
b Less accumulated depreciation Complete   Part VI of Schedule D.   10b   1,487,621   4,567,642   10c   4,382,766   11   Investments - publicly traded securities   11   12   112		-		2,4/0.	ے ا	<del> </del>		<u>, 337</u>
Part VI of Schedule D		l						
11   Investments - publicity traded securities				4 565 640	40-	l .		
12   Investments - other securities See Part IV, line 11.		44		4,56/,642.		4	<u>, 382</u> ,	, /66
13   Investments - program-related See Part IV, line 11   13   14   Intangible assets   14   14   Intangible assets   14   15   15   15   15   15   15   15			, · · · · · · · · · · · · · · · · · · ·			<u> </u>		
14		1 -	· · · · · · · · · · · · · · · · · · ·	<del></del>				
15 Other assets See Part IV, line 11   16 Total assets Add lines 1 through 15 (must equal line 34)   5,452,984, 16   5,250,105   17 Accounts payable and accrued expenses   144,019, 17   158,698   18 Grants payable   18   18   19 Deferred revenue   484,747, 19   558,337   20 Tax-exempt bond liabilities   20   20   21   Escrow account liability Complete Part IV of Schedule D   21   22   Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L   22   23   Secured mortgages and notes payable to unrelated third parties STMT 8   3,207,927, 23   2,872,201   24   Unsecured notes and loans payable   24   25   26   Total liabilities Complete Part X of Schedule D   25   26   Total liabilities Complete Part X of Schedule D   25   26   Total liabilities Complete Part X of Schedule D   25   26   Total liabilities Add lines 17 through 25.   3,836,693, 26   3,589,236   27   Unrestructed net assets   298,995, 28   16,125   29   Permanently restricted net assets   298,995, 28   1		i -	· - · · · · · · · · · · · · · · · · · ·			<u> </u>		
16   Total assets. Add lines 1 through 15 (must equal line 34)   5, 452,984   16   5, 250,105     17   Accounts payable and accrued expenses   144,019   17   158,698     18   Grants payable   18   18   19   Deferred revenue   484,747   19   558,337     20   Tax-exempt bond liabilities   20   21   22   Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons   Complete Part II of Schedule   1   22     23   Secured mortgages and notes payable to unrelated third parties \$7MT 8   3,207,927   23   2,872,201     24   Unsecured notes and loans payable   25   25   25   26   Total liabilities   Complete Part X of Schedule   0   25   25     25   Other liabilities   Complete Part X of Schedule   0   25   25   26   27   27   28   28   29   29   28   28   29   29			<u> </u>			<u> </u>		
17			· · · · · · · · · · · · · · · · · · ·			ļ		
18 Grants payable						5.		
19 Deferred revenue 484,747, 19 558,337 20 Tax-exempt bond liabilities 20 20 21 Escrow account liability Complete Part IV of Schedule D			, , , , , , , , , , , , , , , , , , ,	144,019.		<u> </u>	<u> 158</u>	<u>, 698</u>
20 Tax-exempt bond liabilities 20 21 Escrow account liability Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties STMT-8 3, 207, 927, 23 2, 872, 201 24 Unsecured notes and loans payable. 24 25 Other liabilities Complete Part X of Schedule D 25 Other liabilities. Add lines 17 through 25 3,836,693, 26 3,589,236 Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 1,104,636,697,699, 28 16,125 29 Permanently restricted net assets 298,995, 28 16,125 29 Permanently restricted net assets 30 through 34 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Patrix Paid-in or capital surplus, or land, building, or equipment fund 32 Patrix Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Patrix Paid-in or capital surplus, or land, building, or eq			• •		18	<u> </u>		
21 Escrow account liability Complete Part IV of Schedule D			h de la companya de la companya de la companya de la companya de la companya de la companya de la companya de	484,747.	19	<u> </u>	558	<u>, 337</u>
22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			·		20			
23 Secured mortgages and notes payable to unrelated third parties STMT- 8 . 3,207,927, 23 2,872,201 24 Unsecured notes and loans payable	es		· · · · · · · · · · · · · · · · · · ·		21			
23 Secured mortgages and notes payable to unrelated third parties STMT- 8 . 3,207,927, 23 2,872,201 24 Unsecured notes and loans payable	₩	22						
24 Unsecured notes and loans payable. 24 25 Other liabilities. Complete Part X of Schedule D	Liab				22			
24 Unsecured notes and loans payable. 24 25 Other liabilities. Complete Part X of Schedule D		23	Secured mortgages and notes payable to unrelated third parties STMT. 8	3,207,927	23	2	872	201
25 Other liabilities Complete Part X of Schedule D		24		5/20//52/.			0,2,	
26 Total liabilities. Add lines 17 through 25.  Crganizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets		25	' *					
Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets		26	· ·	3 836 693		3	589	236
complete lines 30 through 34.  30 Capital stock or trust principal, or current funds	es		Organizations that follow SFAS 117, check here ► X and complete				<u> </u>	2.50
complete lines 30 through 34.  30 Capital stock or trust principal, or current funds	anc	27	Unrestricted net assets	1,104,636	27	1.	438.	428
complete lines 30 through 34.  30 Capital stock or trust principal, or current funds	3a!	28	Temporarily restricted net assets					
complete lines 30 through 34.  30 Capital stock or trust principal, or current funds	B	29	Permanently restricted net assets					-
30 Capital stock or trust principal, or current funds	or Fur			2127000.			2001	_510.
Total net assets or fund balances		30	Capital stock or trust principal, or current funds		30			
Total net assets or fund balances	se				$\overline{}$		-	
33 Total net assets or fund balances			- · · · · ·					
34 Total liabilities and net assets/fund balances	let		-	1 (1( 201		1		0.00
Part XI Financial Statements and Reporting  Yes No  Accounting method used to prepare the Form 990 Cash X Accrual Other  Were the organization's financial statements compiled or reviewed by an independent accountant?	_		L. C.					
1 Accounting method used to prepare the Form 990 Cash X Accrual Other 2a Were the organization's financial statements compiled or reviewed by an independent accountant?	Pa			5,452,984.	34		230,	102
Accounting method used to prepare the Form 990 Cash X Accrual Other  Were the organization's financial statements compiled or reviewed by an independent accountant?	υω	<u> </u>	Thansa satomone and Reporting	<del></del>			Ves	No.
b Were the organization's financial statements audited by an independent accountant?							1 63	140
c 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?	_							<u> </u>
audit, review, or compilation of its financial statements and selection of an independent accountant?	b					· · · <u>2b</u>	X	<del>  </del>
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?	С	If "Ye	es" to lines 2a or 2b, does the organization have a committee that assumes responsibility	for oversight of the				
the Single Audit Act and OMB Circular A-133?		audıt	, review, or compilation of its financial statements and selection of an independent account	ntant?		· · · 2c	Х	<u> </u>
the Single Audit Act and OMB Circular A-133?	3a	As a	result of a federal award, was the organization required to undergo an audit or audits as s	et forth in				
b If "Yes," did the organization undergo the required audit or audits?		the S	ingle Audit Act and OMB Circular A-133?			за		x
	b	If "Ye	es," did the organization undergo the required audit or audits?	<u></u>	<u></u> .	3b		

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

## **Public Charity Status and Public Support**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

2008	
Open to Public Inspection	

Name of the organization						Employ	er identifica	ation number	
HUDSON MONTESSORI SCHOOL						<u> </u>		903793	
Part I Reason for Public Charity					<u> </u>	ee instru	ictions)		
The organization is not a private foundation			-	_	•				
1 A church, convention of churche				l in sectio	n 170(b)	(1)(A)(i).			
2 X A school described in section 1									
A hospital or a cooperative hos									
4 A medical research organization	on operated in co	injunction i	with a nos	spital des	cribed in	section	170(b)(1)	)(A)(iii). Enter	the
hospital's name, city, and state								<del>-,-</del>	
5 An organization operated for the section 170(b)(1)(A)(iv). (Comp		nege or un	iversity ow	nea or c	perated i	by a gov	ernmentai	unit describe	a in
6 A federal, state, or local govern	•	antal unit de	secribed in	saction 1	70/b\/4\/	A\/\			
7 An organization that normally r							or from t	the general nu	ماطر
described in section 170(b)(1)(a			no suppor	t nom a	governin	ontar um	. 01 110111 1	ine general po	אווטנ
8 A community trust described in		•	mplete Par	t II )					
9 An organization that normally r					m contrib	outions, r	nembersh	ip fees, and q	ross
receipts from activities related									
support from gross investmen	it income and un	related bus	siness taxa	able inco	me (less	section	511 tax)	from busines	sses
acquired by the organization aft	er June 30, 1975	See sectio	n 509(a)(2	). (Comp	lete Part I	II )			
10 An organization organized and									
11 An organization organized and									
purposes of one or more publi									tion
509(a)(3). Check the box that do						lines 116			
	,,		e III - Fund	•	_			pe III - Other	
e By checking this box, I certify persons other than foundation								•	
509(a)(1) or section 509(a)(2)	managers and our	er than on	e or more	publicly :	supported	organiz	ations de	scribed iii sec	HOII
f If the organization received a	written determina	tion from t	the IRS tha	atıtısa	Type I	Type II o	r Type III	supporting	
organization, check this box					.,,,,	. ,,,	, ,,pc		$\neg$
g Since August 17, 2006, has the	organization acce	pted any g		bution fro	m any of	the			
following persons?	_				•				
(i) A person who directly or	indirectly controls	, either ald	one or tog	ether wit	h person	s describ	ped in (ii)	Yes	No
and (III) below, the governir	ng body of the supp	oorted orga	inization?					11g(ı)	x
(ii) A family member of a person								11g(iı)	X
(iii) A 35% controlled entity of a			-					11g(III)	<u>X</u>
h Provide the following information									
(ii) Name of supported (iii) EIN (iiii) organization (de	Type of organization scribed on lines 1-9	(iv) is the o	rganization	(v) Did y	ou notify nization in		s the	(vii) Amount o	of
at	ove or IRC section	governing		col (i)	of your	(i) organı	zed in the	support	
"	see instructions))	Yes	No	Yes	No No	Yes	S?		
		163	110	162		162	100		
			· · · · · ·				<b></b>		—
			·				1		
									—
						-			_
						<u>-</u>			
								<u> </u>	_
Fotal									
Total							LL		

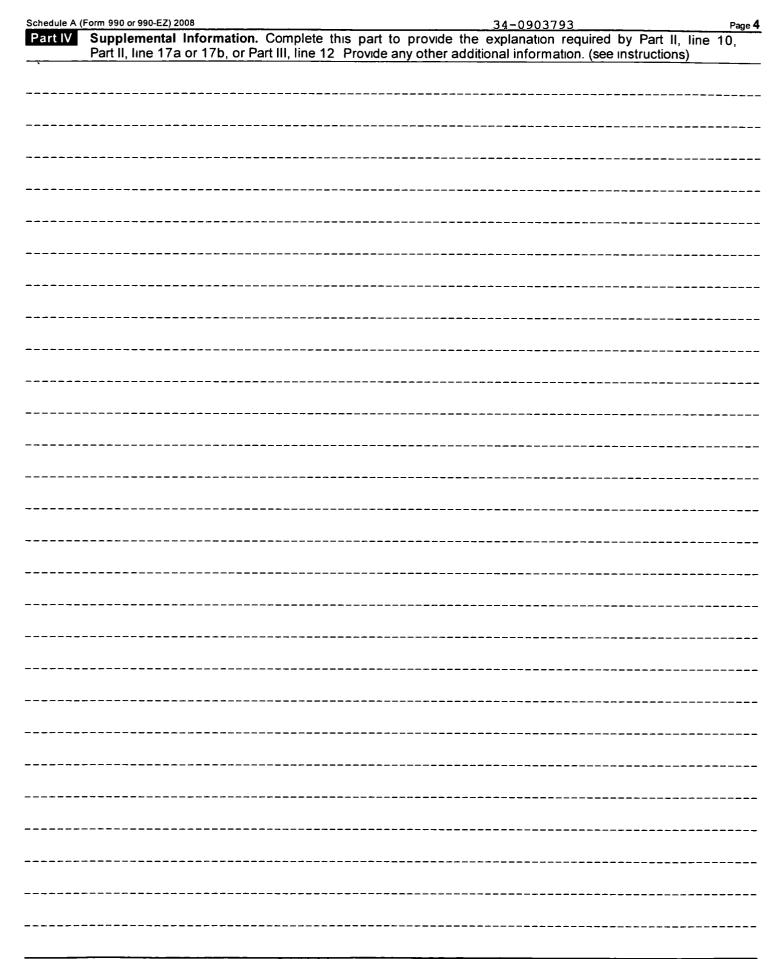
Schedule A (Form 990 or 990-EZ) 2008 34-0903793 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Calendar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . . . . 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 . . . . . . Total. Add lines 1-3 . . . . . . . . . . . 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) Public support. Subtract line 5 from line 4 Section B. Total Support (b) 2005 (c) 2006 Calendar year (or fiscal year beginning in) (a) 2004 (d) 2007 (e) 2008 (f) Total Amounts from line 4. . . . . Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources......... Net income from unrelated business activities, whether or not the business is 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . . . . . . . 11 Total support. Add lines 7 through 10 . . 12 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here . . . . . Section C. Computation of Public Support Percentage % Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) . . . . . . . . . 15 % 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "fact-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 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

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

Schedule A (Form 990 or 990-EZ) 2008

# 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.)

Sec	tion A. Public Support						
C	alendar 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	Gross receipts from admissions, merchandise						<del> </del>
	sold or services performed, or facilities		i	:			
	furnished in any activity that is related to the						
	organization's tax-exempt purpose				1		
3	Gross receipts from activities that are not an	·· <del>·</del> ·					<del> </del>
•	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's	-					<del>                                     </del>
•	benefit and either paid to or expended on						
	its behalf				1		
5	The value of services or facilities				· · · · · · · · · · · · · · · · · · ·		<u> </u>
,	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1-5						<del></del>
	Amounts included on lines 1, 2, and 3	<del> </del>					
1 a							
b	received from disqualified persons						
	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 · · · · · · · · · · · ·						
С 8	Add lines 7a and 7b						
•	Public support (Subtract line 7c from						1
800	tion B. Total Support						L
		(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
٠,	alendar year (or fiscal year beginning in)	(a) 2004	(1) 2003	(6) 2000	(d) 2007	(e) 2008	(i) iotai
9 10a	Amounts from line 6						
.00	payments received on securities loans,						
	rents, royalties and income from similar						
	Sources						
U	,						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	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					<del></del>	
12	Other income Do not include gain or						
	loss from the sale of capital assets						
4.0	(Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,				-		
	and 12)						
14	First five years. If the Form 990 is for						
<u> </u>	organization, check this box and stop here			<u> </u>		<u> </u>	▶
	tion C. Computation of Public Sup			(0)			
15	Public support percentage for 2008 (line 8,					15	<u>%</u>
16 Sec.	Public support percentage from 2007 Sche			· · · · · · · · · ·	• • • • • • •	16	<u> </u>
	tion D. Computation of Investmen			2 polymon (5)		4=	
17	Investment income percentage for 2008 (lin					17	
18	Investment income percentage from 2007 S						<u>%</u>
19a	33 1/3% support tests - 2008. If the org						
_	17 is not more than 33 1/3 %, check this box						· · · · —
b	33 1/3% support tests - 2007. If the organ						
	line 18 is not more than 33 1/3 %, check this						
20	Private foundation. If the organization did r	ot check a box o	n line 14, 19a, oi	19b, check this b	ox and see instruc	tions	▶



# SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

nam	or the organization		Employer identification number
	SON MONTESSORI SCHOOL	<del> </del>	34-0903793
Pa		ised Funds or Other Similar Fu	inds or Accounts. Complete if
	the organization answered "Yes" to Fo		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year	·	
5	Did the organization inform all donors and donor a	dvisors in writing that the assets he	eld in donor advised
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a	nd donor advisors in writing that gra	ant funds may be
	used only for charitable purposes and not for the b		
	impermissible private benefit?	<u> </u>	Yes No
Pai	t II Conservation Easements. Complete it	the organization answered "Yes	s" to Form 990, Part IV, line 7
1	Purpose(s) of conservation easements held by the	organization (check all that apply)	
	Preservation of land for public use (e.g., recre	eation or pleasure) Preserv	ration of an historically importantly land area
	Protection of natural habitat	·	vation of certified historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qua	alified conservation contribution in t	he form of a conservation easement
	on the last day of the tax year		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified	historic structure included in (a)	2c
d	Number of conservation easements included in (c	) acquired after 8/17/06	2d
3	Number of conservation easements modified, tran	sferred, released, extinguished, or	terminated by the organization during
	the taxable year		
4	Number of states where property subject to conse	rvation easement is located 🕨	
5	Does the organization have a written policy regard	ing the periodic monitoring, inspect	ion, violations, and
	enforcement of the conservation easements it holds	\$7	Yes No
6	Staff or volunteer hours devoted to monitoring, ins	pecting, and enforcing easements o	during the year ▶
7	Amount of expenses incurred in monitoring, inspec		
8	Does each conservation easement reported on line	e 2(d) above satisfy the requirement	s of section
	170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?		· · · · · · · · · · · · · · · · Yes I No
9	In Part XIV, describe how the organization reports	conservation easements in its rever	nue and expense statement, and
	balance sheet, and include, if applicable, the text of	f the footnote to the organization's	financial statements that describes
	the organization's accounting for conservation ease		
Pai		of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered	"Yes" to Form 990, Part IV, line	8
1 a	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets hel provide, in Part XIV, the text of the footnote to its f	AS 116, not to report in its revenue d for public exhibition, education, or	statement and balance sheet works of r research in furtherance of public service,
ь	If the organization elected, as permitted under SFA		
-	historical treasures, or other similar assets held fo provide the following amounts relating to these iter	public exhibition, education, or res	earch in furtherance of public service,
	(i) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, hi		
	following amounts required to be reported under S		- · ·
а	Revenues included in Form 990, Part VIII, line 1 .	<del>-</del>	<b>&gt;</b> \$
b	Assets included in Form 990, Part X		
For B	rivacy Act and Paperwork Reduction Act Notice, see the Instruc	tions for Form 990	Sahadula D (Form 800) 2009

Par	t III Organizations Maintain	ing Collections	of Art, Histo	rical Treasure	s, or C	ther Similar A	Assets (co	ntinued)	
3	Using the organization's accession	and other record	is, check any	of the following	that are	e a significant u	se of its coll	ection	
	items (check all that apply)			٦.					
a	Public exhibition		d  _	Loan or ex	kchange	programs			
b	Scholarly research		e	Other					
C	Preservation for future ge			h	. 41				
4	Provide a description of the organic	zation's collection	is and explain	now they furthe	r the or	ganization's exe	empt purpo	se in	
_		on solicit or rocci	vo donotiono d	of art bustomasis			l==		
5	During the year, did the organization assets to be sold to raise funds rat							1., F	¬
Dar	t IV Trust, Escrow and Cust							Yes	No
Гаг	Part IV, line 9, or reporte				ilion an	isweieu tes	to Form 9	90,	
1 a	Is the organization an agent, truste			-				, –	_
	included on Form 990, Part X?							Yes	No
b	If "Yes," explain the arrangement in	n Part XIV and co	mplete the fol	lowing table		<del></del>			
	5				<b> </b>  -	A	mount		
C	Beginning balance								
a	Additions during the year				-				
e	Distributions during the year Ending balance								
20	Did the organization include an am					<del></del>	<del></del>		
	If "Yes," explain the arrangement in		o, Part A, ille	217	• • • •		· · · · ∟	Yes _	No
	t V Endowment Funds. Con		zation answe	ered "Ves" to Fo	orm 99	0 Part IV line	10		
гаг	Endownient Funds. Con	(a) Current Year	(b) Prior ye			<del></del>		e) Four year	m back
1a	Beginning of year balance		<del></del>	(0) 1110 )	Jaro Baok	(u) mee yee	II DOCK	cy i oui year	To back
b	Contributions	212,660.							
С	Investment earnings or losses	3,509.	-			· <del>  · · · - · · · · · · · · · · · · · · · </del>			
d	Grants or scholarships	3,303.							
е	Other expenditures for facilities .		1						
	and programs								
f	Administrative expenses	9,853.				·			
g	End of year balance								
2	Provide the estimated percentage								
а	Board designated or quasi-endown		%						
b	Permanent endowment ▶ 100.0	<u>000</u> %							
C	Term endowment ▶	.%							
3a	Are there endowment funds not in	the possession of	of the organiza	ition that are hel	d and a	dministered for	the		
	organization by						_	Yes	No
	(i) unrelated organizations						<u> </u>	3a(i)	<u> </u>
	(ii) related organizations							Ba(ii)	<u> </u>
_	If "Yes" to 3a(II), are the related org		•				· · · · L	3b	
4 Par	Describe in Part XIV the intended ut VI Investments - Land, Buil				et V Jun	20.10			
Par			-		$\overline{}$	le IU			
	Description of investment		st or other basis evestment)	(b) Cost or other basis (other)	'   '	c) Depreciation	(d) B	ook value	
1a	Land	<b></b>		70,07	75.			70,0	075.
b	Buildings	<del></del>		4,583,44	12.	1,147,674.	:	3,435,	768.
С	Leasehold improvements	<del></del>		1,062,30	01.	245,814.		816,4	<u>487.</u>
d	Equipment			154,56	59.	94,133.		60,	<u>436.</u>
ее	Other								
Tota	l. Add lines 1a-1e (Column (d) shou	ild equal Form 99	U, Part X, colu	mn (B), line 10(c,	<u>))</u>	<u></u>		1,382,	<u>766.</u>

Part VII Inve	stments - Other Securities. See F	orm 990, Part X, III	ne 12.	
(a) Desc	cription of security or category cluding name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	ation ket value
Financial derivatives	and other financial products			
	terests			
	·			
				<u> </u>
				-
Total (Column (h) shoul	Id equal Form 990, Part X, col (B) line 12)			<del>-</del>
	d equal Form 990, Part X, col (B) line 12) ► stments - Program Related. See I	206, 316.	ne 13	<del></del>
			I	<u> </u>
(a) De	scription of investment type	(b) Book value	(c) Method of valua Cost or end-of-year mark	
<del></del>				<u> </u>
				<del></del>
				- <del></del>
	-			
				· · · · · · · · · · · · · · · · · · ·
	d equal Form 990, Part X, col (B) line 13)			
Part IX Othe	r Assets. See Form 990, Part X, I	ine 15		
	(a)	Description		(b) Book value
			<del></del>	
	··· -	<del> </del>		
Total. (Column (b) shoul	d equal Form 990, Part X, col (B) line 15)		<u> </u>	
	r Liabilities. See Form 990, Part )	K, line 25.		<del></del>
	) Description of liability	(b) Amount		
Federal income taxes				
		-		
	-			! !
				!
				1
Tatal (Caluma (h) at and	d amusi Form 200. Bod V and 40 to a 25 to			
i otal. (Column (b) should	d equal Form 990, Part X, col (B) line 25)			

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

	e D (Form 990) 2008 34-0903793			Page 4
Part				
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		2,628,174
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		2,583,596
3	Excess or (deficit) for the year Subtract line 2 from line 1	3		44,578
4	Net unrealized gains (losses) on investments	4		
5	Donated services and use of facilities	5	1	
6	Investment expenses	6	1	
7	Prior period adjustments	7		
8	Other (Describe in Part XIV)	8		
9	Total adjustments (net) Add lines 4-8	9		
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10		44,578
Part				33,370
1	Total revenue, gains, and other support per audited financial statements		1	2,628,174
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	· ·  -	•	2,020,114
a	Net unrealized gains on investments			
b	Donated services and use of facilities 2b	-		
c				
_	Recoveries of prior year grants			
d	Other (Describe in Part XIV)	$\dashv$		
e	Add lines 2a through 2d	· •  -	2e	
3	Subtract line 2e from line 1	╵╵┞	3	2,628,174
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b 4a	_		
b	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	2,628,174
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per I	<u>₹etu</u>	rn_	
1	Total expenses and losses per audited financial statements	-	1	2,583,596
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities 2a		l	
b	Prior year adjustments 2b		- 1	
C	Losses reported on Form 990, Part IX, line 25			
d	Other (Describe in Part XIV)			
e	Add lines 2a through 2d	L	2e	
3	Subtract line 2e from line 1	:	3	2,583,596
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			
b	Other (Describe in Part XIV)  Add lines 4a and 4b			
C		コ	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		5	2,583,596
	XIV Supplemental Information	<u> </u>		2,303,390.
	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa		lina	- 1h
	ete this part to provide the descriptions required for Fart II, lines 3, 3, and 3, Fart III, lines 1a and 4, Fa b; Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	11111	, 11116	5 10
	DAGE C			
) <u>rr</u>	PAGE 5			<del>-</del>
				<b></b>
				. <b></b>
				<del>-</del>

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

### **Schools**

► 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 From 990 or Form 990-EZ.

20**08** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

HUI	DSON MONTESSORI SCHOOL 34-090379	3		
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	x	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its	<u> </u>	<del>  ^</del>	
	brochures, catalogues, and other written communications with the public dealing with student admissions,			
	programs, and aphalorahing?			
		2	X	
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	x	
	NON-DISCRIMINATION POLICY IS PRINTED ON ENROLLMENT AND PRE-ENROLLMENT			
	APPLICATIONS AS WELL AS BROCHURES AND ADVERTISING.			
		l		
		ŀ		
4	Does the organization maintain the following	1	i	
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Х	
b	Records documenting that scholarships and other financial assistance are awarded on a racially			
	nondiscriminatory basis?	4b	x	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	x	
А	Copies of all material used by the organization or on its behalf to solicit contributions?	4d		
u	If you appropried "Me" to any of the above places coming (if you made made and the bound of the above places coming the made and the bound of the above places coming the made and the bound of the above places coming the made and the bound of the above places coming the made and the bound of the above places coming the made and the bound of the above places coming the made and the bound of the above places coming the made and the bound of the above places coming the made and the bound of the bound of the above places coming the made and the bound of the bound	40	Х	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate			
	statement)			
		١.,		
5	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a		Х
			Ì	
ь	Admissions policies?	5b		х
		30		
_	Employment of faculty or administrative staff?	_		
·	Employment of faculty or administrative staff?	5c		_X
a	Scholarships or other financial assistance?	5d		<u> X</u>
		i		
е	Educational policies?	5e		<u> </u>
f	Use of facilities?	5f		х
a	Athletic programs?	5g_		v
3	Athletic programs?	<u> </u>		<u> </u>
ь	Other extracular activities?			
"	Other extracurricular activities?	5h		<u> </u>
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate			
	statement)		- 1	
			Ì	
		! Ì		
			-	
c -	Does the organization receive any financial aid or assistance from a governmental agency?		J.	
			_X	<u> </u>
b		6b	+	<u>X</u>
_	If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement	' [		
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through		1	
	4 05 of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," attach an explanation	7	$\mathbf{x}$	

### SCHEDULE G

(Form 990 or 990-EZ)
Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

2008

Open To Public Inspection

Name of the organization					Employer Identification	on number
HUDSON MONTESSORI S	SCHOOL				34-090379	93
Part I Fundraising A	activities. Complete if the orga	ınızation a	nswered	"Yes" to Form 9	990, Part IV, line	17
1 Indicate whether the c	organization raised funds through	any of the	following	activities Check	ali that apply	
a Mail solicitations	е	Solic	citation of i	non-government g	grants	
<b>b</b> Email solicitations	s f	Solid	citation of	government grant	S	
c Phone solicitation	ns g	X Spe	cial fundra	ising events		
d In-person solicita	tions					
	nave a written or oral agreement v ed in Form 990, Part VII) or entity					Yes X No
b If "Yes," list the ten his to be compensated at	ghest paid individuals or entities ( t least \$5,000 by the organization	(fundraiser i Form 99	s) pursuar 0-EZ filers	nt to agreements a are not required t	under which the fun to complete this tab	draiser is le
(i) Name of Individu or entity (fundraise		custody o	draiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
		_				
		ļ				
		-				
		<del> </del>				
<del></del>						
				<u> </u>		
		ļ				
<del></del>				<del> </del>		
			_ ]			
<del></del>						
3 List all states in which registration or licensing	the organization is registered of	or license	d to solici	t funds or has b	peen notified it is	exempt from
				·		
		 			. <b></b>	
		<b></b>		· <b></b>		
<b>-</b>				. <b></b>		
		<b></b>				
						·

AUCTION   BOOK FAIR   (b) Event #2   (c) Other Events   (d) It ough cold (e)	Га	more than \$15,000 on Form	990-EZ. line 6a. Lis	answered fes to re at events with gross re	eceipts greater than	se 18, or геропеа \$5,000
AUCTION BOOK FAIR (ceret types)  I Gross recepts 95,862 12,920 22,952 131,634  I Cash prizes 15,405 9,605 8,412 33,422  B Direct expenses summary Add lines 4 through 7 in column (d) 13,422  B Direct expense summary Add lines 3 and 8 in column (d) 19, Not income summary Combine lines 3 and 8 in column (d) 10, Part types brigged (d) Total gaming (Add col (s) Phrough col (c))  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,502 131,634  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,502 131,634  I Gross revenue summary Add lines 4 through 7 in column (d) 19, Not income summary Combine lines 3 and 8 in column (d) 19, Not income summary Combine lines 3 and 8 in column (d) 19, Not income summary Combine lines 3 and 8 in column (d) 10, Part types brigged (d) Total gaming (Add col (s) Phrough col (c))  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932 12)  I Gross revenue (line 1 15,405 9,605 8,412 33,422 9,932	~~					
1 Gross recepts   95,862   12,820   22,952   131,634		İ	AUCTION	1	• •	(a) through col (c))
contributions. 3 Gross revenue (line 1 minus line 2)			· · · · · · · · · · · · · · · · · · ·			(, , , , , , , , , , , , , , , , , , ,
contributions. 3 Gross revenue (line 1 minus line 2)	e l					
contributions. 3 Gross revenue (line 1 minus line 2)	듄	1 Gross receipts	95.862.	12 820	22 952	131 634
Contributions, a Gross revenue (line 1 minus line 2). 95,862, 12,820, 22,952, 131,634  4 Cash prizes  5 Non-cash prizes  5 Non-cash prizes  5 Non-cash prizes  6 Rent/facility costs  7 Other direct expenses summary Add lines 4 through 7 in column (d) \$33,422\$  8 Direct expenses summary Combine lines 3 and 8 in column (d) \$98,212\$  Part III Gaming, Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a  1 Gross revenue  6 Rent/facility costs  1 Gross revenue  6 Volunteer labor  7 Direct expenses summary Add lines 2 through 5 in column (d)  8 Net gaming income summary. Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities in each of these states?  10 If "Yes," Explain  10 Does the organization leansed to operate gaming activities with nonmembers?  1 If "Yes," Explain  10 Does the organization operate gaming activities with nonmembers?  10 Line of the partnership or other entity formed to administer charable gaming - 112 to formed to administer charable gaming?  10 Line of the partnership or other entity formed to administer charable gaming - 112 to formed to administer charable gaming?  10 Line of the partnership or other entity formed to administer charable gaming?  11 Does the organization operate gaming activities with nonmembers?  12 Is the organization operate gaming activities with nonmembers?  12 Is the organization operate gaming activities with nonmembers?  12 Is the organization operate gaming activities with nonmembers?  13 Is the organization operate gaming activities with nonmembers?  14 If yes the organization operate gaming activities with nonmembers?  15 If "No." Explain  16 If yes, "Explain operate gaming activities with nonmembers?  17 In the partnership of the organization operate gaming activities with nonmembers?  18 In the organization operate gaming activities with nonmembers?  19 In the partnership of the organization operate gaming activities with nonmembers?	<u>&amp;</u>			127020.	22,332.	131,034
3 Gross revenue (line 1 minus line 2)	_					
minus line 2). 95, 862 12, 820 22, 952, 131, 634  4 Cash prizes  5 Non-cash prizes  6 Rent/facility costs  7 Other direct expense summary Add lines 4 through 7 in column (d)  9 Not income summary Combine lines 3 and 8 in column (d). 98, 212  Part III  Gaming, Complete If the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a  (a) Bingo (b) Pull taberinstan bingo/progressive Bingo (d) Total gaming (Add col (a) through col (e))  1 Gross revenue  2 Cash prizes  3 Non-cash prizes  4 Rent/facility costs  5 Other direct expenses summary Add lines 2 through 5 in column (d)  7 Direct expense summary Add lines 2 through 5 in column (d)  8 Rent expenses summary Add lines 2 through 5 in column (d)  9 Enter the state(s) in which the organization operates gaming activities in each of these states?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization operate gaming activities with nonmembers?  11 a license of the properties of a license of a partnership or other entity formed to administer characters and any activities with nonmembers?  12 is the organization a gramor, beneficiary or trustee of a license or a member of a partnership or other						
4 Cash prizes  5 Non-cash prizes  6 Rentificility costs  7 Other direct expenses summary Add lines 4 through 7 in column (d)  9 Not income summary Combine lines 3 and 8 in column (d)  98 212  Part IIII  Gaming, Complete if the organization asswered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a  (a) Bingo (b) Pull septiment to line 19, or reported more than \$15,000 on Form 990-EZ, line 6a  (b) Pull septiment to line 19, or reported more than \$15,000 on Form 990-EZ, line 6a  (c) Other gaming (d) Total gaming (Add call (e)) through tod (e))  1 Gross revenue  2 Cash prizes  3 Non-cash prizes  3 Non-cash prizes  4 Rentifiacility costs  5 Other direct expenses  4 Rentifiacility costs  5 Other direct expenses  4 Rentifiacility costs  5 Other direct expenses summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities in each of these states?  9 a Filter the state(s) in which the organization operate gaming activities in each of these states?  9 a Filter the state (s) in which the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 b If "No," Explain  Does the organization operate gaming activities with nonnembers?  11 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?			95.862.	12.820.	22 952	131 634
5 Non-cash prizes 6 Rentifacility costs 7 Other direct expenses summary Add lines 4 through 7 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 1 Gross revenue 1 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a  (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c) (d) Total gaming (Add col (a) through col (c) (d) Total gaming (Add col (a) through col (c) (d) Total gaming (Add col (a) through col (c) (d) Total gaming col (c) (d) Total gaming col (c) (d) Total gaming col (c) (d) Total gaming col (c) (d) Total gam	$\neg$		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	12,020.		131,034
5 Non-cash prizes 6 Rentifacility costs 7 Other direct expenses summary Add lines 4 through 7 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 9 Not income summary Combine lines 3 and 8 in column (d) 1 Gross revenue 1 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a  (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (d) Total gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c)) (e) Other gaming (c) Other gaming (Add col (a) through col (c) (d) Total gaming (Add col (a) through col (c) (d) Total gaming (Add col (a) through col (c) (d) Total gaming (Add col (a) through col (c) (d) Total gaming col (c) (d) Total gaming col (c) (d) Total gaming col (c) (d) Total gaming col (c) (d) Total gam		4 Cash prizes				
8 Direct expense summary Add lines 4 through 7 in column (d) 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Non-cash prizes 1 Gross revenue. 2 Cash prizes 2 Cash prizes 3 Non-cash prizes 3 Non-cash prizes 4 Rentifacility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities in each of these states? 9 Set if "No." Explain 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10 if "Yes." Explain 11 Does the organization operate gaming activities with nonmembers? 11 Does the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities wit	.			-		
8 Direct expense summary Add lines 4 through 7 in column (d) 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Non-cash prizes 1 Gross revenue. 2 Cash prizes 2 Cash prizes 3 Non-cash prizes 3 Non-cash prizes 4 Rentifacility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities in each of these states? 9 Set if "No." Explain 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10 if "Yes." Explain 11 Does the organization operate gaming activities with nonmembers? 11 Does the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities wit	ses	5 Non-cash prizes				
8 Direct expense summary Add lines 4 through 7 in column (d) 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Non-cash prizes 1 Gross revenue. 2 Cash prizes 2 Cash prizes 3 Non-cash prizes 3 Non-cash prizes 4 Rentifacility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities in each of these states? 9 Set if "No." Explain 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10 if "Yes." Explain 11 Does the organization operate gaming activities with nonmembers? 11 Does the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities wit	ا <u>چ</u>					
8 Direct expense summary Add lines 4 through 7 in column (d) 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Non-cash prizes 1 Gross revenue. 2 Cash prizes 2 Cash prizes 3 Non-cash prizes 3 Non-cash prizes 4 Rentifacility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities in each of these states? 9 Set if "No." Explain 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10 if "Yes." Explain 11 Does the organization operate gaming activities with nonmembers? 11 Does the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities wit	Ä	6 Rent/facility costs				
8 Direct expense summary Add lines 4 through 7 in column (d) 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Non-cash prizes 1 Gross revenue. 2 Cash prizes 2 Cash prizes 3 Non-cash prizes 3 Non-cash prizes 4 Rentifacility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities in each of these states? 9 Set if "No." Explain 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10 if "Yes." Explain 11 Does the organization operate gaming activities with nonmembers? 11 Does the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities wit	졌					
8 Direct expense summary Add lines 4 through 7 in column (d) 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Net income summary Combine lines 3 and 8 in column (d). 9 Non-cash prizes 1 Gross revenue. 2 Cash prizes 2 Cash prizes 3 Non-cash prizes 3 Non-cash prizes 4 Rentifacility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities in each of these states? 9 Set if "No." Explain 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10 if "Yes." Explain 11 Does the organization operate gaming activities with nonmembers? 11 Does the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities with nonmembers? 11 In the organization operate gaming activities wit		7 Other direct expenses	15.405.	9,605.	8.412	33 422
98 Net Income summary Combine lines 3 and 8 in column (d).  98 212  98 Net Income summary Combine lines 3 and 8 in column (d).  98 212  98 Net Income summary Combine lines 3 and 8 in column (d).  1 Gross revenue.  1 Gross revenue.  2 Cash prizes  3 Non-cash prizes  4 Rentifacility costs  5 Other direct expenses summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1 and 7 in column (d).  98 Enter the state(s) in which the organization operates gaming activities in each of these states?  99 If "No," Explain  10 a Were any of the organization operate gaming incomes revoked, suspended or terminated during the tax year?  11 Does the organization operate gaming income summary combine lines in each of these states?  11 Is the organization operate gaming activities with nonmembers?  11 Is the organization operate gaming activities with nonmembers?  12 Is the organization operate gaming activities with nonmembers?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  10 In the organization operate gaming activities with nonmembers?  10 In the organization operate gaming activities with nonmembers?  11 In the organization operate gaming activities with nonmembers?  12 In the organization operate gaming activities with nonmembers?  13 In the organization operate gaming activities with nonmembers of a partnership or other entity formed to administer charitable gaming?  13 In the organization operate gaming activities with nonmembers of a partnership or other entity formed to administer charitable gaming?	_			37,0001	0/1121	33, 122
98 Net Income summary Combine lines 3 and 8 in column (d).  98 212  98 Net Income summary Combine lines 3 and 8 in column (d).  98 212  98 Net Income summary Combine lines 3 and 8 in column (d).  1 Gross revenue.  1 Gross revenue.  2 Cash prizes  3 Non-cash prizes  4 Rentifacility costs  5 Other direct expenses summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1 and 7 in column (d).  98 Enter the state(s) in which the organization operates gaming activities in each of these states?  99 If "No," Explain  10 a Were any of the organization operate gaming incomes revoked, suspended or terminated during the tax year?  11 Does the organization operate gaming income summary combine lines in each of these states?  11 Is the organization operate gaming activities with nonmembers?  11 Is the organization operate gaming activities with nonmembers?  12 Is the organization operate gaming activities with nonmembers?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  10 In the organization operate gaming activities with nonmembers?  10 In the organization operate gaming activities with nonmembers?  11 In the organization operate gaming activities with nonmembers?  12 In the organization operate gaming activities with nonmembers?  13 In the organization operate gaming activities with nonmembers of a partnership or other entity formed to administer charitable gaming?  13 In the organization operate gaming activities with nonmembers of a partnership or other entity formed to administer charitable gaming?		8 Direct expense summary Add lines 4	through 7 in column (d)	1	•	( 33.422.)
Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a  (a) Bingo (b) Pull tabs/Instant bingo/progressive bingo (c) Other gaming (d) Total gaming (Add col (a) through col (c))  (b) Pull tabs/Instant bingo/progressive bingo (c) Other gaming (Add col (a) through col (c))  (c) Other gaming (Add col (a) through col (c))  (d) Total gaming (Add col (a) through col (c))  (e) Other gaming (Add col (a) through col (c))  (f) Total gaming (Add col (a) through col (c))  (g) A Rent/facility costs  (g) A Rent/facil		9 Net income summary Combine lines:	3 and 8 in column (d).			98.212
than \$15,000 on Form 990-EZ, line 6a  (a) Bingo (b) Pull labs/instant bingo/progressive bingo (c) Other gaming (Add Col (a) through col (c))  1 Gross revenue (c) 2 Cash prizes 3 Non-cash prizes 5 Other direct expenses 6 Volunteer labor Ves No No No No No No No No No No No No No	Pa	rt III Gaming. Complete if the orga	anization answered "	Yes" to Form 990. Pa	rt IV. line 19. or repo	orted more
1 Gross revenue   1 Gross revenue   2 Cash prizes   3 Non-cash prizes   3 Non-cash prizes   4 Rent/facility costs   4 Rent/facility costs   5 Other direct expenses   7 Other direct expenses   7 Other direct expenses   7 Other direct expenses   7 Other direct expenses   7 Other direct expenses   7 Other direct expenses   7 Other direct expense summary   8 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense   9 Other direct exp			Z, line 6a	, , , , , , , , , , , , , , , , , , , ,	,	
1 Gross revenue   1 Gross revenue   2 Cash prizes   3 Non-cash prizes   3 Non-cash prizes   4 Rent/facility costs   4 Rent/facility costs   5 Other direct expenses   7 Other direct expenses   7 Other direct expenses   7 Other direct expenses   7 Other direct expenses   7 Other direct expenses   7 Other direct expenses   7 Other direct expense summary   8 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense summary   9 Other direct expense   9 Other direct exp	a		(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (Add
2 Cash prizes  3 Non-cash prizes  4 Renti/facility costs  5 Other direct expenses  6 Volunteer labor  7 Direct expense summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities in each of these states?  a Is the organization licensed to operate gaming activities in each of these states?  b If "No," Explain  10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  b If "Yes," Explain  11 Does the organization operate gaming activities with nonmembers?  11 Does the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity	ᇎ		(-,9-		(-, 99	col (a) through col (c))
2 Cash prizes  3 Non-cash prizes  4 Renti/facility costs  5 Other direct expenses  6 Volunteer labor  7 Direct expense summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities in each of these states?  a Is the organization licensed to operate gaming activities in each of these states?  b If "No," Explain  10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  b If "Yes," Explain  11 Does the organization operate gaming activities with nonmembers?  11 Does the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity	ě			_		
2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses.  6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities in each of these states? 9 If "No," Explain  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  b If "Yes," Explain  11 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  13 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  14 In the control of		1 Gross revenue				
3 Non-cash prizes  4 Rent/facility costs  5 Other direct expenses						
3 Non-cash prizes  4 Rent/facility costs  5 Other direct expenses	S	2 Cash prizes				
5 Other direct expenses	SE				·	
5 Other direct expenses	×	3 Non-cash prizes				
5 Other direct expenses	뜅					
5 Other direct expenses	ě	4 Rent/facility costs		<u>.                                    </u>		
Yes						
6 Volunteer labor No No No No No Tourect expense summary Add lines 2 through 5 in column (d) ( )  8 Net gaming income summary Combine lines 1 and 7 in column (d)		5 Other direct expenses				
7 Direct expense summary Add lines 2 through 5 in column (d)  8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities a Is the organization licensed to operate gaming activities in each of these states?  9 Jet 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  10 a Were any of the organization operate gaming activities with nonmembers?  11 Does the organization operate gaming activities with nonmembers?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12			% Yes%	%	Yes%	
8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities a Is the organization licensed to operate gaming activities in each of these states?  9 If "No," Explain  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  11 Does the organization operate gaming activities with nonmembers?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization operate gaming?  13 In India Ind		6 Volunteer labor L	No	No	No	
8 Net gaming income summary Combine lines 1 and 7 in column (d)  9 Enter the state(s) in which the organization operates gaming activities a Is the organization licensed to operate gaming activities in each of these states?  9 If "No," Explain  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  11 Does the organization operate gaming activities with nonmembers?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization operate gaming?  13 In India Ind						
Penter the state(s) in which the organization operates gaming activities  a is the organization licensed to operate gaming activities in each of these states?  b if "No," Explain  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  b if "Yes," Explain  11 Does the organization operate gaming activities with nonmembers?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization and partnership or other entity formed to administer charitable gaming?  13 Is the organization and partnership or other entity formed to administer charitable gaming?  14 In the properties of the states?  15 In the organization and partnership or other entity formed to administer charitable gaming?		7 Direct expense summary Add lines 2	through 5 in column (d)			( )
Penter the state(s) in which the organization operates gaming activities  a is the organization licensed to operate gaming activities in each of these states?  b if "No," Explain  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  b if "Yes," Explain  11 Does the organization operate gaming activities with nonmembers?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12 Is the organization and partnership or other entity formed to administer charitable gaming?  13 Is the organization and partnership or other entity formed to administer charitable gaming?  14 In the properties of the states?  15 In the organization and partnership or other entity formed to administer charitable gaming?						
9 Enter the state(s) in which the organization operates gaming activities a Is the organization licensed to operate gaming activities in each of these states? b If "No," Explain  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," Explain  11 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12		8 Net gaming income summary Combin	ne lines 1 and 7 in colun	nn (d)	<u> </u>	
a Is the organization licensed to operate gaming activities in each of these states?  b If "No," Explain  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  b If "Yes," Explain  11 Does the organization operate gaming activities with nonmembers?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12	_					Yes No
b If "No," Explain  10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  b If "Yes," Explain  11 Does the organization operate gaming activities with nonmembers?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	-				<b></b>	
10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  b If "Yes," Explain  11 Does the organization operate gaming activities with nonmembers?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12			aming activities in each i	of these states?		9a
to a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  If "Yes," Explain  Does the organization operate gaming activities with nonmembers?  Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  10a  11a	Þ	If "No," Explain				
to If "Yes," Explain  Does the organization operate gaming activities with nonmembers?  Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  10a  10a  11a						
b If "Yes," Explain  11 Does the organization operate gaming activities with nonmembers?  12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  12	4.0					
Does the organization operate gaming activities with nonmembers?			censes revoked, suspe	nded or terminated durin	g the tax year?	10a
11 Does the organization operate gaming activities with nonmembers?	þ	ır res, ⊨xpıaın				
11 Does the organization operate gaming activities with nonmembers?						
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	4.4	Death areas as a second	Annaha a saste a a		·	
formed to administer charitable gaming?		Does the organization operate gaming ac	ctivities with nonmember	rs /		11
	12					
		rormed to administer charitable gaming?	<u></u>	<u></u>		<del></del>

Independent contractor

Schedule G (Form 990 or 990-EZ) 2008

17

Director/officer

Mandatory distributions

Employee

in the organization's own exempt activities during the tax year ▶\$

# 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
Name of the organization

► 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
HUDSON MONTESSORI SCHOOL	34-0903793
PROCESS USED TO REVIEW THE FORM 990	
FORM 990, PART VI, LINE 10	
A DRAFT OF THE 990 IS REVIEWED BY THE FINANCE COMMITTEE AND THE B	OARD
BEFORE IT IS FILED.	<b></b>
COMPLIANCE WITH CONFLICT OF INTEREST POLICY	<b></b>
FORM 990, PART VI, LINE 12C	<b>-</b>
THE BOARD WILL ADOPT AND REVIEW PERIODICALLY A POLICY ON SELF-DEA	LING FOR
TRUSTEES. THOSE TRUSTEES WHO HAVE FRIENDS OR RELATIVES IN THE SC	HOOL AS
STUDENTS, FACULTY OR ADMINISTRATORS, MUST PLACE THE MISSION AND F	UTURE OF
THE SCHOOL ABOVE THE IMMEDIATE INTERESTS OF ANY SUCH INDIVIDUAL.	
TIME TO TIME CERTAIN COMMITTEES WILL HAVE CAUSE TO DEAL WITH THE	
SCHOOL OPERATIONAL MATTERS; (E.G. HEAD SUPPORT & EVALUATION COMMI	
HANDLING A GRIEVANCE). OTHERWISE, TRUSTEES WILL REFRAIN FROM	
REPRESENTING THE BOARD IN NON-BOARD RELATED CONTRACTS. WHEN MATTI	ERS_FOR
WHICH A TRUSTEE HAS SUCH PERSONAL INTEREST COME BEFORE THE BOARD (	OR_A
COMMITTEE, THE TRUSTEE WILL ABSTAIN FROM INTRODUCING MOTIONS,	
RESOLUTIONS, SECONDING OR VOTING.	
DETERMINING COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES	
FORM 990, PART VI, LINE 15A TO B	
THE BOARD WILL PERIODICALLY REVIEW AND CONFIRM COMPENSTAION AND BE	
POLICIES AND A RANGE OF SALARIES FOR STAFF AND FACULTY; PROVIDED,	
HOWEVER, THAT THE HEAD OF SCHOOL WILL BE RESPONSIBLE FOR APPLYING	
POLICIES AND SALARY SCALE TO ALL SPECIFIC CONTRACTS WITH SCHOOL	

# SCHEDULE O (Form 990)

**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.

OMB No 1545-0047
2008
Open to Public
Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

Employer identification number

PERSONNEL. WHEN THE CURRENT CONTRACT IS ABOUT TO EXPIRE FOR THE HEAD OF
SCHOOL THE BOARD REVIEWS AND DETERMINES THE FURTURE COMPENSATION FOR THE
HEAD OF SCHOOL. A COMMITTEE WAS FORMED TO EVAULATE STAFF AND FACULTY
COMPENSATION AND BENEFITS.
_AVAILABILITY_OF_DOCUMENTS_FOR_PUBLIC_INSPECTION
FORM 990, PART VI, LINE 19
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
ARE AVAILABLE FOR REVIEW UPON REQUEST. ANYONE REQUESTING TO REVIEW THESE
DOCUMENTS ARE WELCOME TO COME INTO THE SCHOOL TO REVIEW HOWEVER, THE
SCHOOL DOES NOT MAKE COPIES THAT THEY CAN TAKE.
OTHER PROGRAM SERVICES
FORM 990, PART III, LINE 4D
OTHER FEES INCLUDED MISCELLANEOUS INCOME, APPLICATION FEES AND ACTIVITY
FEES.

#### FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

TO FOSTER A MONTESSORI EDUCATIONAL ENVIRONMENT CONDUCIVE TO EACH CHILD'S UNIQUE QUALITIES AND ABILITIES FOR THE DEVELOPMENT OF SOCIAL, EMOTIONAL, AND REASONING SKILLS THAT ARE ESSENTIAL FOR A LIFETIME OF INDEPENDENT, CREATIVE THINKING AND LEARNING IN THE WORLD COMMUNITY.

SERVICES
PROGRAM
· OTHER
1
<b>4</b> D
LINE
III,
PART
,066
FORM

REVENUE	1 1 1	135,769.	
EXPENSES			
GRANTS			
DESCRIPTION		OTHER FEES	

TOTALS

135,769.

SX6809 5744

	(C) UNRELATED	BUSINESS REV.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	(B) RELATED OR	EXEMPT REVENUE		8,128.	8,128.
	(A) TOTAL	REVENUE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	8,128.	8,128.
FORM 990, PART VIII - INVESTMENT INCOME		DESCRIPTION		DIVIDENDS & INTEREST ON SECURITIES	TOTALS

(D) EXCLUDED REVENUE

STATEMENT

8F7000 1 000	000	4	7000	

**RENT AND ROYALTY INCOME** 

Taxpayer's Name HUDSON MONTESSOR		<u> </u>	<u> </u>	<u> </u>	<u> </u>		3	_	ing Number 03793
DESCRIPTION OF PROPERTY									<u> </u>
AFTER-SCHOOL ACT	'IVITIES								
Yes No Did you a	ctively participate in	the operation	n of the	activit	ty during the tax year?	,			
REAL RENTAL INCO	ME								_
OTHER INCOME						İ			
RENTAL INCOME							7 <u>,418</u>		
					. <u> </u>			_	
TOTAL GROSS INCOME	<u> </u>	<u></u>	· · · ·			· · · · · · · · · · ·	<u> </u>	.	7,418.
OTHER EXPENSES:									
		<del></del>						_	
								_	
								_	
								_	
								_	
		<u>.                                    </u>						_	
								_	
								_	
	· <del>-</del>							_	
DEDECIATION (OLIGINAL DEL CI		<del></del>				<del></del>	<u>-</u>	$\dashv$	
DEPRECIATION (SHOWN BELOW	<sup>(V)</sup>							-	
LESS: Beneficiary's Portion								4	
AMORTIZATION					•		-	_	
LESS: Beneficiary's Portion	• • • • • • • • • •				•			-	
DEPLETION	• • • • • • • • • •				•		·	4	
LESS: Beneficiary's Portion	• • • • • • • • • •				•				
TOTAL EXPENSES						• • • • • • • • • •		•	7 410
Less Amount to	DIVIE (EUSS) · · · ·	• • • • • •	• • • •	•••	<u> </u>	<u> </u>		• ]	7,418.
Rent or Royalty Depreciation								_	
Depletion								_	
Investment Interest Expense						• • •		_	
Investment Interest Expense Other Expenses	• • • • • • • • • •							_	
Net Income (Loss) to Others						• • • —			
Net Rent or Royalty Income (Loss								• —	7,418.
Deductible Rental Loss (if Applic	able)							. —	77110.
SCHEDULE FOR DEPRECIA				•					
-									
(a) Description of property	(b) Cost or unadjusted basis	(c) Date acquired	(d) ACRS des	(e) Bus %	(f) Basis for depreciation	(g) Depreciation in prior years	(h) Method	(i) Life or rate	(j) Depreciation for this year
				<u> </u>					
				L			ļ		
				<b> </b>					
							ļ		
						ļ			<del></del>
						<del></del>	<b></b>		
						<del>  - · · · · · · · · · · · · · · · · · · </del>	<del>  </del>		·
							<b>  </b>		
				<del>  -</del>					
					<del></del>				
Totals				L		L	ĻI		

### SUPPLEMENT TO RENT AND ROYALTY SCHEDULE \_\_\_\_\_\_

OTHER INCOME

RENTAL INCOME

7,418. 7,418. ========

## RENT AND ROYALTY SUMMARY

TOTALS	7,418.			7,418.
AFTER-SCHOOL ACTIVIT	7,418.			7,418.
PROPERTY	TOTAL INCOME	DEPLETION/ DEPRECIATION	OTHER EXPENSES	ALLOWABLE NET INCOME

FORM 990, PART VIII - FUNDRAISING EVENTS

NET INCOME	80,457. 3,215. 10,035. 4,447. 58.	98,212.
DIRECT EXPENSES	15,405. 9,605. 3,763. 4,649.	33, 422.
GROSS INCOME	95,862. 12,820. 13,798. 9,096. 58.	131,634.
DESCRIPTION	AUCTION BOOK FAIR PUMPKIN PATCH WRAPPING PAPER SALE OTHER EVENTS	TOTALS

FORM 990, PART X - SECURED MORTGAGES AND NOTES PAYABLE 

LENDER: MORTGAGE

7.500000 INTEREST RATE:

MATURITY DATE: 01/12/2009
REPAYMENT TERMS: MONTHLY INSTALLMENTS OF \$3,225
SECURITY PROVIDED: LAND AND BUILDINGS

SECURITY PROVIDED: PURPOSE OF LOAN:

CONSTRUCTION OF BUILDING

BEGINNING BALANCE DUE ..... 117,927.

LENDER: BOND FINANCING

ORIGINAL AMOUNT: 3,111,000.

DATE OF NOTE: 06/30/2005

MATURITY DATE: 07/01/2030

REPAYMENT TERMS: VARIABLE RATE NOTES

SECURITY PROVIDED: LETTER OF CREDIT; LA
PURPOSE OF LOAN: ADDITION TO BUILDING

LETTER OF CREDIT; LAND AND BUILDINGS

ADDITION TO BUILDING

BEGINNING BALANCE DUE ..... 2,840,000.

LENDER: LINE OF CREDIT

REPAYMENT TERMS: VARIABLE RATE LINE OF CREDIT

SECURITY PROVIDED: LAND AND BUILDINGS PURPOSE OF LOAN: OPERATING CASH FLOW OPERATING CASH FLOW

BEGINNING BALANCE DUE ..... 250,000.

LENDER: CHASE REAL ESTATE LOAN

ENDING BALANCE DUE ..... 2,872,201.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE 3,207,927.

==========

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE 2,872,201.

===========