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Department of the Treasury

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)

00733 12/21/2009 4 43 PM OMB No 1545-0047 2008

Inter	nal Rev	enue Servi	ce	The organization may have to use a copy of this return to satisfy state	reporting requiren	ients	Inspection
A	For the	e 2008 cal	endar ye	ear, or tax year beginning $7/01/08$, and ending $6/30/0$	9		
В	Check if a	applicable	Please	C Name of organization		D Emplo	yer identification number
∐ ,	Address	change	use IRS label or	THE HERITAGE SCHOOL			
\Box	Name ch	ange	print or	Doing Business As		58-	1077670
\Box	Initial reti	um.	type	Number and street (or P O box if mail is not delivered to street address)	Room/suite	•	one number
Ħ			See Specific	2093 HIGHWAY 29 NORTH		<u> 770</u>	<u>-253-9898</u>
닏.	Terminat	ion	Instruc-	City or town, state or country, and ZIP + 4		G Gross rece	ipts 5,868,846
∐,	Amended	d return	tions	NEWNAN GA 30263			
	Application	on pending	F Name	e and address of principal officer		H(a) Is this	a group return for
						affiliate H(b) Are all	affiliates
						include	ed? Yes No
	_		177	2. 4		If "No,"	attach a list (see instructions)
		empt status		501(c) (3) 4 (insert no) 4947(a)(1) or 527			
	Websi	<u>. </u>	_	HERITAGEHAWKS.ORG			exemption number
		organization	X Cor	rporation Trust Association Cther ► L	Year of formation		M State of legal domicile
	art I			he organization's mission or most significant activities			
	'	•		SCHOOL FACILITY			
ce		FKIV	AID .	JOHOOD FACIBITI			
nar							
& Governance	2	Check thi	e hov l	If the organization discontinued its operations or disposed of more than 2	25% of ite accete		
ဗိ				members of the governing body (Part VI, line 1a)	25 /0 01 113 833613	3	15
න්			•	endent voting members of the governing body (Part VI, line 1b)		4	15
Activities			•	employees (Part V, line 2a)		5	115
댦				volunteers (estimate if necessary)		6	25
∢				ated business revenue from Part VIII, line 12, column (C)		7a	
		_		siness taxable income from Form 990-T, line 34		7b	0
				sinese taxable interine in our control of 1, into e .	Prior Yea	ar .	Current Year
0	8	Contribut	ions and	d grants (Part VIII, line 1h)		1,627	473,808
Revenue	9	Program	service	revenue (Part VIII, line 2g)		2,387	4,713,894
ě	10	Investme	nt incon	ne (Part VIII, column (A), lines 3, 4, and 7d)		0,638	177,186
UE.	11	Other rev	enue (P	Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,686	186,398
	$\overline{}$			add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,19	6,338	5,551,286
				ar amounts paid (Part IX, column (A), lines 1-3)			
	I			or for members (Part Routin With 194)	0 67	6 070	2 205 255
nses	1			ompensation, em ployee benefits (Part 1X, col um) (A), lines 5–10)	2,670	6,078	3,005,855
ens	16a	Professio	nal fund	draising fees (A) IX, column (A), line (11e)			
Expe				expenses (Parrix, column (D), fine 25)	2 40	756	2 264 004
ш				(Part IX, column (A), lines 11a 11d, 11f 24f) (5,756	2,364,084
				Add lines 13-17 (muse Could Far NX, Journn (A), line 25)	<u> </u>	1,834	5,369,939
ج ج	19	Revenue	iess ex	penses Subtract line 18 from line 12	Beginning o	4,504 f Year	181,347 End of Year
Net Assets or Fund Balances	20	Total ass	ets (Par	t X, line 16)		1,334	9,415,138
Ass	21		•	art X, line 26)		4,501	3,107,084
Set	22		•	d balances Subtract line 21 from line 20		6,833	6,308,054
	art il			re Block			
				ties of perjury, I declare that I have examined this return, including accompanying schedules	and statements, and	to the best of	f my knowledge
		and	l belief, it	is true, correct, and complete. Declaration of preparer (other than officer) is based on all info	rmation of which prep	parer has an	y knowledge
Sig	ın		/	Winns Aher-			15/10
He			Signatu	re of officer		Date	
			_DO	NNA STUART DIRE	CTOR OF B	USINE	SS OPERATION
	_		Type or	print name and title			
		Pre	parer's	Date	Check	ıf	Preparer's identifying number (see instructions)
Pai		Sigi	nature	12/2	21/09 self- employ	ed 🕨 🗀	P00094627
	pare		n'n na	GAY & JOSEPH, CPA, P.C.	<u> </u>	EIN	▶ 58-1445724
US	e On	ly Fir	n's name elf-emplo	OO1 CHARLES CONTROLL		Phone	· · · · · · · · · · · · · · · · · · ·
		i i		TACRANGE CA 30240-2711			706-884-7331

May the IRS discuss this return with the preparer shown above? (see instructions)

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Yes

ołm 990 (2008)	THE HERITAGE SCHO	OOL	58-1077670	Page 2
		ce Accomplishments (see inst	ructions)	
	ribe the organization's mission SCHOOL FACILITY			
PKIVALE	SCHOOL PACIFIT		•	
		<u>.</u>		
		·		
		ogram services during the year which we	re not listed on	
•	rm 990 or 990-EZ?	do O		Yes X No
	scribe these new services on Schedi	significant changes in how it conducts, ai	ov program	
services?	zmzation sease sendading, or make	organisant shanges in now it conducts, an	, program	Yes X No
If "Yes," des	scribe these changes on Schedule C	•		
		each of the organization's three largest p		
	· · · · · · · · · · · · · · · · · · ·	nd section 4947(a)(1) trusts are required to		
allocations t	to others, the total expenses, and re-	venue, if any, for each program service re	poned	
4a (Code) (Expenses \$ 3,3	11,339 including grants of \$) (Revenue \$	
		PROVIDING SERVICES T		
IN GRAD	ES KINDERGARTEN T	HROUGH TWELVE		
4b (Code) (Expenses \$	unallyding greate of C) (Revenue \$	
•b (Code) (Expenses \$	including grants of \$) (Revenue \$	
4- (0-4-) /F f		\(\(\text{O}\)	
c (Code) (Expenses \$	including grants of \$) (Revenue \$	
4d Other progr	ram services (Describe in Schedule	0)		
(Expenses		uding grants of \$) (Revenue \$)
le Total progr	ram service expenses 🕨 \$	3,311,339 (Must equal Part	IX, Line 25, column (B))	
				Form 990 (2008

,

		<u></u>	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	Ì	Ì	
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	1	}	\
	candidates for public office? If "Yes," complete Schedule C, Part I	3	 	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	-		
	Schedule C, Part II	4_	 	X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	<u> </u>	
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	İ	1	l
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	Į.	l	
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,		\ \	1
	Parts VI, VIII, VIII, IX, or X as applicable	11	X	<u> </u>
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	ļ
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		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	- 1		
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	L	X
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	L	X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
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		_X_
21	Did the organization report more than \$5,000 on Part IX, column (A), line 12 if "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			,
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions		l	
	24b-24d and complete Schedule K If "No," go to question 25	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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	L	
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	L	_X
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		X
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	L	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	X	L

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Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		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
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	X	
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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	_	X
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		<u>X</u>
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		X
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		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		<u> </u>
		Form	990	(2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1				
	U.S. Information Returns. Enter -0- if not applicable	1a	1			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able				
	gaming (gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	115			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	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	/				
	this return?			3a_		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authorized and the calendar year.	-		1 :		•
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ıal				
	account)?			4a		X
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Ban	k				
E 0	and Financial Accounts			_		7,
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	^		5a		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	,		5b		
·	Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions of	ŊΓ		- Ua	-	
	gifts were not tax deductible?	,		6b		
7	Organizations that may receive deductible contributions under section 170(c)					
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than	า		i l		
	\$75?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	required to file Form 8282?			7c		<u>X</u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a person	nal				
	benefit contract?			7e		<u>X</u>
T -	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
g h	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
"	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			_		x
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			7 <u>h</u>	-	
•	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsor					
	organization, have excess business holdings at any time during the year?	ing		8		х
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				•
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b]		
11	Section 501(c)(12) organizations. Enter					
а	Gross income from members or shareholders	11a]]		
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them)	11b		4	- 1	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	- 1		12a		
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

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

Sec	tion 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, processes, or changes in Schedule O See instructions				1 1		
1a	Enter the number of voting members of the governing body	1a	15				
b	Enter the number of voting members that are independent	1b	15				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship wit	h					
	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 dire	ect					
	supervision of officers, directors or trustees, or key employees to a management company or other perso	n?			3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 9	90 wa	s filed?		4		×
5	Did the organization become aware during the year of a material diversion of the organization's assets?				5		X
6	Does the organization have members or stockholders?				6		$\overline{\mathbf{x}}$
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	ers					
	of the governing body?				7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons	?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during						
	the year by the following	•					
а	The governing body?				8a	X	
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		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapt	ters,					
	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 organization	ations	;				
	must describe in Schedule O the process, if any, the organization uses to review the Form 990				10		X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reach	ed at					
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				11		X
Sec	tion B. Policies						
			_	_		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could gir	ve					
	rise to conflicts?				12b	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1					
	describe in Schedule O how this is done				12c	X	
13	Does the organization have a written whistleblower policy?				13		X_
14	Does the organization have a written document retention and destruction policy?				14		X_
15	Did the process for determining compensation of the following persons include a review and approval by						
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and de	cision					
а	The organization's CEO, Executive Director, or top management official?				15a		<u>X</u> _
b	Other officers or key employees of the organization?				15b		X
	Describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement						
	with a taxable entity during the year?				16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate						
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safegua	ard				1	
	the organization's exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed GA						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501	l(c)(3)	s only)				
	available for public inspection. Indicate how you make these available. Check all that apply						
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, confli	ct of ir	nterest				
	policy, and financial statements available to the public						
20	State the name, physical address, and telephone number of the person who possesses the books and re	cords	of the				
	organization ▶ THE HERITAGE SCHOOL, INC. 2093 N HWY 2	9					
N	EWNAN	A 3	0263		770-25	3-9	898

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
- 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) Name and Title	(B) Average	Posit	tion (e		C) all th	nat ap	ply)	(D) Reportable	(E) Reportable	(F) Estimated
Name and Tille	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
				х				0	0	0
MS. CAROL AL TRUSTEE	EXANDER				 			o	o	C
MR. LONNIE B	LACKSTONE	+	-	 						
TRUSTEE								o	o	0
MR. BRAD CRO	SBY									
TRUSTEE			<u> </u>				_	0	0	0
MRS. SHARON	GRUBER									•
TRUSTEE MR. WALTER H	ALICEN		_					0	0	
TRUSTEE	AUGEN							o	o	O
MR. OTIS JON	ES III	+			├					
TRUSTEE	,							o	o	C
MRS. ANNE KA	UFMANN									
TRUSTEE		_						0	0	
MR. HAROON K	HAN									^
TRUSTEE DR. CHARLES	MANTAT	-				\vdash		0	0	
TRUSTEE	MAININ		•					o	o	C
MRS. MAUREEN	MARTIN	+-			<u> </u>					
TRUSTEE								o	o	C
MR. PATRICK	MCKEE									
TRUSTEE								0	0	C
MR. BRAD SMI	TH								ما	
TRUSTEE DR. BRIAN TH	OMAC		-		<u> </u>	\vdash		0	0	C
TRUSTEE	OMAS							o	o	c
MR. JIM THOM	ASSON	+	 	-		\vdash				
TRUSTEE								o	0	
MR. LEE TROU	TMAN									
TRUSTEE		1	ı	ı	I	ı		o!	ol	C

Par	rt VII Section A	. Officers, Directors, Trus	tees	, Key	/ Em	plo	ees,	and	Highest Compensated E	mployees (continued)				
	(A) Name and title	(B) Average	\vdash	_		all th	nat ap		(D) Reportable	(E) Reportable		(F) timated		
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	comp fro orga and	ount of other oensation on the anization of related nizations		
														
						_	_	-						
			<u> </u>											
											: :			
							_							
1b	Total	L	<u> </u>			L								
2		viduals (including those in 1	a) wl	ho re	ceive	ed m	ore t	han	\$100,000 in reportable com	pensation from the				
3		list any former officer, direc							e, or highest compensated		Γ.	Ye	s No X	
4	For any individual list the organization and		f rep	ortab	le co	mpe	ensat	ion a	and other compensation froi complete Schedule J for su			3	X	
5		d on line 1a receive or accrute the organization? If "Yes,"										5	X	
Sec 1	, , , , , , , , , , , , , , , , , ,					nt cor	ntrac	tors that received more tha	n \$100,000 of					
	compensation from the organization (A) Name and business address								Descrip	(B) tion of services		(C) Compen	sation	
						_								
				_				-						
2	Total number of inde compensation from t	ependent contractors (including the organization	ling t	hose	ın 1) wh	o rec	eive	ed more than \$100,000 in			0		
DAA											F	orm 99	0 (2008)	

		(2008) THE HERITA		SCHOO!	<u> </u>		58-1077670		Page 9
Pa	art V	III Statement of Rev	<u>/enue</u>				(5)	- 12	
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
tts	1a	Federated campaigns	1a						
yrar our	b	Membership dues	1b						
ts, c	С	Fundraising events	1c						
igi ar	d	Related organizations	1d						
ns,	e	Government grants (contributions)	1e		_				
atio er s	f	All other contributions, gifts, grants,							
호환		and similar amounts not included above	1f	4	73,808				
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in lines 1	a-1f \$			11			
	h	Total. Add lines 1a-1f			<u> </u>	473,808			
Program Service Revenue					Busn Code		· · · · · · · · · · · · · · · · · · ·		
eve	2a	TUITION AND FEES				4,713,894	4,713,894		-
8	b								
ξ	C								
Š	d				<u> </u>				
grar	f	All other program service rev	anua			-			
Po	'a		ciluc			4,713,894			
	3	Investment income (including	dıvıden	ds. interes		1,723,031			
		other similar amounts)		,	•	204,241			204,241
	4	Income from investment of ta	x-exem	ot bond pro	oceeds -	, , ,		<u> </u>	1 3/
	5	•		•					
		(ı) Real		(II) F	Personal				
	6a	Gross Rents							
	b	Less rental exps							
	С	Rental inc or (loss)							
	d 7a	Net rental income or (loss) Gross amount from							
	""	sales of assets (1) Securit			Other				
		/	505	 					
	D	Less cost or other	7,560						
	_		7,055						
		Net gain or (loss)	,,000	1	—	-27,055	-27,055		
		Gross income from fundraising ev	ents			2.7000	2.,,000		
e		(not including \$							
lu /		of contributions reported on line 1	c)						
Re		See Part IV, line 18	а		100,241				
Other Revenue	b	Less direct expenses	b						
ŏ		Net income or (loss) from fun-		events	>	100,241	100,241		
	9a	Gross income from gaming activiti	es						
		See Part IV, line 19	а	_			į		
		Less direct expenses	b						
		Net income or (loss) from gar		vities					
	тvа	Gross sales of inventory, less							
	h	returns and allowances	a b						
		Less cost of goods sold Net income or (loss) from sale	-	Contact.	•				
İ		Miscellaneous Revent		entory	Busn Code				
	11a	SCHOOL STORE			Dusii Gode	33,217			33,217
	b	STUDENT TRANSPORTATI	ON			28,954		_	28,954
	c	YEARBOOK SALES AND A				19,332		<u>-</u>	19,332
		All other revenue				4,654			4,654
ļ		Total Add lines 11a-11d				86,157		· · · <u>-</u>	1,334
	12	Total Revenue. Add lines 1h,	2g, 3, 4	, 5, 6d, 7d	· •	,			
i		9c, 10c, and 11e			>	5,551,286	4,787,080		290,398

Part IX Statement of Functional Expenses

Form 990 (2008)

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).

	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
-	the U.S. See Part IV. line 22				
•	Grants and other assistance to governments,				
3	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 not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	2 406 040	1 007 050	- F70 004	
7	Other salaries and wages	2,486,042	1,907,958	578,084	<u></u>
8	Pension plan contributions (include section 401(k)	00 700	60 00 6	25 225	
	and section 403(b) employer contributions)	88,792	62,896	25,896	
9	Other employee benefits	255,488	190,554	64,934	
10	Payroll taxes	175,533	133,178	42,355	
11	Fees for services (non-employees)				
а	Management				 -
b	Legal				
С	Accounting	15,390		<u>15,390</u>	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	127,027		127,027	
17	Travel	13,593	10,126	3,467	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	_			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	391,420		391,420	
23	Insurance				
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together			}	
	and labeled miscellaneous may not exceed			1	
	5% of total expenses shown on line 25 below)				
а	NEED BASED	477,123	477,123		
b	EQUIPMENT RENTAL	127,932	77,295	50,637	
c	SUPPLIES	123,867	108,735	15,132	
ď	BOOSTER CLUBS	110,881	=		110,881
e	EMPLOYEE TUITION REMISSIO	103,672	103,672		
f	All other expenses	873,179	239,802	570,368	63,009
25	Total functional expenses. Add lines 1 through 24f	5,369,939	3,311,339	1,884,710	173,890
26	Joint Costs Check here If following		0,011,000		2.0,000
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation	İ	Ì		
DAA	10.10. Glorida Solida Glorida				Form 990 (2008)

__Page 11

_P	art A	Balance Sneet									
			(A) Beginning of year		(B) End of y						
	1	Cash—non-interest bearing	2,487,605	1	3,29		953				
	2	Savings and temporary cash investments		2							
	3	Pledges and grants receivable, net		3							
	4	Accounts receivable, net	144,457	4	10	00	310				
	-	Receivables from current and former officers, directors, trustees, key	111/10/	-							
	5	the state of the s		5							
	6	employees, or other related parties Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section		- 3							
	0	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			1						
		Part II of Schedule L		6							
۰,	,	Notes and loans receivable, net		7							
ě	7	Inventories for sale or use		8							
Assets	8		14,666	9	-	. 4	266				
⋖	9	Prepaid expenses and deferred charges Land, buildings, and equipment cost basis [10a 7,962,70		9		, , ,	<u> </u>				
			<u> </u>								
	D	Less accumulated depreciation Complete Part VI of Schedule D 10b 3,214,83	5,057,197	10c	4,74	۱7	955				
	44	*************************************	1,207,409	111	1,20						
	11	Investments—publicly traded securities Investments—other securities See Part IV, line 11	1,201,405	12	1,20	, , ,	554				
	12			13							
	13	Investments—program-related See Part IV, line 11 Intangible assets		14	 -						
	14	Other assets See Part IV, line 11	-	15							
	15	•	8,911,334	16	9,41	5	1 38				
	16	Total assets. Add lines 1 through 15 (must equal line 34)	307,351	17			508				
	17 18	Accounts payable and accrued expenses	307,331	18	1	,,,	500				
	1	Grants payable	2,427,150	19	2,74	16	576				
	19 Deferred revenue 2,427,150 19 20 Tax-exempt bond liabilities 20										
Ś											
Liabilities	22	Payables to current and former officers, directors, trustees, key		21							
Ē	**	employees, highest compensated employees, and disqualified									
Ē		persons Complete Part II of Schedule L		22							
	23	Secured mortgages and notes payable to unrelated third parties		23		-					
	24	Unsecured notes and loans payable		24							
	25	Other liabilities Complete Part X of Schedule D	-	25							
	26	Total liabilities. Add lines 17 through 25	2,734,501	26	3,10	7.	084				
·s		Organizations that follow SFAS 117, check here ▶ X and									
Balances		complete lines 27 through 29, and lines 33 and 34.									
an	27	Unrestricted net assets	4,858,394	27	4,97	79,	424				
Bal	28	Temporarily restricted net assets	128,497	28			874				
	29	Permanently restricted net assets	1,189,942		1,23						
or Fund		Organizations that do not follow SFAS 117, check here ▶									
ř		and complete lines 30 through 34.									
S	30	Capital stock or trust principal, or current funds		30							
Assets	31	Paid-in or capital surplus, or land, building, or equipment fund	· · · · · · · · · · · · · · · · · · ·	31							
Š	32	Retained earnings, endowment, accumulated income, or other funds		32							
¥,	33	Total net assets or fund balances	6,176,833	33	6,30) 8 ,	054				
Net	34	Total liabilities and net assets/fund balances	8,911,334	34	9,41	L 5 ,	138				
P	art >										
						Yes	No				
1	Ac	counting method used to prepare the Form 990 📗 Cash 🔀 Accrual	Other								
2	a We	ere the organization's financial statements compiled or reviewed by an independent accou	intant?		2a		X				
ŧ) We	ere the organization's financial statements audited by an independent accountant?			2b		X				
(: If "	Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibilit	y for oversight of								
	the	e audit, review, or compilation of its financial statements and selection of an independent	accountant?		2c						
3	a As	a result of a federal award, was the organization required to undergo an audit or audits as	s set forth in				1				
	the	Single Audit Act and OMB Circular A-133?			3a		<u> </u>				
t	o If "	Yes," did the organization undergo the required audit or audits?			3b		<u> </u>				
					Form	990	(2008)				

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Open

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Inspection
Employer identification number

			THE HERITAGE	SCHOOL						58	-IO//6/	<u>'U</u>	
P	art I	Rease	on for Public Charity	Status (All organizations	must co	mplete	this p	art) (s	ee ins	struction	ons)		
The	orgar	nization is not a	a private foundation because	it is (Please check only one org	anization)			,				
1	П	A church, con	vention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(<i>A</i>	A)(ı).						
2	X	A school desc	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3	П			e organization described in section	on 170(b)	(1)(A)(iii).	. (Attach	Schedu	le H)				
4	П	•	•	in conjunction with a hospital des			•			e hospi	ital's name.		
•	ш	city, and state	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				(. ,,(,					
5	\Box	•		a college or university owned or	onerated	hy a gove	rnmenta	l unit de	scribed	ın			
,	Щ.	•	b)(1)(A)(iv). (Complete Part I	-	operateu	by a gove	mmente	i uiii uc	SCHDEU				
^					4: 470/I	->/4>/4>/							
6	Н		•	vernmental unit described in sec			•						
7	Ш	•	•	ubstantial part of its support from	a govern	mentai un	it or fron	i the ger	ierai pu	DIIC			
			section 170(b)(1)(A)(vi). (Co										
8	Н	-		'0(b)(1)(A)(vi). (Complete Part II	•								
An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its													
		-	•							its			
			-	I unrelated business taxable inco			11 tax) fr	om busii	nesses				
		acquired by the	ne organization after June 30	, 1975 See section 509(a)(2) . (0	Complete	Part III)							
10	Ш	An organization	on organized and operated ex	clusively to test for public safety	See sec	tion 509(a	a)(4). (se	e instru	ctions)				
11	\sqcup	An organization	on organized and operated ex	clusively for the benefit of, to pe	rform the	functions	of, or to	carry ou	t the				
		purposes of o	ne or more publicly supporte	d organizations described in sect	tion 509(a)(1) or sec	ction 509)(a)(2) S	ee sec	tion			
		509(a)(3). Ch	eck the box that describes th	e type of supporting organization	and comp	olete lines	11e thre	ough 11b	1				
		a L Type	— ••	c Type III–Functiona			d		e III–Otł	ner			
е	\sqcup	By checking the	his box, I certify that the orga	nization is not controlled directly	or indirect	ly by one	or more	disqualif	fied				
		persons other	r than foundation managers a	ind other than one or more public	cly suppor	ted organ	ızatıons	describe	d in sec	tion			
		509(a)(1) or s	ection 509(a)(2)										
f		If the organiza	ation received a written deteri	mination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upporting	g				_
		organization,	check this box										
g		Since August	17, 2006, has the organization	on accepted any gift or contribution	on from ar	ny of the							
		following pers	sons?										
		(i) A person	who directly or indirectly cor	itrols, either alone or together wi	th persons	describe	d ın (ıı)					Yes	No
		and (III) b	pelow, the governing body of	the supported organization?							11g(ı)		
		(ii) A family	member of a person describe	ed in (i) above?							11g(ii)		}
		(iii) A 35% c	ontrolled entity of a person de	escribed in (i) or (ii) above?							11g(iii)	
h		Provide the fe	ollowing information about the	e organizations the organization	supports						<u></u>		
/i)	Name	e of supported	(ii) EIN	(iii) Type of organization	(IV) Is the c	raanization	(v) Did y	ou notify	(vi)	c tha	(viı) Am	ount of	
(*)		anization	(11) 2.11	(described on lines 1–9	1 ' '	sted in your		nzation in	organizat		sup		
				above or IRC section	governing	document?	col (ı)	-	(i) organı	zed in the			
				(see instructions))	L.		supp			\$?			
					Yes	No	Yes	No	Yes	No			
													
					ļ			_					_
									<u> </u>		ļ		
					<u> </u>								
									1				
					 	<u> </u>	<u> </u>		 		<u> </u>		
Tota	.1												

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Page 2

	(Complete only if you che	ecked the box	on line 5, 7, or	8 of Part I.)				
	tion A. Public Support							
Cal	endar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008		(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1-3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							<u> </u>
	tion B. Total Support							
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	-	(f) Total
7	Amounts from line 4	_						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10 11	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10	}						
12	Gross receipts from related activities, etc.	(see instructions)	<u> </u>	·	<u> </u>		12	
13	First five years. If the Form 990 is for the		second, third, fourt	h, or fifth tax year a	s a section 501(c)	(3)		
	organization, check this box and stop here	=		-				▶
Sec	tion C. Computation of Public Su	ipport Percent	tage					
14	Public support percentage for 2008 (line 6,	column (f) divided	by line 11, column	(f))			14	%
15	Public support percentage from 2007 Sche					Į	15	%
16a	••			3, and line 14 is 33	1/3 % or more, ch	eck this box		
	and stop here . The organization qualifies a		•					•
b	33 1/3 % support test—2007. If the organ				is 33 1/3 % or mor	e, check this		. □
	box and stop here. The organization qualif	• •			40b 4b 4b	1 100/		
17a	10%-facts-and-circumstances test—200							
	more, and if the organization meets the "fa					IV HOW the		▶ [
h	organization meets the "facts-and-circumst 10%-facts-and-circumstances test—200					ne 15 is 10%	or	F L
b	more, and if the organization meets the "fa						. ,	
	organization meets the "facts-and-circumsi							▶ [
18	Private foundation. If the organization did		•		•	nstructions		▶ [

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

THE HERITAGE SCHOOL 58-1077670 Schedule A (Form 990 or 990-EZ) 2008 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (d) 2007 (b) 2005 (c) 2006 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 **(b)** 2005 (c) 2006(d) 2007 (e) 2008 (f) Total Amounts from line 6 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and

line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2008 THE HERITAGE SCHOOL

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

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

OMB No 1545-0047

answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Internal Revenue Service Name of the organization Employer identification number THE HERITAGE SCHOOL 58-1077670 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year

_ _ _ _ _ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Sche	dule D (Form 990) 2008 THE HERIT	AGE SCHOOL		58-10	77670	Page 2
Pa	rt III Organizations Maintaining	Collections of Art, F	listorical Treasu	res, or Other S	Similar Assets	(continued)
3	Using the organization's accession and other interest (check all that apply)	ecords, check any of the fol	lowing that are a signi	ficant use of its coll	ection	
	Public exhibition	d 🗆 Loan o	r exchange programs			
a	Scholarly research	e Other	r exchange programs			
b	Preservation for future generations	e 🖂 Other				
С						
4	Provide a description of the organization's coll Part XIV	ections and explain how the	y further the organizat	ion's exempt purpo	se in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	be maintained as part of the	organization's collect	ion?		Yes No
Pa	rt IV Trust, Escrow and Custod Part IV, line 9, or reported a	_	•		d "Yes" to Form	n 990,
12	Is the organization an agent, trustee, custodial					
	included on Form 990, Part X?	or other intermediary for or	orthodions or other a	33613 1101		Yes No
h	If "Yes," explain the arrangement in Part XIV a	nd complete the following ta	hle			
-	ii yoo, oxpoiittio arrangomentii artxxv a	na complete the lonething to				Amount
c	Beginning balance				1c	
	Additions during the year				1d	
	Distributions during the year				1e	
f	Ending balance				1f	
2a	Did the organization include an amount on For	m 990 Part X line 212			<u> </u>	Yes No
	If "Yes," explain the arrangement in Part XIV	555, 1 411, 11, 11, 10				165 140
	rt V Endowment Funds. Comp	lete if organization an	swered "Yes" to	Form 990. Parl	IV. line 10	
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	1,318,439				
b	Contributions	152,363				
c	Investment earnings or losses	-14,097				
d	Grants or scholarships					
е	Other expenditures for facilities					
	and programs	124,594				1
f	Administrative expenses	3,481		-		
q	End of year balance					
2	Provide the estimated percentage of the year	end balance held as			<u> </u>	
а	Board designated or quasi-endowment	%				
b	Permanent endowment ▶ 93.00 %	- - -				
С	Term endowment ▶					
	Are there endowment funds not in the possess	sion of the organization that	are held and administ	ered for the		
	organization by					Yes No
	(i) unrelated organizations					3a(i) X
	(ii) related organizations					3a(ii) X
b	If "Yes" to 3a(II), are the related organizations	listed as required on Schedi	ule R?			3b
4	Describe in Part XIV the intended uses of the	organization's endowment fu	unds			
Pa	rt VI Investments—Land, Build	ings, and Equipment	. See Form 990,	Part X, line 10		
	Description of investment	(a) Cost or other basis	(b) Cost or othe		preciation	(d) Book value
		(investment)	basis (other)			
1a	Land		1,101,	370		1,101,370
b	Buildings					
	Leasehold improvements					
	Equipment					
	Other		6,861,	397 3,	214,812	3,646,585
	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, column (B),				4,747,955
					Schedu	le D (Form 990) 2008

Schedule D (F	orm 990) 2008 THE HERITAGE SCHOOL		58-1077670	Page 3
Part VII	Investments—Other Securities. See Form 99	0, Part X, line 12.		
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Einancial deny	vatives and other financial products	 		
Closely-held e	•			
Other	• •			
	. 			
	n (b) should equal Form 990, Part X, col (B) line 12)		J	
Part VIII	Investments—Program Related. See Form 99		1	
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
				
		-		
		 		
				
		 		
Total. (Column	n (b) should equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. See Form 990, Part X, line 15.			•
	(a) Description	<u> </u>	(b) Boo	k value
		·		
				
				
				 -
Total. (Colum	n (b) should equal Form 990, Part X, col (B) line 15)		>	
Part X	Other Liabilities. See Form 990, Part X, line 2	5.		
	(a) Description of liability	(b) Amount		
Federal incom	e taxes			
		 		
		 		
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		 	4	
		 	_	
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Total. (Column	n (b) should equal Form 990, Part X, col (B) line 25)		_	
	ovide the text of the footnote to the organization's financial state	ements that reports the orga	anization's liability for	
	positions under FIN 48		•	

Sche	dule D (Form 990) 2008 THE HERITAGE SCHOOL		58-107767	0	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 t	o Finan	cial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	5,551,286
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	5,369,939
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	181,347
4	Net unrealized gains (losses) on investments			4	-50,130
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	-50,130
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	-		10	131,217
Pa	rt XII Reconciliation of Revenue per Audited Financial Statem	<u>nents W</u>	ith Revenue per Retu	ırn	
1	Total revenue, gains, and other support per audited financial statements			_1	5,501,156
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		,		
а	Net unrealized gains on investments	2a	-50,130		
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	50,130
3	Subtract line 2e from line 1	,	r	3	5,551,286
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
C	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)			5	5,551,286
Pa	art XIII Reconciliation of Expenses per Audited Financial State	ments V	Vith Expenses per R	eturn	
1	Total expenses and losses per audited financial statements			1	5,369,939
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1	t		
а	Donated services and use of facilities	2a			
b	• •	2b			
С	Losses reported on Form 990, Part IX, line 25	2c		:	
d	- · · · · · · · · · · · · · · · · · · ·	2d			
е	Add lines 2a through 2d			2e	5 260 020
3	Subtract line 2e from line 1	1	ſ	3	5,369,939
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV)	4b_	<u> </u>		
	Add lines 4a and 4b			4c	F 260 020
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	5,369,939
	art XIV Supplemental Information		I A Dart IV I have 4h		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9, a		14, Part IV, lines 10		
ai iu 2	2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d	and 4b			
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Schedule D (Fo	orm 990) 20	800	TH	E H	IER	ITA	\GE	SC	CHC	OI	_							58	-10	77(67C)					Pa	age 5
Schedule D (Fo	Supple	ment	al In	forr	mati	ion (contin	ued)																				<u> </u>
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SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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 Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 58-1077670 THE HERITAGE SCHOOL YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, X bylaws, other governing instrument, or in a resolution of its governing body? 1 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, X programs, and scholarships? 2 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 X describe If "No," please explain 3 NEWSPAPER, TELEVISION AND OTHER ADVERTISING BROCHURES CONTAIN NONDISCRIMINATION POLICY Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff? 4a X Records documenting that scholarships and other financial assistance are awarded on a racially b X nondiscriminatory basis? 4b Copies of all catalogues, brochures, announcements, and other written communications to the public dealing C X with student admissions, programs, and scholarships? X Copies of all material used by the organization or on its behalf to solicit contributions? 4d If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to X Students' rights or privileges? 5a X Admissions policies? 5b X Employment of faculty or administrative staff? 5c X Scholarships or other financial assistance? 5d X Educational policies? 5e X Use of facilities? 5f X Athletic programs? 5g X Other extracurricular activities? 5h If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization receive any financial aid or assistance from a governmental agency? 6a 6b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of

Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

▶ 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

Name of the organization THE HERITAGE SCHOOL Employer identification number 58-1077670

Part I Fundraising Activities. Complete i	f the organizati	on answe	red "Yes" to Forn	n 990, Part IV, lind	e 17.									
1 Indicate whether the organization raised funds through a	iny of the following a	ctivities Ch	eck all that apply											
a Mail solicitations	e Solicitation	of non-gove	rnment grants											
b Email solicitations	f Solicitation	of governme	ent grants											
c Phone solicitations	g Special fun	draising eve	nts											
d In-person solicitations														
	Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No.													
b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.														
(i) Name of individual or entity (fundraiser)	(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												
					-									
			_											
					-									
Total		•												
3 List all states in which the organization is registered or lie	censed to solicit fund	ds or has be	en notified it is exempt	from										

P	art l			s. Complete if the org <u>on Form 990-EZ, line</u>								ortec	i
		more than \$10		(a) Event #1 CTION (event type)		(b) Even OOSTERT	t #2 HON	<u>NO</u>	(c) Other Events	—	(d) Total (Add col (gh
Revenue	1 2 3	Gross receipts Less Charitable contributions Gross revenue (line 1		62,73	8		37,503				1	00,	241
		minus line 2)		62,73	8		37,503	-		\perp	1	00,	241
	4	Cash prizes											
uses	5	Non-cash prizes											
Direct Expenses	6	Rent/facility costs											
Direct	7	Other direct expenses									<u> </u>	<u> </u>	
P	8 9 art l	Net income summary Collin Gaming. Comp	_{mbine} plete	ines 4 through 7 in column lines 3 and 8 in column (d) if the organization arem 990-EZ, line 6a.		ed "Yes" to	Form 990, F	Part I	V, line 19, or i	► (• report		00,	2 41
nue		111an \$13,000 C	<u> </u>	(a) Bingo		(b) Pull tabs/ bingo/progress			(c) Other gaming		(d) Total ga		
Revenue	1	Gross revenue											
ses	2	Cash prizes											
Direct Expenses	3	Non-cash prizes			_								
Direct	4	Rent/facility costs		· -		 		_	·	_			
	5	Other direct expenses			<u> </u>								
	6	Volunteer labor		Yes %		Yes No	%	H	res No	%			
	7	Direct expense summary	Add li	ines 2 through 5 in column	(d)					•			
	8	Net gaming income summ	nary C	Combine lines 1 and 7 in co	lumn (c	i)				•			
9 a b	ls t			nization operates gaming ac lite gaming activities in each		se states?					9a	Yes	No
10a b		ere any of the organization's Yes," Explain	s gamı	ng licenses revoked, suspe	ended o	or terminated d	uring the tax yea	ι			10a		
11 12				ng activities with nonmemb clary or trustee of a trust or		ther of a partne	rehin or other or	at its z			11		
		med to administer charitab			a men		Tallip of Other el	nity	Schedule	G (For	12 rm 990 or 9	90-EZ)	2008

Sche	dule G (Form 990 or 990-EZ) 2008 THE HERITAGE SCHOOL	58-107	7670	P	age 3
		1 1		Yes	No
13 a	Indicate the percentage of gaming activity operated in The organization's facility An outside facility	13a	%		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records	[130]	76		
	Name ►				
	Address ►				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address	and the			
	Name ►				
	Address ▶				
16	Gaming manager information				
	Name ►				
	Gaming manager compensation ▶ \$				
	Description of services provided ▶				
	Director/officer Employee Independent contractor				
17 a	Mandatory distributions Is the organization required under state law to make chantable distributions from the gaming proceeds to retain the state gaming license?		17a		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$				
		Schedule G (For	m 990 or 9	90-EZ)	2008

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Attach to Form 990 or Form 990-EZ.

▶ To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, OMB No 1545-0047

2008

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization or Form 990-EZ, Part V, line 38a or 40b.

Inspection Employer identification number

	THE HERITAGE SCHO	OL						58-	107	<u> 76'</u>	70							
Part I	Excess Benefit Transactions (section To be completed by organizations that answer								, Part V, line 40b									
4	(a) Name of disqualified person						n of transaction				(c) C	orrect	ed?					
1	(a) Name of disqualities person						(b) Descriptio					Yes	1	Vo.				
													_ _					
	<u> </u>												\perp					
													_ _					
												ļ						
												<u> </u>	_ _					
	e amount of tax imposed on the organization ma	nagers	or disqu	alified p	erson	s during th	e year		▶ €									
	ction 4958 amount of tax, if any, on line 2, above, reimbur	sed by	the orga	nızatıon	,													
Part II	Loans to and/or From Interested F								-									
ı arıı	To be completed by organizations that answer			rm 990.	Part I	V. line 26.	or Form 990-	EZ. Part V. line	e 38a									
12) Origin			ance due		lofoult?	/6\ An	proud	(-) 16	latton				
(a)) Name of interested person and purpose	oan to m the	•	ıpal am		(U) Baix	ance due	(e) In default?			proved ard or	(g) Writte agreemer						
	organı	zation?								comm	nittee?							
			From						Yes	No	Yes	No	Yes	No				
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Γotal						▶ 5	\$											
Part III	Grants or Assistance Benefitting I To be completed by organizations that answer					V. line 27												
	(a) Name of interested person			1		-	n interested pe	rson and the	(c) Amoi	unt of c	grant or	type	of				
	(-,			(-,-		•	anization		,-,		assist	-	.,,,					
NEED I	BASED FINANCIAL AID			(HII	D OF	BOARD	MEMBE					7,3	301				
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Part IV	Business Transactions Involving	Intoro	stod [20100		-			L									
	To be completed by organizations that answer					V, line 28a	, 28b, or 28c						_					
	(a) Name of interested person	(b) i	Relations	hip betwe	een	(c) Ar	mount of	(d) Descri	ption o	f trans	action			Sharing org				
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SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2008
Open to Public

Inspection

Name of the organization

THE HERITAGE SCHOOL

Employer identification number

58-1077670

FORM 990, PART I, LINE 6

COACHING, PARENTS CLUB, AND FUNDRAISING EVENTS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
TRUSTEE COMMITTE REVIEWS CONFLICT OF INTEREST POLICIES ANNUALLY.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.