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## Return of Organization Exempt From Income Tax

2008

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

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

Open to Public Inspection

For the 2008 calendar year, or tax year beginning 7/01, 2008, and ending 6/30, 2009

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		Please use IRS label or print or type. See specific instructions. <b>PROVIDENCE CHRISTIAN ACADEMY</b> <b>410 DEJARNETTE LANE</b> <b>MURFREESBORO, TN 37129</b>	<b>D</b> Employer identification number 62-1664417
		<b>E</b> Telephone number 615-904-0902	<b>G</b> Gross receipts \$ 2,072,691.
<b>F</b> Name and address of principal officer: SAME AS C ABOVE		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'No,' attach a list (see instructions)	
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c) ( 3 ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(c)</b> Group exemption number	
<b>J</b> Website: N/A			
<b>K</b> Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>L</b> Year of formation 1997 <b>M</b> State of legal domicile TN	

<b>Part I Summary</b>																																																									
1 Briefly describe the organization's mission or most significant activities. <u>PROVIDENCE CHRISTIAN ACADEMY EXISTS TO PROVIDE A HIGH-QUALITY EDUCATION WITHIN A CHRISTIAN ENVIRONMENT TO STUDENTS IN GRADES K-8.</u>																																																									
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<b>Part II Signature Block</b>	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
<b>Sign Here</b> Signature of officer: <u>Michael Thomas</u> Date: <u>5/17/10</u> Type or print name and title: <u>Michael Thomas - Treasurer Board of Directors</u>	
<b>Paid Preparer's Use Only</b> Preparer's signature: <u>Stephen L Fuchcar</u> Date: <u>5/17/10</u> Check if self-employed <input type="checkbox"/> Preparer's identifying number (see instructions): <u>N/A</u> Firm's name (or yours if self-employed), address, and ZIP + 4: <u>HALL, DAVIDSON &amp; ASSOC., CPA'S</u> <u>P.O. BOX 1234</u> <u>MURFREESBORO, TN 37133-1234</u> EIN: <u>N/A</u> Phone no: <u>(615) 893-9334</u>	
May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

G16 EXT TO 5/17/10

**Part III** Statement of Program Service Accomplishments (see instructions)**1** Briefly describe the organization's mission:

PROVIDENCE CHRISTIAN ACADEMY EXISTS TO PROVIDE A HIGH-QUALITY EDUCATION WITHIN A  
CHRISTIAN ENVIRONMENT TO STUDENTS IN GRADES K-8.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O.

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code: 772) (Expenses \$ 1,583,466. including grants of \$                     ) (Revenue \$                     )

PROVIDENCE CHRISTIAN ACADEMY (PCA) PRODUCES HIGH ACHIEVING STUDENTS WHO ARE WELL  
EQUIPPED AND WELL PREPARED TO MEET THE NEXT ACADEMIC LEVEL. THEIR EXPERIENCE HERE  
GROUNDS THEM IN CHRISTIAN PRINCIPLES, WHICH PREPARE THEM FOR BEING POSITIVE ADDITIONS  
TO ANY SCHOOL OR COMMUNITY. THE SIZE OF THE STUDENT BODY IS APPROXIMATELY 150  
CHILDREN.

**4b** (Code: 772) (Expenses \$                      including grants of \$                     ) (Revenue \$                     )**4c** (Code: 772) (Expenses \$                      including grants of \$                     ) (Revenue \$                     )**4d** Other program services. (Describe in Schedule O.)(Expenses \$                      including grants of \$                     ) (Revenue \$                     )**4e** Total program service expenses ▶ \$ 1,583,466. (Must equal Part IX, Line 25, column (B).)

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
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		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		X
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I		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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	X	
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		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		X
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		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		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I		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	X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H		X
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		X
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		X
23 Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J		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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,' go to question 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I		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		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		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		X

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Form 990 (2008)

**Part IV** Checklist of Required Schedules (continued)**28** During the tax year, did any person who is a current or former officer, director, trustee, or key employee:**a** 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

	Yes	No
<b>28a</b>		X

**b** Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV

<b>28b</b>		X
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**c** 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

<b>28c</b>		X
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**29** Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M

<b>29</b>		X
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**30** Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M

<b>30</b>		X
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**31** Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I

<b>31</b>		X
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**32** Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II

<b>32</b>		X
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**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

<b>33</b>		X
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**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

<b>34</b>		X
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**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

<b>35</b>		X
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**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

<b>36</b>		X
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**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

<b>37</b>		X
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Form 990 (2008)

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	0	
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
<b>2a</b>	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	62	
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
<b>3b</b>	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		
<b>4a</b>	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 account)?		X
<b>b</b>	If 'Yes,' enter the name of the foreign country. See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
<b>6a</b>	Did the organization solicit any contributions that were not tax deductible?		X
<b>b</b>	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
<b>b</b>	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If 'Yes,' indicate the number of Forms 8282 filed during the year	7d	
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
<b>h</b>	For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
<b>8</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?		
<b>b</b>	Did the organization make any distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b>	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from other members or shareholders	11a	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b>	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	12b	

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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.)**Section A. Governing Body and Management**

For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1a Enter the number of voting members of the governing body	11	
1b Enter the number of voting members that are independent	11	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?		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?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.		
a The governing body?		X
b Each committee with authority to act on behalf of the governing body?		X
9a Does the organization have local chapters, branches, or affiliates?		X
b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 SEE SCHEDULE O		X
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O		X

**Section B. Policies**

	Yes	No
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done		X
13 Does the organization have a written whistleblower policy?		X
14 Does the organization have a written document retention and destruction policy?		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 decision.		
a The organization's CEO, Executive Director, or top management official?		X
b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions)		X
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?		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 safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosures**

17 List the states with which a copy of this Form 990 is required to be filed ▶ TN

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.

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. SEE SCHEDULE O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization.  
▶ MICHELLE STRICKLAND 410 DEJARNETT LANE, MURFREESBORO, TN 37130 615-904-0902







**Part VIII** Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 299,516.				
	g Noncash contribns included in lns 1a-1f. . . \$					
	<b>h Total.</b> Add lines 1a-1f		299,516.			
PROGRAM SERVICE REVENUE	Business Code					
	2a TUITION & RELATED FEES		1,525,036.	1,525,036.		
	b AFTER SCHOOL CARE		33,833.	33,833.		
	c HOT LUNCH PROGRAM		50,913.	50,913.		
	d ATHLETICS		26,530.	26,530.		
	e					
	f All other program service revenue					
	<b>g Total.</b> Add lines 2a-2f.		1,636,312.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts).					
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross Rents	(i) Real				
		(ii) Personal				
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)		4,005.	4,005.		
	7a 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)					
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 . . . . .	a	132,858.			
	b Less: direct expenses . . . . .	b	108,710.			
	c Net income or (loss) from fundraising events		24,148.	24,148.		
	9a Gross income from gaming activities. See Part IV, line 19 . . . . .	a				
	b Less: direct expenses . . . . .	b				
	c Net income or (loss) from gaming activities . . . . .					
	10a Gross sales of inventory, less returns and allowances . . . . .	a				
b Less: cost of goods sold . . . . .	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11a						
b						
c						
d All other revenue. . . . .						
e Total. Add lines 11a-11d						
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			1,963,981.	1,664,465.	0.	0.

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	1,149,907.	965,922.	137,989.	45,996.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	91,999.	77,279.	11,040.	3,680.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	11,710.		11,710.	
d Lobbying				
e Prof fundraising svcs. See Part IV, ln 17				
f Investment management fees				
g Other	831.		831.	
12 Advertising and promotion	5,285.	5,285.		
13 Office expenses	18,120.		18,120.	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	15,761.	15,761.		
20 Interest	77,785.	77,785.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	118,539.	118,539.		
23 Insurance	32,445.	27,254.	5,191.	
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 UTILITIES	75,111.	75,111.		
b HOT LUNCH PROGRAM EXPENSE	54,226.	54,226.		
c CURRICULUM	39,502.	39,502.		
d ATHLETICS	33,878.	33,878.		
e REPAIRS & MAINTENANCE	29,201.	24,529.	4,672.	
f All other expenses	151,934.	68,395.	70,070.	13,469.
25 Total functional expenses. Add lines 1 through 24f	1,906,234.	1,583,466.	259,623.	63,145.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

BAA

Form 990 (2008)

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>ASSETS</b>	1 Cash — non-interest-bearing . . . . .	149,668.	1	145,626.
	2 Savings and temporary cash investments . . . . .		2	
	3 Pledges and grants receivable, net . . . . .		3	
	4 Accounts receivable, net . . . . .		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L . . . . .		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .		6	
	7 Notes and loans receivable, net . . . . .		7	
	8 Inventories for sale or use . . . . .		8	
	9 Prepaid expenses and deferred charges . . . . .		9	
	10a Land, buildings, and equipment, cost basis . . . . .	10a 4,094,386.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D . . . . .	10b 638,348.		
		3,492,569.	10c	3,456,038.
	11 Investments — publicly-traded securities . . . . .		11	
	12 Investments — other securities. See Part IV, line 11 . . . . .		12	
	13 Investments — program-related. See Part IV, line 11 . . . . .		13	
	14 Intangible assets . . . . .		14	
15 Other assets. See Part IV, line 11 . . . . .	7,705.	15		
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	3,649,942.	16	3,601,664.	
<b>LIABILITIES</b>	17 Accounts payable and accrued expenses . . . . .		17	
	18 Grants payable . . . . .		18	
	19 Deferred revenue . . . . .		19	
	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	
	23 Secured mortgages and notes payable to unrelated third parties . . . . .	1,998,210.	23	1,892,185.
	24 Unsecured notes and loans payable . . . . .		24	
	25 Other liabilities. Complete Part X of Schedule D . . . . .		25	
	26 <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	1,998,210.	26	1,892,185.
<b>NET ASSETS OR FUND BALANCES</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29 and lines 33 and 34.</b>			
	27 Unrestricted net assets . . . . .	1,607,111.	27	1,642,776.
	28 Temporarily restricted net assets . . . . .	44,621.	28	66,703.
	29 Permanently restricted net assets . . . . .		29	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds . . . . .		30	
	31 Paid-in or capital surplus, or land, building, and equipment fund . . . . .		31	
	32 Retained earnings, endowment, accumulated income, or other funds . . . . .		32	
	33 <b>Total net assets or fund balances.</b> . . . . .	1,651,732.	33	1,709,479.
	34 <b>Total liabilities and net assets/fund balances.</b> . . . . .	3,649,942.	34	3,601,664.

**Part XI Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990. <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .	2a	X
b Were the organization's financial statements audited by an independent accountant? . . . . .	2b	X
c If 'Yes' to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . .	2c	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .	3a	X
b If 'Yes,' did the organization undergo the required audit or audits? . . . . .	3b	

BAA

Form 990 (2008)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

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

OMB No 1545 0047

**2008**

**Open to Public Inspection**

Name of the organization

PROVIDENCE CHRISTIAN ACADEMY

Employer identification number

62-1664417

**Part I Reason for Public Charity Status** (All organizations must complete this part.) (see instructions)

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

- 1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☒ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state.
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ 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 support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a ☐ Type I
  - b ☐ Type II
  - c ☐ Type III — Functionally integrated
  - d ☐ Type III— Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f ☐ If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) a family member of a person described in (i) above?
- (iii) a 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11 g (i)		
11 g (ii)		
11 g (iii)		

h Provide the following information about the organizations the organization supports.

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of Support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

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

Schedule A (Form 990 or 990-EZ) 2008

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
<b>3</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
<b>4 Total.</b> Add lines 1-3						
<b>5</b> 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)						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	
<b>13 First five years.</b> 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. <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	%
<b>15</b> Public support percentage for 2007 Schedule A, Part IV-A, line 26f	15	%
<b>16a 33-1/3 support test — 2008.</b> If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
<b>b 33-1/3 support test — 2007.</b> If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test — 2008.</b> 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 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test — 2007.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. <input type="checkbox"/>		

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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.)

**Section A. Public Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions and membership fees received. (Do not include "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1-5						
<b>7a</b> Amounts included on lines 1, 2, 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12)						
<b>14 First five years.</b> 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. <span style="float: right;">▶ <input type="checkbox"/></span>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2007 Schedule A, Part IV-A, line 27g	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	<b>18</b>	%
<b>19a 33-1/3 support tests — 2008.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization. <span style="float: right;">▶ <input type="checkbox"/></span>		
<b>b 33-1/3 support tests — 2007.</b> If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. <span style="float: right;">▶ <input type="checkbox"/></span>		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. <span style="float: right;">▶ <input type="checkbox"/></span>		

## Part IV

Consolidated Form 990-BE (2008)	PROVIDENCE CHRISTIAN ACADEMY	02-1004417	Page 1
<b>Part IV</b>	<b>Supplemental Information.</b> 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)		

This image shows a full page of primary-ruled paper. It features multiple sets of three horizontal dashed lines, which are commonly used in elementary school writing to guide letter height and placement. The lines are evenly spaced across the entire page, providing a template for handwriting practice. There is no text or other markings on the paper.



**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

OMB No 1545 0047

**2008**

**Open to Public Inspection**

Name of the organization

PROVIDENCE CHRISTIAN ACADEMY

Employer identification number

62-1664417

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts** Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? ☐ Yes ☐ No

**Part II Conservation Easements** Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 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
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? ☐ Yes ☐ No

6 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 ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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.

**Part III Organizations Maintaining Collections 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 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, 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 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. . . . . ▶ \$ \_\_\_\_\_

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

a Revenues included in Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply).
- a ☐ Public exhibition d ☐ Loan or exchange programs
- b ☐ Scholarly research e ☐ Other \_\_\_\_\_
- c ☐ Preservation for future generations
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Trust, Escrow and Custodial Arrangements** Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table.

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

- 2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV.

**Part V Endowment Funds** Complete if organization answered 'Yes' to Form 990, Part 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					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ \_\_\_\_\_ %
- b Permanent endowment ▶ \_\_\_\_\_ %
- c Term endowment ▶ \_\_\_\_\_ %

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

- b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Investments—Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value
1a Land		400,000.		400,000.
b Buildings		3,401,146.	503,950.	2,897,196.
c Leasehold improvements		113,932.	27,427.	86,505.
d Equipment		35,037.	19,492.	15,545.
e Other		144,271.	87,479.	56,792.
<b>Total.</b> Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				3,456,038.

BAA

Schedule D (Form 990) 2008



<b>Part XI</b>	<b>Reconciliation of Change in Net Assets from Form 990 to Financial Statements</b>
----------------	---

N/A

- |    |  |  |
|----|--|--|
| 1  | Total revenue (Form 990, Part VIII, column (A), line 12)                         |  |
| 2  | Total expenses (Form 990, Part IX, column (A), line 25)                          |  |
| 3  | Excess or (deficit) for the year. Subtract line 2 from line 1                    |  |
| 4  | Net unrealized gains (losses) on investments                                     |  |
| 5  | Donated services and use of facilities   |  |
| 6  | Investment expenses  |  |
| 7  | Prior period adjustments   |  |
| 8  | Other (Describe in Part XIV)   |  |
| 9  | Total adjustments (net). Add lines 4-8   |  |
| 10 | Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 |  |

<b>Part XII</b>	<b>Reconciliation of Revenue per Audited Financial Statements With Revenue per Return</b>	<b>N/A</b>
-----------------	---	------------

- |          |  |  |
|----------|--|--|
| <b>1</b> | Total revenue, gains, and other support per audited financial statements                         |  |
| <b>2</b> | Amounts included on line 1 but not on Form 990, Part VIII, line 12.                              |  |
| <b>a</b> | Net unrealized gains on investments  |  |
| <b>b</b> | Donated services and use of facilities   |  |
| <b>c</b> | Recoveries of prior year grants  |  |
| <b>d</b> | Other (Describe in Part XIV)   |  |
| <b>e</b> | Add lines <b>2a</b> through <b>2d</b>  |  |
| <b>3</b> | Subtract line <b>2e</b> from line <b>1</b>   |  |
| <b>4</b> | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                             |  |
| <b>a</b> | Investments expenses not included on Form 990, Part VIII, line 7b                                |  |
| <b>b</b> | Other (Describe in Part XIV)   |  |
| <b>c</b> | Add lines <b>4a</b> and <b>4b</b>  |  |
| <b>5</b> | Total revenue. Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 12.) |  |

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

N/A

- |          |   |  |
|----------|---|--|
| <b>1</b> | Total expenses and losses per audited financial statements                                      |  |
| <b>2</b> | Amounts included on line 1 but not on Form 990, Part IX, line 25.                               |  |
| <b>a</b> | Donated services and use of facilities  |  |
| <b>b</b> | Prior year adjustments  |  |
| <b>c</b> | Losses reported on Form 990, Part IX, line 25   |  |
| <b>d</b> | Other (Describe in Part XIV)  |  |
| <b>e</b> | Add lines <b>2a</b> through <b>2d</b>   |  |
| <b>3</b> | Subtract line <b>2e</b> from line <b>1</b>  |  |
| <b>4</b> | Amounts included on Form 990, Part IX, line 25, but not on line 1:                              |  |
| <b>a</b> | Investments expenses not included on Form 990, Part VIII, line 7b                               |  |
| <b>b</b> | Other (Describe in Part XIV)  |  |
| <b>c</b> | Add lines <b>4a</b> and <b>4b</b>   |  |
| <b>5</b> | Total expenses. Add lines <b>3</b> and <b>4c</b> (This should equal Form 990, Part I, line 18.) |  |

## Part XIV Supplemental Information

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

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

**Schools**

OMB No 1545 0047

**2008**

Department of the Treasury  
Internal Revenue Service

► 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.

**Open to Public  
Inspection**

Name of the organization

**PROVIDENCE CHRISTIAN ACADEMY**

Employer identification number

**62-1664417**

**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?

	YES	NO
<b>1</b>	X	

**2** Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

<b>2</b>	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 had no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe. If 'No,' please explain

<b>3</b>	X	
----------	---	--

ANY PROSPECTIVE STUDENT FAMILIES ARE GIVEN AN APPLICATION PACKET THAT HAS  
OUR STATEMENT NOTED. WE HAVE NO FORMAL SOLICITATION PROGRAM.

**4** Does the organization maintain the following?

**a** Records indicating the racial composition of the student body, faculty, and administrative staff?

<b>4a</b>	X	
-----------	---	--

**b** Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?

<b>4b</b>	X	
-----------	---	--

**c** Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

<b>4c</b>	X	
-----------	---	--

**d** Copies of all material used by the organization or on its behalf to solicit contributions?

<b>4d</b>	X	
-----------	---	--

If you answered 'No,' to any of the above, please explain. (If you need more space, attach a separate statement.)

**5** Does the organization discriminate by race in any way with respect to.

**a** Students' rights or privileges?

<b>5a</b>		X
-----------	--	---

**b** Admissions policies?

<b>5b</b>		X
-----------	--	---

**c** Employment of faculty or administrative staff?

<b>5c</b>		X
-----------	--	---

**d** Scholarships or other financial assistance?

<b>5d</b>		X
-----------	--	---

**e** Educational policies?

<b>5e</b>		X
-----------	--	---

**f** Use of facilities?

<b>5f</b>		X
-----------	--	---

**g** Athletic programs?

<b>5g</b>		X
-----------	--	---

**h** Other extracurricular activities?

<b>5h</b>		X
-----------	--	---

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

**6a** Does the organization receive any financial aid or assistance from a governmental agency?

<b>6a</b>		X
-----------	--	---

**b** Has the organization's right to such aid ever been revoked or suspended?

<b>6b</b>		X
-----------	--	---

If you answered 'Yes,' to either line 6a or line b, please explain using an attached statement.

**7** Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation

<b>7</b>	X	
----------	---	--

Department of the Treasury  
Internal Revenue Service

► 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.

2008

**Open to Public Inspection**

Name of the organization

PROVIDENCE CHRISTIAN ACADEMY

Employer identification number

62-1664417

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- |  |  |
|--|--|
| <input type="checkbox"/> Mail solicitations      | <input type="checkbox"/> Solicitation of non-government grants |
| <input type="checkbox"/> Email solicitations     | <input type="checkbox"/> Solicitation of government grants     |
| <input type="checkbox"/> Phone solicitations     | <input type="checkbox"/> Special fundraising events            |
| <input type="checkbox"/> In-person solicitations |  |

**2a** Did the organization have 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 990EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(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			
<b>Total</b>						0

**3** List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2008

**Part II Fundraising Events.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1 <u>FUNDRAISER EVE</u> (event type)	(b) Event #2 <u>GAMES/CONCESSI</u> (event type)	(c) Other Events <u>2</u> (total number)	(d) Total Events (Add col. (a) through col. (c))
REVENUE	1 Gross receipts	46,746.	40,910.	45,202.	132,858.
	2 Less: Charitable contributions				
	3 Gross revenue (line 1 minus line 2)	46,746.	40,910.	45,202.	132,858.
DIRECT EXPENSES	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Other direct expenses	17,060.	37,022.	54,628.	108,710.
	8 Direct expense summary. Add lines 4- through 7 in column (d)				108,710.
	9 Net income summary. Combine lines 3 and 8 in column (d)				24,148.

**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 tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
REVENUE	1 Gross revenue				
	2 Cash prizes				
EXPENSES	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	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)				

	YES	NO
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? ...	9a	
b If 'No,' Explain: _____ _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ...	10a	
b If 'Yes,' Explain: _____ _____		
11 Does the organization operate gaming activities with nonmembers? ...	11	
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	

**13** Indicate the percentage of gaming activity operated in:**a** The organization's facility**13a** %**b** An outside facility**13b** %**14** Provide the name and address of the person who prepares the organization's gaming/special events books and records:

Name. ▶ \_\_\_\_\_

Address: ▶ \_\_\_\_\_

**15a** Does the organization have a contact 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 \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party \$ \_\_\_\_\_.**c** If 'Yes,' enter name and address:

Name. ▶ \_\_\_\_\_

Address: ▶ \_\_\_\_\_

**16** Gaming manager information

Name. ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided: ▶ \_\_\_\_\_

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions**a** Is the organization required under state law to make charitable 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 O**  
**(Form 990)**

**Supplemental Information to Form 990**

OMB No 1545 0047

**2008**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

PROVIDENCE CHRISTIAN ACADEMY

Employer identification number

62-1664417

**FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS**

IF TIME ALLOWS, THE BOARD REVIEWS THE 990 PRIOR TO FILING.

**FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE**

THESE DOCUMENTS ARE AVAILABLE UPON REQUEST

**Depreciation and Amortization**  
**(Including Information on Listed Property)**

▶ See separate instructions. ▶ Attach to your tax return.

**2008**Attachment  
Sequence No **67**

Name(s) shown on return

**PROVIDENCE CHRISTIAN ACADEMY**

Identifying number

**62-1664417**

Business or activity to which this form relates

**FORM 990/990-PF****Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	\$250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.) (See instructions)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	113,475.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

**Section B — Assets Placed in Service During 2008 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		8,220.	5	MQ	200DB	1,150.
c 7-year property		15,749.	7	MQ	200DB	3,155.
d 10-year property						
e 15-year property		58,039.	15	MQ	S/L	759.
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

**Section C — Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System**

20a Class life				S/L	
b 12-year			12 yrs	S/L	
c 40-year			40 yrs	MM	S/L

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	118,539.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

2008

## FEDERAL WORKSHEETS

PAGE 1

CLIENT PROVIDEN

PROVIDENCE CHRISTIAN ACADEMY

62-1664417

5/17/10

02:32PM

## RENTAL INCOME WORKSHEET

GROSS RENTAL INCOME	\$	4,005.
EXPENSES		
TOTAL EXPENSES	\$	0.
NET RENTAL INCOME OR LOSS		\$ 4,005.

## RECONCILIATION OF CHANGE IN NET ASSETS

TOTAL REVENUE	\$	1,963,981.
TOTAL EXPENSES		1,906,234.
EXCESS OR DEFICIT FOR THE YEAR PER FORM 990		57,747.
EXCESS OR DEFICIT FOR THE YEAR PER FINANCIAL STATEMENTS		57,747.

FORM 990, PART IX, LINE 24  
OTHER EXPENSES

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
UTILITIES	75,111.	75,111.		
HOT LUNCH PROGRAM EXPENSE	54,226.	54,226.		
CURRICULUM	39,502.	39,502.		
ATHLETICS	33,878.	33,878.		
REPAIRS & MAINTENANCE	29,201.	24,529.	4,672.	
EQUIPMENT RENTAL	21,160.		21,160.	
TEACHER SUPPLIES	20,199.	20,199.		
AFTER SCHOOL CARE EXPENSE	19,914.	19,914.		
CLEANING EXPENSE	18,570.		18,570.	
DEVELOPMENT	13,469.			13,469.
PRINTING AND PUBLICATIONS	11,270.	9,467.	1,803.	
OTHER EXPENSE	10,694.		10,694.	
SUBCONTRACT TRAFFIC CONTROL	8,470.	8,470.		
SUPPLIES	7,416.		7,416.	
SUBSTITUTE TEACHERS	7,127.	7,127.		
DUES & SUBS	4,078.		4,078.	
TELEPHONE	2,686.		2,686.	
SECURITY	1,785.		1,785.	
HOSPITALITY	1,695.	1,695.		
PTO / PTF EXPENSES - LIBRARY	1,523.	1,523.		
POSTAGE AND SHIPPING	1,294.		1,294.	
FLOWERS & GIFTS	584.		584.	
TOTAL	\$ 383,852.	\$ 295,641.	\$ 74,742.	\$ 13,469.

6/30/09

## 2008 FEDERAL BOOK DEPRECIATION SCHEDULE

PAGE 1

CLIENT PROVIDEN

PROVIDENCE CHRISTIAN ACADEMY

62-1684417

5/17/10

02:32PM

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT.	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.	
FORM 990/990-PF																	
BUILDINGS																	
3	SCHOOL BUILDING	1/01/99		650,000							650,000	149,997	S/L	MM	39 .02564	16,666	
16	NEW BUILDING	9/01/04		2,707,355							2,707,355	263,292	S/L	MM	39 .02564	69,417	
41	ADDITIONAL BUILDING COSTS	8/31/05		15,852							15,852	1,168	S/L	MM	39 .02564	406	
52	BLDG - CONST PERIOD INT	7/01/05		23,014							23,014	2,262	S/L	MM	39 .02564	590	
78	BLDG-RETAINAGE ADJUSTMENT	4/09/08		4,925							4,925	26	S/L	MM	39 .02564	126	
TOTAL BUILDINGS				3,401,146		0	0	0	0	0	3,401,146	416,745					87,205
FURNITURE AND FIXTURES																	
5	LOCKERS	2/06/02		1,312							1,312	1,159	200DB	HY	7 .04460	59	
7	STORAGE BARN	8/21/01		2,340							2,340	1,126	150DB	HY	15 .05900	138	
8	LUNCHROOM TABLES	12/16/02		2,000							2,000	1,733	200DB	HY	7 .08930	179	
9	COMPUTER	3/01/03		649							649	520	200DB	HY	5	0	
10	LOCKERS	5/06/03		1,034							1,034	747	200DB	HY	7 .08930	92	
11	DESKS & CHAIRS	5/06/03		1,506							1,506	1,088	200DB	HY	7 .08930	134	
12	DESKS & CHAIRS	7/01/03		2,055							2,055	1,597	200DB	HY	7 .08920	183	
13	FURNITURE	8/12/03		1,054							1,054	819	200DB	HY	7 .08920	94	
15	BUILDING MATS	8/18/04		427							427	353	200DB	HY	5 .11520	49	
17	LIBRARY SHELVING, BRODART	7/07/04		959							959	660	200DB	HY	7 .08930	86	
18	PIANO	7/23/04		850							850	584	200DB	HY	7 .08930	76	
19	MUSIC EQUIPMENT	7/23/04		697							697	576	200DB	HY	5 11520	80	
22	FREEZER - GILES FURNITURE	10/13/04		698							698	577	200DB	HY	5 .11520	80	
23	REFRIGERATOR - GILES FURN	10/28/04		499							499	413	200DB	HY	5 11520	57	
24	LIBRARY SHELVING- HISMITH	11/04/04		309							309	213	200DB	HY	7 .08930	28	

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NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP DEPR	PRIOR DEC BAL DEPR	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR	METHOD	LIFE	RATE	CURRENT DEPR
25	TABLES	11/17/04		725							725	500	200DB HY	7	.08930	65
26	FOLDING CHAIRS	11/17/04		800							800	550	200DB HY	7	.08930	71
27	FIREPROOF FILING CABINET	11/17/04		1,600							1,600	1,101	200DB HY	7	.08930	143
28	40 DESKS / 80 CHAIRS	12/03/04		3,893							3,893	2,676	200DB HY	7	.08930	348
29	LIBRARY FURNITURE	12/07/04		343							343	236	200DB HY	7	.08930	31
30	LIBRARY SHELVING	12/14/04		1,455							1,455	1,000	200DB HY	7	.08930	130
31	KIDS ZONE PLAYSTATION	1/20/05		13,112							13,112	9,016	200DB HY	7	.08930	1,171
32	3 TABLES	2/21/05		625							625	429	200DB HY	7	.08930	56
34	BASKETBALL SCOREBOARD	4/29/05		1,200							1,200	825	200DB HY	7	.08930	107
36	DESKS / CHAIRS / LOCKERS	5/17/05		3,187							3,187	2,190	200DB HY	7	.08930	285
37	TABLES & CHAIRS- WASH DIR	6/06/05		1,137							1,137	781	200DB HY	7	.08930	102
38	LIBRARY SHELVING	6/06/05		1,588							1,588	1,092	200DB HY	7	.08930	142
39	FIREPROOF SAFE	7/25/05		379							379	213	200DB HY	7	.12490	47
40	12 LUNCH TABLES	8/03/05		9,947							9,947	5,597	200DB HY	7	.12490	1,242
45	LIBRARY SHELVING	11/30/05		2,494							2,494	1,403	200DB HY	7	.12490	312
46	BLEACHERS	2/14/06		31,382							31,382	17,658	200DB HY	7	.12490	3,920
47	8 TABLES	3/10/06		826							826	464	200DB HY	7	.12490	103
55	2 WING CHAIRS	8/10/06		1,420							1,420	551	200DB HY	7	.17490	248
56	4 PANELS OF LOCKERS	10/11/06		2,477							2,477	961	200DB HY	7	.17490	433
57	RISERS - MUSIC DEPT	10/19/06		5,584							5,584	2,166	200DB HY	7	.17490	977
60	EUROPEAN HISTORY MAP SET	10/23/06		762							762	296	200DB HY	7	.17490	133
61	LIBRARY SHELVING	1/09/07		1,400							1,400	543	200DB HY	7	.17490	245
64	2 COMPTONS ENCYCLOPEDIA	4/19/07		1,118							1,118	434	200DB HY	7	.17490	196
65	WORLD BOOK ENCYCLOPEDIA	5/10/07		899							899	348	200DB HY	7	.17490	157
67	PHONICS RUG/LISTENING CTR	6/13/07		739							739	287	200DB HY	7	.17490	129
68	LOCKERS	6/27/07		1,629							1,629	632	200DB HY	7	.17490	285
69	9 FOLDING TABLES	7/06/07		1,566							1,566	224	200DB HY	7	.24490	384

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NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT	CUR 179 BONUS	SPECIAL DEPR ALLOW	PRIOR 179/ BONUS/ SP DEPR	PRIOR DEC BAL DEPR	SALVAGE /BASIS REDUCT	DEPR BASIS	PRIOR DEPR	METHOD	LIFE	RATE	CURRENT DEPR
70	TEACHERASE SOFTWARE	7/09/07		3,355							3,355	479	200DB HY	7	.24490	822
71	20 SEAT MUSIC LAB	7/26/07		1,150							1,150	164	200DB HY	7	.24490	282
72	5 PNEUMATIC LUNCH TABLES	8/15/07		5,236							5,236	748	200DB HY	7	.24490	1,282
76	MOBILE MELAMINE MARKER8RD	10/08/07		478							478	68	200DB HY	7	.24490	117
77	20 ROUND 60" TABLES	10/15/07		2,739							2,739	391	200DB HY	7	.24490	671
80	VIDEO SCREEN & STAND	4/03/08		1,064							1,064	213	200DB HY	5	.32000	340
81	FOLLETT LIBRARY SOFTWARE	3/24/08		3,049							3,049	610	200DB HY	5	.32000	976
82	LOCKERS / DESKS / CHAIRS	7/01/08		5,216							5,216		200DB MQ	7	.25000	1,304
87	8 TABLE/ DESK UNITS	8/05/08		2,502							2,502		200DB MQ	7	.25000	626
89	STORAGE SHED	11/29/08		4,045							4,045		1500DB MQ	15	.06250	253
90	KIDS ZONE PLAY SYSTEM	11/26/08		3,832							3,832		200DB MQ	7	.17850	684
91	FENCE AROUND PLAYGROUND	1/09/09		2,205							2,205		200DB MQ	7	.10710	236
92	LIBRARY SHELVING	3/02/09		724							724		200DB MQ	7	.10710	78
TOTAL FURNITURE AND FIXTURE				144,271		0	0	0	0	0	144,271	67,011				20,468
IMPROVEMENTS																
4	ROOF	3/01/02		23,000							23,000	11,074	150DB HY	15	.05900	1,357
6	PAVING	11/01/01		12,038							12,038	5,796	150DB HY	15	.05900	710
42	INSTALL CABLE TO NEW BLDG	8/16/05		500							500	116	150DB HY	15	.07700	39
50	SHRUBBERY/TREES/PLANTS	4/30/06		20,000							20,000	4,610	150DB HY	15	.07700	1,540
51	SOD - WALKER SOD FARM	4/18/06		1,600							1,600	369	150DB HY	15	.07700	123
53	GRAPHICS PKG - GYM FLOOR	7/21/06		2,800							2,800	784	200DB HY	10	.14400	403
85	22 TREES	11/07/08		1,760							1,760		S/L MQ	15	.04170	73
93	SOCCER FIELD CONSTRUCTION	4/03/09		30,902							30,902		S/L MQ	15	.00830	256
94	SPRINKLER SYSTEM - SOCCER	4/03/09		15,014							15,014		S/L MQ	15	.00830	125
95	RETAINING WALL-SOCCER FLD	4/03/09		2,436							2,436		S/L MQ	15	.00830	20

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NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT	CUR 179 BONUS	SPECIAL DEPR ALLOW	PRIOR 179/ BONUS/ SP DEPR	PRIOR DEC BAL DEPR	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR	METHOD	LIFE	RATE	CURRENT DEPR
96	FENCE - SOCCER FIELD	4/03/09		3,882							3,882		S/L	MQ	15 .00830	32
TOTAL IMPROVEMENTS																
	LAND			113,932		0		0	0	0	113,932	22,749				4,678
1	LAND - DONATED	12/31/98		150,000							150,000					0
2	LAND	1/01/99		250,000							250,000					0
TOTAL LAND																
	MACHINERY AND EQUIPMENT			400,000		0		0	0	0	400,000	0				0
14	BAND INSTRUMENTS	8/11/04		765							765	633	200DB	HY	5 .11520	88
20	TV'S & VCR'S - SAMS	10/29/04		1,840							1,840	1,522	200DB	HY	5 .11520	212
21	COMPUTER - SAMS	11/29/04		1,149							1,149	951	200DB	HY	5 .11520	132
33	DELL COMPUTER/MONITOR	4/10/05		399							399	331	200DB	HY	5 .11520	46
35	PAPER TRIMMER	5/11/05		450							450	372	200DB	HY	5 .11520	52
43	COMPUTER LAB EQUIPMENT	9/12/05		1,000							1,000	712	200DB	HY	5 .11520	115
44	GRILL - SAMS CLUB	10/31/05		539							539	303	200DB	HY	7 12490	67
48	2 SKEETERVACS	4/20/06		564							564	401	200DB	HY	5 .11520	65
49	LAMINATOR	5/30/06		1,636							1,636	1,165	200DB	HY	5 .11520	188
54	POWER VOLLEYBALL SYSTEM	7/21/06		3,871							3,871	1,501	200DB	HY	7 .17490	677
58	HP COMPUTER/MONITR/PRINTR	11/03/06		1,190							1,190	619	200DB	HY	5 .19200	228
59	20 KORG KEYBOARDS	11/07/06		2,390							2,390	1,243	200DB	HY	5 .19200	459
62	COMPUTER - MUSIC DEPT.	2/22/07		766							766	398	200DB	HY	5 .19200	147
63	SANYO XGA 3000 PROJECTOR	2/18/07		1,171							1,171	609	200DB	HY	5 .19200	225
66	COMPUTER SERVER/HUB	6/01/07		3,058							3,058	1,591	200DB	HY	5 .19200	587
73	DELL INSPIRON 1700 LAPTOP	8/21/07		1,348							1,348	270	200DB	HY	5 .32000	431

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NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAGE /BASIS REDUCT.	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
74	REFRIGERATOR- CONCESSIONS	8/28/07		493							493		99	200DB HY	5 .32000	158
75	LAPTOP - MR. FOX	10/09/07		1,605							1,605		321	200DB HY	5 .32000	514
79	PENTIUM 3.0 GHZ COMPUTER	2/01/08		1,314							1,314		263	200DB HY	5 .32000	420
83	COMPUTER	8/18/08		660							660			200DB MQ	5 .35000	231
84	2 PROJECTORS	10/31/08		1,200							1,200			200DB MQ	5 .25000	300
86	2 EXTERIOR SIGNS	11/19/08		1,270							1,270			200DB MQ	7 .17850	227
88	2 NIKON CAMERAS/ ACCESS	11/19/08		1,505							1,505			200DB MQ	5 .25000	376
97	WIRELESS ROUTER/4 ACC PT	4/27/09		4,855							4,855			200DB MQ	5 .05000	243
<b>TOTAL MACHINERY AND EQUIPME</b>																
				35,038		0	0	0	0	0	35,038	13,304				6,188
<b>TOTAL DEPRECIATION</b>																
				4,094,387		0	0	0	0	0	4,094,387	519,809				118,539
<b>GRAND TOTAL DEPRECIATION</b>																
				4,094,387		0	0	0	0	0	4,094,387	519,809				118,539