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Return of Organization Exempt From Income Tax

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

2008
Open to Public Inspection

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements Inspection 6/30/09 For the 2008 calendar year, or tax year beginning 7/01/08 and ending Please C Name of organization Employer identification number Check if applicable use IRS FirstLine Schools, Inc. Address change label or 72-1409800 X Doing Business As Name change print or Number and street (or P O box if mail is not delivered to street address) type Room/suite Telephone number Initial return See 3649 Laurel Street 504-228-3433 Specific Termination 8,771,913 City or town, state or country, and ZIP + 4 G Gross receipts \$ Instruc-New Orleans LA 70115 Amended return tions. F Name and address of principal officer H(a) Is this a group return for Application pending Gregory St. Etienne affiliates? Yes X Nο 3649 Laurel Street New Orleans LA 70115 If "No," attach a list. (see instructions) X 501(c) (3) Tax-exempt status ◀ (insert no) 4947(a)(1) or 527 Website: ► N/A **H(c)** Group exemption number ▶ Type of organization |X| Corporation 1998 Association Year of formation M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities The School's primary role is to provide a high quality Activities & Governance education for the students it serves by attending to the students' social and emotional development, thus providing 2 Check this box I if the organization discontinued its operations or disposed of more than 25% of its assets 7 3 Number of voting members of the governing body (Part VI, line 1a) 7 SCANNED JUL Number of independent voting members of the governing body (Part VI, line 1b) 126 Total number of employees (Part V, line 2a) 5 5 6 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) 7a b Net unrelated business taxable income from Form 990-T, line 34 7h Prior Year Current Year 4,003,726 1,340,889 8 Contributions and grants (Part VIII, line 1h) 3,051,332 4,283,301 Program service revenue (Part VIII, line 2q) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 150,932 52,583 1,373,342 432,303 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,916,495 8,771,913 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 987,152 5,029,399 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 1,730,594 3,445,211 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 18 Total expenses Add lines 13-17 (must equal Part IX, column (A) (1) 25 (1) 8,474,610 2,717,746 3,198,749 297,303 19 Revenue less expenses Subtract line 18 from line Assets or Balances Beginning of Year End of Year Ş MAY 1 8 2010 5,975,172 5,423,430 20 Total assets (Part X, line 16) Ш **RS** 617,500 871,939 21 Total liabilities (Part X, line 26) 4,805,930 5,103,233 22 Net assets or fund balances Subtract line 21 from life 2 Part II Signature Block 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 Sign Here Signature of officer Type or print name and title Preparer's identifying number Check if Paid signature 5/04/10 employed Preparer's TERVALON LLP & CPAS 72-0877929 EIN Firm's name (or yours Use Only 4298 Elysian Fields Ave Phone if self-employed), address, and ZIP + 4 New Orleans, LA 504-284-8733

Yes

Form 990 (2008)

No

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

Pe	art iv Checklist of Required Schedules			
•	504 300 400 400 400 400 400 400 400 400 4		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		х	
•	complete Schedule A	1_2	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		_^_	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3		v
4	candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	-		<u> </u>
4	Schedule C, Part II	4		х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	~		
3	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		х
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		' I	
	Schedule D, Part I	6	x	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	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			
•	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,			
•	Parts VI, VIII, IX, or X as applicable	11	x	
12	Did the organization receive an audited financial statement for the year for which it is completing this return	<u> </u>		
-	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	x	
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		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	15	İ	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		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		<u>x</u>
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		<u>x</u>
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 1? 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 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	J		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions	ŀ		
	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		X
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction		ļ	
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	,		- 1	
	person from a prior year? If "Yes," complete Schedule L, Part I	25b	ļ	<u>X</u> _
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	ł		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u> _
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or		İ	
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<u> </u>
		Form	990 (20087

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		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		X

Form **990** (2008)

Pa	ort V Statements Regarding Other IRS Filings and Tax Compliance			
-			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable	_		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	<u></u>	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 126	_		
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	<u> </u>	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 authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			l
	account)?	4a	ļ	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 Bank			
_	and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	l		l
C -	Regarding Prohibited Tax Shelter Transaction?	5c		х
6a	Did the organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with even solicitation an express statement that such contributions or	6a		┝╾
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6ь		
7	gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	80		-
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			
а	\$75?	7a	ĺ	x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		 -
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	··-		
•	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1		
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	Х	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h	X	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		X
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			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		ĺ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-[ĺ
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders 11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			İ
42-	amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	1,,		x
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
<u>_b</u>	in 163, Chief the amount of tax-exempt interest received of accrete during the year			<u> </u>

F orm	n 990 (2008) FirstLine Schools, Inc. 72-140980	0		_ 1	Page 6
Pa	Governance, Management, and Disclosure (Sections A, B, and C request required by the Internal Revenue Code.)	information abo	out policies		
Sec	ction 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		į.		
1a	Enter the number of voting members of the governing body				1
b	Enter the number of voting members that are independent	<u> 7 </u>			I
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with				ļ
	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct		į		ł
	supervision of officers, directors or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 to	was filed?	4	ļ	_x_
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	<u> </u>	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members		1		
	of the governing body?		7a	ļ	<u> X</u>
b			7b	ļ	_x_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during				ŧ
	the year by the following		ŀ		ł
а	The governing body?		8a	X	├
b	, , , , , , , , , , , , , , , , , , , ,		8b	X	 _
9a	Does the organization have local chapters, branches, or affiliates?		9a_		X
b		,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?		9b		<u> </u>
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization	ns			
	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 reached	at			
500	the organization's mailing address? If "Yes," provide the names and addresses in Schedule Oction B. Policies		11		<u> </u>
<u> </u>	JUIL D. FOIICIES			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	 10 -
b			120		\vdash
-	nse to conflicts?		12b	x	İ
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		1.25		_
Ī	describe in Schedule O how this is done		12c	х	
13	Does the organization have a written whistleblower policy?		13		Х
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 decisi	on			
а	The organization's CEO, Executive Director, or top management official?		15a	х	Ì
b			15b	Х	
	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		х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate				
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard				
	the organization's exempt status with respect to such arrangements?		16b		X
Sec	ction C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed None				
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply				
	Own website X Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict o	finterest			
	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 record				
	organization > Brett Hunt 3649 Laurel St	reet			

LA 70115

New Orleans

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	Posi	tion (C) call t	hat ap	(yla	(D) Reportable	(E) Reportable	(F) Estimated
Name and rive	hours per week	Individual trustee or director		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
Gregory St.	Etienne	1								
President Stephen R. F	a a a m + h a l	X	_	X		├	\vdash	0	0	0
Treasurer	osenthal	x		x				o	0	C
Catherine D.	Diergon	- ^		<u> </u>		├	 	- 0		
Secretary	rierson	x		x				0	o	C
Lawrence S.	Kullman	 								
Member		x				ŀ		0	O	0
	Blache									
Member		X					Ī	0	0	0
Jerome Jupit	er									
Member		X			L			0	_0	0
Dana Peterso	n									
Member		<u> </u>			_	<u> </u>	ļ	0	0	0
					_					
		+				_				

Pai	T VII Section A	t. Officers, Directors, Tri	stees	, re	y En	ibio	yees	, an	a Highest Compensated E	inployees (continued)			
	(A)	(B)				C)			(D)	(E)	<u> </u>	(F)	
•	Name and title	Average	Posi	tion (check	all th	nat ap	ply)	Reportable	Reportable	Est	ımated	
		hours per	우콩	l S	오	₩.	SE	5	compensation	compensation	am	ount of	
		week	188	#	Officer	y e	88	Former	from	from related	1	ther	
			i cia	ğ		를	ye α	٦	the	organizations		ensatio	n
			Individual trustee or director	Institutional trustee		Key employee	<u>§</u>		organization (W-2/1099-MISC)	(W-2/1099-MISC)	1	m the nization	
			ĕ	l ist	i	"	ĕ	ļ	(***271033=181100)		ł .	related	
			"	8	ļ	ļ	Highest compensated employee	l			I	nization	
			+	 			۵	_			_		
				<u> </u>									
			-										
			+	-			<u> </u>	_					
				_		ļ				_			
	······································		- .	\vdash			-						
			-	┝	_	_							
								-					
1b	Total	<u>.</u>	ــــــــــــــــــــــــــــــــــــــ	<u> </u>	<u> </u>	<u> </u>	1						
2		viduals (including those in	1a) w	ho re	ceiv	ed m	ore t	han	\$100,000 in reportable com	pensation from the			
	organization ▶ 0	J	,							,			
	Organization P					-						Yes	s No
•	Did the ergenization	hat any former officer dur	ootor (otoo	kov		Java	o or highest componented		F	10:	110
3		ist any former officer, dir ? If "Yes," complete Sche							ee, or highest compensated		3		x
4									and other compensation from	m		1	
									complete Schedule J for su				
	individual										4		X
5		d on line 1a receive or acc										1	<u></u>
		the organization? If "Yes,	" com	olete	Sch	edul	e J fo	or su	ch person		5		X
	Complete the table to							. 4		- \$400,000 -6			
1	compensation from t	the organization	ensate ———		iepe	naer	it cor	ıtrac	ctors that received more that			(C)	
		(A) Name and business address						-	Description	(B) tion of services		(C) Compen	sation
								_	······································				
		<u> </u>						\vdash					
								_				_	
2		ependent contractors (incli	uding t	hose	ın 1) wh	o rec	eive	d more than \$100,000 in				
DAA	compensation from t	tne organization >									 Fo	0 rm 99	0 (2008)

Form 990 (2008) FirstLine Schools, Inc.

Pa	rt V	III Statement of Rev	<u>renue</u>			_			
•						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
ဟ ဟ	12	Federated campaigns	1a	_ ''			Tevende		512, 513, or 514
ant	h	Membership dues	1b						
ρĒ		Fundraising events	1c		_				
ifts	ں ہ		1d	_					
gin Bin	u -	Related organizations	1e	3 0	59,776				
Siris	•	Government grants (contributions)	10		33,770				
Program Service Revenue Contributions, gifts, grants anounts	1	All other contributions, gifts, grants, and similar amounts not included above	1f	9	43,950				
a d	g	Noncash contributions included in lines 1	a-1f \$		- 1				
ပ္	h	Total. Add lines 1a-1f			<u> </u>	4,003,726	`		
ã.					Busn. Code				
š	2a	Minimum Foundation	Progra	am am		4,276,065	4,276,065		
<u>م</u> ر	b	Food Service				7,236	7,236		
Š	С								
Ser	d								
E E	0								
ğ	f	All other program service rev	enue						
ے	g	Total. Add lines 2a-2f			>	4,283,301			
	3	Investment income (including	dividend	ls, interes	t, and			· · · · · · · · · · · · · · · · · · ·	
		other similar amounts)			▶ [52,583			52,583
	4	Income from investment of ta	x-exemp	t bond pro	ceeds 🕨				
	5	Royalties			▶ [
		(ı) Rea		(11) P	ersonal				
	6a	Gross Rents							
	b	Less rental exps				l			
	С	Rental inc or (loss)		·		I			1
	d	Net rental income or (loss)			>	ŀ			
	7a	Gross amount from (i) Securit	ies	(11)	Other				
		sales of assets other than inventory							
	b	Less cost or other							
		basis & sales exps							
	С	Gain or (loss)							
	d	Net gain or (loss)		<u> </u>	•	Ì			
	8a	Gross income from fundraising ev	ents [
<u>.</u>		(not including \$							
Other Revenue		of contributions reported on line 1	c)						
ا ۾		See Part IV, line 18	a						
e	b	Less direct expenses	ь						
₹		Net income or (loss) from fun	draising	events			1		
_		Gross income from gaming activit	- 1						
		See Part IV, line 19	a				1		
	ь	Less direct expenses	ь						
		Net income or (loss) from gain	nino activ	vities	•				
		Gross sales of inventory, less							
		returns and allowances	а						
	ь	Less cost of goods sold	ь						
		Net income or (loss) from sal		entory	•		İ		
		Miscellaneous Reven		<u> </u>	Busn Code				
	11a	Insurance Recovery	<u> </u>	•		363,333	363,333		
	b	Other Income				68,970	68,970		<u> </u>
	C	other income			 	30,570	00,570		
	d	All other revenue			 	-			
	_	Total. Add lines 11a–11d				432,303			
	12	Total Revenue. Add lines 1h	20.2.4	5 64 74	· -	432,303			
	12		, zy, 3, 4	, J, OU, /O	, ou,	8 771 913	4,715,604	C	E2 E02
_		9c, 10c, and 11e				8,771,913	3,113,004		52,583

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).

. <u> </u>	. 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, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to governments and		· · · · · · · · · · · · · · · · · · ·	<u> </u>	1 2002-2						
•	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										
6	Compensation not included above, to disqualified				·····						
•	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)										
7	Other salaries and wages	4,191,572	2,466,324	1,725,248							
8	Pension plan contributions (include section 401(k)	-,-,-,,,,	2,100,321	2,123,240	· · · · · · · · · · · · · · · · · · ·						
0	and section 403(b) employer contributions)	238,592	147,917	90,675							
a	Other employee benefits	310,677	197,639	113,038							
9 10	Payroll taxes	288,558	183,403	105,155							
	· · ·	200,556	103,403	100,100							
11	Fees for services (non-employees)										
a	Management	1,273		1,273							
0	Legal	1,213		1,213							
C	Accounting				· · · · · · · · · · · · · · · · · · ·						
d	Lobbying Professional fundrausing converse. See Part IV. line 17.										
e	Professional fundraising services See Part IV, line 17										
T	Investment management fees										
g 40	Other										
12	Advertising and promotion										
13	Office expenses										
14	Information technology										
15	Royalties										
16	Occupancy	1,774		1,774							
17	Travel	1,774		1,//4							
18	Payments of travel or entertainment expenses										
46	for any federal, state, or local public officials	-		-							
19	Conferences, conventions, and meetings			-							
20	Interest										
21	Payments to affiliates	235,312		235,312							
22	Depreciation, depletion, and amortization	233,314		233,314	-						
23	Insurance										
•	Other supposes the same supposes the										
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) Professional Services	1,237,721	333,163	904,558							
a		530,343	527,172	3,171							
b	Transportation	378,266	103,287	274,979							
C	Food Secvice	263,410									
d	Supplies		225,270	38,140							
e	Custodial Service	199,097	225 701	199,097							
	All other expenses	598,015	225,791	372,224							
_25		8,474,610	4,409,966	4,064,644							
26	Joint Costs. Check here In 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				5 000						

	art x	Balance Sneet				
				(A) Beginning of year		(B) End of year
•—		Cash—non-interest bearing		4,000,438	1	1,898,706
	1	· ·		4,000,430	2	254,055
	2	Savings and temporary cash investments		449,672	+	2,908,991
	3	Pledges and grants receivable, net		86,203		
	4	Accounts receivable, net	ata an time	80,203	4	80,956
	5	Receivables from current and former officers, directors, tru	·		_	
	_	employees, or other related parties Complete Part II of So		 	5	
	6	Receivables from other disqualified persons (as defined un				
		4958(f)(1)) and persons described in section 4958(c)(3)(B)	Complete			
	۱_	Part II of Schedule L			6	
ets	7	Notes and loans receivable, net			7	· · · · · · · · · · · · · · · · · · ·
Assets	8	Inventories for sale or use		06 003	8	40 402
ď	9	Prepaid expenses and deferred charges		86,803	9	49,423
	1	Land, buildings, and equipment cost basis	10a 1,228,898			
	b	Less accumulated depreciation Complete	445 057	000 214		702 041
	١	Part VI of Schedule D	10b 445,857	800,314		783,041
	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		F 422 420	15	F 07F 170
	16	Total assets. Add lines 1 through 15 (must equal line 34)		5,423,430		5,975,172
	17	Accounts payable and accrued expenses		581,743		871,939
	18	Grants payable	25 757	18		
	19	Deferred revenue		35,757	19	
w	20	Tax-exempt bond liabilities			20	
Liabilities	21	Escrow account liability Complete Part IV of Schedule D			21	······································
ij	22	Payables to current and former officers, directors, trustees	•			
ia		employees, highest compensated employees, and disqual	ified			
		persons Complete Part II of Schedule L	-4		22	
	23	Secured mortgages and notes payable to unrelated third p	earties		23	
	24	Unsecured notes and loans payable			24	
	25	Other liabilities Complete Part X of Schedule D		617,500	25	871,939
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ X	7	017,300	26	0/1,333
ces		_	and			
_	2.7	complete lines 27 through 29, and lines 33 and 34.		4,805,930	27	4,059,155
Balar	27	Unrestricted net assets		4,003,330	28	1,044,078
<u> </u>	28	Temporarily restricted net assets			29	1,044,070
Assets or Fund	29	Permanently restricted net assets Organizations that do not follow SFAS 117, check here	. ▶ □		23	
Ē		and complete lines 30 through 34.	•• 🗆			
ō	30	Capital stock or trust principal, or current funds			30	
ets	31	Paid-in or capital surplus, or land, building, or equipment fu	und		31	
SS	32	Retained earnings, endowment, accumulated income, or of			32	
t A	33	Total net assets or fund balances	and funds	4,805,930	33	5,103,233
Net	34	Total liabilities and net assets/fund balances	i	5,423,430		5,975,172
	art X			3,123,130		3,7,7,0,12,72
Ť				-	-	Yes No
1	Acc	counting method used to prepare the Form 990 C	ash X Accrual O	ther		
2	a We	re the organization's financial statements compiled or revie	wed by an independent accountar	nt?		2a X
1) We	re the organization's financial statements audited by an inde	ependent accountant?			2b X
(: If "	Yes" to lines 2a or 2b, does the organization have a commit	tee that assumes responsibility for	oversight of		
	the	audit, review, or compilation of its financial statements and	selection of an independent acco	ountant?		2c X
3	a 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
	o If"	es," did the organization undergo the required audit or aud	ıts?			3b X

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.

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

Reason for Public Charity Status (All organizations must complete this part) (see instructions)

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Part I

FirstLine Schools, Inc.

Employer identification number 72-1409800

Schedule A (Form 990 or 990-EZ) 2008

The	o <u>rga</u> i	nization is not a	a private foundation because	it is (Please check only one org	ganızatıon)							
1	Ш	A church, con	nvention of churches, or asso	ciation of churches described in	section 1	l70(b)(1)(A)(i).						
2	Ш	A school desc	cribed in section 170(b)(1)(A	N)(ii). (Attach Schedule E)									
3		A hospital or a	a cooperative hospital service	e organization described in secti	ion 170(b)(1)(A)(iii)	. (Attach	Schedu	ıle H)				
4		A medical res	search organization operated	in conjunction with a hospital de	scribed in	section	170(b)(1)(A)(iii).	Enter ti	he hosp	ital's name,		
		city, and state	•										
5	П	An organization	on operated for the benefit of	a college or university owned or	operated	by a gove	ernment	al unit de	escribed	i in			
	_	-	b)(1)(A)(iv). (Complete Part I	- ·									
6				vernmental unit described in sec	tion 170	b)(1)(A)(v	/).						
7	X		-	ubstantial part of its support from				n the ae	neral pu	ublic			
	_	-	section 170(b)(1)(A)(vi). (Co	•	.								
8				70(b)(1)(A)(vi). (Complete Part II	13								
9	Н	-		more than 33 1/3 % of its suppo	•	ntribution	s memb	nershin f	ees an	d aross			
	ш			ot functions—subject to certain e									
			·	d unrelated business taxable inco	-								
		• •	<u>-</u>	, 1975 See section 509(a)(2).	•		11 (22)	UIII DUSI	1163363				
10			<u>-</u>	xclusively to test for public safety	•		2)/4) /6	ae inetri	ictions)				
11	Н	•	•	xclusively for the benefit of, to pe									
•••	ш	•	•	d organizations described in sec			•	•		tion			
				e type of supporting organization	•	,				, tion			
		— Ĥ :		· · · · · · · · · · · · · · · · · · ·		•		<u> </u>	'' e III–Ot	hae			
_		_ ^					d or more		-	Her			
е	ш	, ,		nization is not controlled directly and other than one or more public		• •		•		ction			
		-	ection 509(a)(2)	ind other than one or more public	ciy suppoi	teu organ	izalions	describe	u III sei	Clion			
			, . , ,	mination from the IDS that it is a	Tuno I To	mo II or I	Funo III o	unnadın					
f		_		mination from the IRS that it is a	Type I, Ty	pe II, or	ype iii s	upportin	g				\Box
		_	check this box			£4b-							Ш
g		•	· · · · · · · · · · · · · · · · · · ·	on accepted any gift or contributi	on from a	ny or the							
		following pers											T
				ntrols, either alone or together wi	tn person:	s describe	ea in (ii)					Yes	No
			pelow, the governing body of	• •							11g(ı)	 	
		-	member of a person describe								11g(ii)	-	
		• •	ontrolled entity of a person de	** ',	_						11g(iii)	<u> </u>	L
_ <u>h</u> _		Provide the fo	ollowing information about the	e organizations the organization	supports				,				
(i)	Name	e of supported	(ii) EIN	(iii) Type of organization	1 ' '	organization	(v) Did (ou notify	(vi)	ls the	(viı) Am	ount of	
	org	janization		(described on lines 1–9 above or IRC section	1 .,	sted in your document?		nization in	organizat	oon in col	supp	iort	
				(see instructions))	governing	document	1	of your oort?		S?			
					Yes	No	Yes	No	Yes	No			
										-			
						ŀ							
					ŀ		1			<u> </u>			
		-			<u> </u>								
					- "								
											<u> </u>		
Tota	1												

DAA

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

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

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

Schedule A (Form 990 or 990-EZ) 2008

18

448 05/04/2010 7 15 AM Schedule A (Form 990 or 990-EZ) 2008 FirstLine Schools, Inc. 72-1409800 Page 3 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 year beginning in) ▶ (a) 2004 (b) 2005 (c) 2006 (d) 2007 (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 3 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

C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6)						
Sec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						

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

JE	ction 6. Computation of Fubile Support Fercentage		
5	Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
6	Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%
Sec	ction D. Computation of Investment Income Percentage		

16	Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16
Sec	ction D. Computation of Investment Income Percentage	

۱7	Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	9
18	Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	9
l Q a	33 1/3 % support tasts		

0	Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions
	line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization
b	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
	17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008 FirstLine Schools, Inc.

72-1409800

Page 4

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)

Part II, Line 10 - Other Income Detail

Other Income

\$ 2,370,770

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 Inspection Employer identification number Name of the organization FirstLine Schools, Inc. 72-1409800 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 1 Total number at end of year 4,003,726 Aggregate contributions to (during year) 3 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 Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a a Total number of conservation easements 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 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 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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. Part III 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

b Assets included in Form 990, Part X

<u>iche</u>	dule D (Form 990) 2008 FirstLine	Schools, inc	•	72-14	<u> 109800</u>		Page 2
Pa	ert III Organizations Maintaining	Collections of Art, I	<u> Iistorical Treas</u>	ures, or Other	Similar Asse	ets (contin	ued)
-3	Using the organization's accession and other ritems (check all that apply)	ecords, check any of the fo	llowing that are a sig	inificant use of its co	llection		
а	Public exhibition	d 🗍 Loan o	r exchange program	ns			
b	Scholarly research	e Other	a change program				
۰	Preservation for future generations					_	
4	Provide a description of the organization's colle	ections and explain how the	y further the organiz	ation's exempt purp	ose in		
5	Part XIV During the year, did the organization solicit or r	eceive donations of art, his	torical treasures, or	other_similar		П.	
	assets to be sold to raise funds rather than to be					Yes	No
Pa	ert IV Trust, Escrow and Custodi				ed "Yes" to F	orm 990,	
	Part IV, line 9, or reported a	<u>in amount on Form 9</u>	90, Part X, line	<u>21</u>			
1a	Is the organization an agent, trustee, custodiar	or other intermediary for c	ontributions or other	assets not			
	ıncluded on Form 990, Part X?					Yes	∐ No
b	If "Yes," explain the arrangement in Part XIV as	nd complete the following to	able				
						Amour	nt
С	Beginning balance				1c		
	Additions during the year				1d		
	Distributions during the year				1e		
	Ending balance				1f	-	
	•	- 000 Part V line 212					T
	Did the organization include an amount on For	III 990, Part A, IIIIe 217				∐ Yes	∐ No
	If "Yes," explain the arrangement in Part XIV	oto if organization on	awarad "Vaa" ta	- Farm 000 Day	+ IV / line 10		
Pa	ert V Endowment Funds. Compl				ī		
	-	(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years	back (e) For	ur years back
1a	Beginning of year balance	<u></u>			ļ		
b	Contributions						
C	Investment earnings or losses						
d	Grants or scholarships		·····				
θ	Other expenditures for facilities						
	and programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the year e	end halance held as		•	,	<u>1</u>	
a	Board designated or quasi-endowment	%					
	Permanent endowment > %	~					
C	Are there endowment funds not in the possess	on of the ergon-ration that	are held and admini	atarad for the			
зa	•	ion of the organization that	are nelo ano aomini	stered for the			V N-
	organization by					(a. m)	Yes No
	(i) unrelated organizations					3a(i)	
	(ii) related organizations					3a(ii)	
þ	If "Yes" to 3a(II), are the related organizations I					3b	
4	Describe in Part XIV the intended uses of the o						
Pa	art VI Investments—Land, Buildi	ngs, and Equipment	<u>. See Form 990</u>), Part X, line 10) <u>. </u>		
	Description of investment	(a) Cost or other basis	(b) Cost or oth	ner (c) De	epreciation	(d) Book	c value
		(investment)	basis (other))			
1a	Land		372	,200		3	72,200
b	Buildings						
	Leasehold improvements						
	Equipment		856	,698	445,857	4	10,841
	Other					<u>-</u>	,
	I. Add lines 1a–1e (Column (d) should equal Fo	rm 990. Part X. column (R)	line 10(c))			7	83,041
		,,				,	,

Schedule D (Form 990) 2008 FirstLine Schools, Inc	•	72-1409800	
Part VII Investments—Other Securities. See Form 990,			
(a) Description of security or category	(b) Book value	(c) Method o	f valuation
(including name of security)		Cost or end-of-year	ar market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
	·		
	- -		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 990	<u>, Part X,</u> line 13.		
(a) Description of investment type	(b) Book value	(c) Method of	valuation
		Cost or end-of-yea	ar market value
			<u> </u>
			<u> </u>
		1	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line 15.		•	
(a) Description			(b) Book value
			<u> </u>
			
	<u> </u>		
		-	
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)		>	
Part X Other Liabilities. See Form 990, Part X, line 25.			
(a) Description of liability	(b) Amount		
Federal income taxes		1	
		7	
		1	
		1	
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		1	
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Total (Column (h) should on all Form 000 Dod V and (D) ban 05		-	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	anta that	nization's lightly for	
In Part XIV, provide the text of the footnote to the organization's financial statem	ents that reports the organ	INCAUONS NADINTY TOF	
uncertain tax positions under FIN 48			

Schedule () Form 980) 2008 FirstLine Schools Inc. 72-1409800 Pag Part XIV Supplemental Information (constauce)	Schedule D (F	orm 990) 2008	F	irs	tL:	ine	Sc	hoc	ols	,]	Inc	•						_. 72·	-14	098	3 O C)					Р	age 5
	Part XIV	Sup	pleme	ental	Info	rma	tion	(conti	nued)																				
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SCHEDULE O

Supplemental Information to Form 990

(Form 990)

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008 Open to Public Inspection

OMB No 1545-0047

Internal Revenue Service
Name of the organization

Department of the Treasury

FirstLine Schools, Inc.

Employer identification number 72-1409800

Form 990 - Organization's Mission or Most Significant Activities a foundation for success in a challenging academic program.

The School will also expose students to a range of experiences designed to develop them as individuals and to nuture a sense of membership in a school community where they feel supported and learn mutual responsibility.

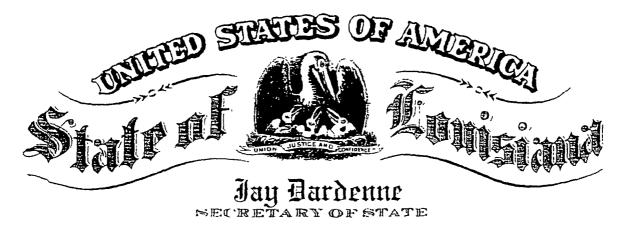
Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990
The 990 Return is prepared by an independent CPA firm and given to
management for review and then presented to the board all before it is
filed.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy Monthly board meetings.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Annual review by the Board od Directors.

Form 990, Part VI, Line 15b - Compensation Process for Officers Annual review by the Board of Direstors.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Documents are made available to the public through monthly open board meetings.



As Secretary of State, of the State of Louisiana, I do hereby Certify that a copy of an Amendment to the Articles of Incorporation of MIDDLE SCHOOL ADVOCATES, INC.

Domiciled at NEW ORLEANS, LOUISIANA, changing the corporate name to

FIRSTLINE SCHOOLS, INC.

Was filed and recorded in this Office on October 8, 2008.

In testimony whereof, I have hereunto set my hand and caused the Seat of my Office to be affixed at the City of Baton Rouge on,

October 8, 2008

KGO 34600823N 36864525

Secretary of State

• • • • • • • • • • • • • • • • • • • •							
Form 8868 (R							Page 2
•		lot Automatic) 3-Month Extension, complete only					► X
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		Month Extension, complete only Part I (on page 1		a a susupol /pa	000100	naadad)	
'Dart II		utomatic) 3-Month Extension of Time.	Only file ti				
e or عر	Name of Exempt Orga	nization			Employ	er identificati	on number
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File by the extended		OOL ADVOCATES, INC.				409800	
due date for	,,	om or suite no. If a P.O. box, see instructions			For IRS	use only	
filing the	2319 VALANO			 		-	
return See instructions	l <u>'</u> '	e, state, and ZIP code For a foreign address, see ins	structions				
	NEW ORLEANS						
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X Form 99	· -	Form 990-PF	\vdash	Form 1041-A		\vdash	rm 6069
Form 99	·	Form 990-T (sec 401(a) or 408(a) trust)	\vdash	Form 4720		L For	rm 8870
Form 99		Form 990-T (trust other than above)		Form 5227			
		were not already granted an automatic 3-month of	extension or	a previously filed	Form	868.	
		DR. ANTHONY RECASNER					
Telephone		FAX No ►					. \square
		office or place of business in the United States, che					▶ ⊔
	, ,	ne organization's four digit Group Exemption Number	•	If this			
-	roup, check this box	If it is for part of the group, check t	his box	▶ <u> </u>	d attach	а	
	mes and EINs of all mem	- / /					
	t an additional 3-month e			6 /2 0 / 0 0			
	·	or other tax year beginning 7/01/08		6/30/09			
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	detail why you need the e						- .
		is requested to gather in	iormat	ion to pr	epar	e a cor	wblete
and	accurate ret	urn.					
<u> </u>		 					
_ / If this ap	plication is for Form 990-	BL, 990-PF, 990-T, 4720, or 6069, enter the tentative	e tax,				
	nonrefundable credits S	· · · · · · · · · · · · · · · · · · ·			8a	\$	
	•	PF, 990-T, 4720, or 6069, enter any refundable cred					
estimate	d tax payments made In	clude any prior year overpayment allowed as a credi	and any				
amount	paid previously with Form	8868			d8	_\$	
		m line 8a Include your payment with this form, or, if			i		
with FT[coupon or, if required, b	y using EFTPS (Electronic Federal Tax Payment Sy		structions	8c	\$	
		Signature and Verifi					
		e examined this form, including accompanying schedules and authorized to prepare this form	statements, a	nd to the best of my k	nowledge	and belief,	
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Signature 🕨 🔪	NO COLORER 1 1.	Title \	1 ×.1			Date 🕨	2/12/10

Form **8868** (Rev 4-2009)

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

Internal Revenu	ie Service	1	y The a separate appli	Cation to Bacilifetal				
If you are	filing for an A	utomatic 3-Month Extension,	complete only Part I and	d check this box		_		► X
. If you are	filing for an Ad	dditional (Not Automatic) 3-M	onth Extension, comple	te only Part II (on pag	ge 2 of this for	rm)		_
Do not comp	lete Part II uni	iess you have already been gr	anted an automatic 3-mo	nth extension on a pro	eviously filed f	orm 8868	}	
Part I	Automat	ic 3-Month Extension o	f Time. Only submi	t original (no cop	ies needec	i).		
A corporation	required to file	Form 990-T and requesting a	in automatic 6-month exte	ension—check this bo	x and comple	te		
Part I only	,		···		,			▶ □
All other corpo	orations (includ	ding 1120-C filers), partnership	s REMICs and trusts m	ust use Form 7004 to	request an ex	xtension o	f	
	come tax return	-	o, riaminos, and traste in					
Electronic Fil	lıng (e-file). G	enerally, you can electronically	file Form 8868 if you wa	nt a 3-month automat	tic extension o	of time to fi	ile	
		ow (6 months for a corporation	·					
		the additional (not automatic)						
returns, or a c	composite or c	onsolidated Form 990-T Inste	ad, you must submit the t	fully completed and si	igned page 2 ((Part II) of	Form	
8868 For mor	re details on th	ne electronic filing of this form,	visit www.irs.gov/efile an	d click on e-file for Ch	narities & Non	profits		
Type or	Name of Ex	empt Organization				Employe	er identificat	tion number
print		'						
File by the	MIDDLE	SCHOOL ADVOCA	TES, INC.			72-1	409800	
due date for	Number, str	eet, and room or suite no. If a	P.O box, see instruction	s				
filing your return See	2319 7	ALANCE ST.						
instructions	City, town o	r post office, state, and ZIP co	de For a foreign address	s, see instructions				
	NEW OF	RLEANS	<u>LA 70115</u>					
	f return to be	filed (file a separate application	on for each return)					
X Form 99	90		Form 990-T (cor	•			Forn	n 4720
Form 99	90-BL		Form 990-T (sec	2 401(a) or 408(a) tru	ıst)		Forn	n 5227
Form 99	90-EZ		Form 990-T (tru:	st other than above)			Forn	n 606 9
Form 99	90-PF		Form 1041-A				Forn	n 8870
Telephone If the orga If this is fo for the whole o a list with the i I reques until	enization does or a Group Ret group, check the names and Ell of an automatic	not have an office or place of urn, enter the organization's for a specific transfer and the strength of the extension of the	our digit Group Exemption for part of the group, chi on will cover foration required to file Fo	Number (GEN) eck this box rm 990-T) extension	of time	If this is attach		▶ □
_	calendar year	or						
► X	tax year begin	ning $7/01/08$, and e	nding 6/30/09					
2 If this ta	x year is for le	ss than 12 months, check reas	son Initial return	Final return	Change	ın accoun	ting period	
3a If this ap	oplication is for	Form 990-BL, 990-PF, 990-T	, 4720, or 6069, enter the	tentative tax,				
		e credits See instructions				3a	\$	
•	•	Form 990-PF or 990-T, enter	•	nd estimated tax				
		de any prior year overpaymen				3b	\$	
		t line 3b from line 3a Include						
deposit v	with FTD coup	on or, if required, by using EF	TPS (Electronic Federal	Tax Payment				
	See instruction					3c	.\$	
		make an electronic fund withd	rawal with this Form 8868	8, see Form 8453-EO	and Form 88	79-EO		
payment in:								2000
For Privacy A	ct and Paperu	ork Reduction Act Notice, s	ee instructions				Form b	3868 (Rev. 4-2009)