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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2008

Department of the Treasury

SCANNED APR 0 6 2010,

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

Open to Public Inspection

		2008 calend	dar vear.		peginning				01 , 2008,	and end	ding	07	-31 ,20 09
		pplicable	Please		ganization EDUC	ATION	NAL CEN						D Employer identification no
_ ~			nange use IRS label or Doing Business As										58-1291952
$\overline{}$		•	label or print or		d street (or P O bo	ov if moul	o not dolaro	rad to etraat add	roce)		Room/s	·ute	E Telephone number
	ame ch	-	type. See	1	kalb Aven		is not delive	reu to street aud	1622)		Rooms	Suite I	(404) 378-2219
\equiv	itial retu		Specific		n, state or country		3 ± 4				l		G Gross receipts \$
=	erminati nended		Instruc- tions.	1 1	L, GA 3030		- + 4	_					767,886
□ A _I	plicatio	on pending	F Name	and address of	principal officer	Paul	L Garb	er					
			401	Claire D	rive, Atla	anta,	GA 303	307			H(a)	s this a group reti ffiliates?	Yes X No
l Ta	ax-exen	npt status	X 501(c) (3) ◀	(insert no)	4947(a)(1) or	527			H(b) /	re all affiliates in	cluded? Yes No
J M	ebsite:	▶ www	horız	onschool.	com						H(c) ("No," attach a iii Broup exemptior	st (see instructions)
K Ty	pe of o	rganization X	Corporation	n Trust	Association	Other	•		L Year of form	ation 19	77	M State of legal	domicile GA
Par	t I	Summar	ν										
	1			ganization's i	mission or mo:	st signif	ficant acti	vities	EDUCATION	1			
A C G													
to													
v e	2	Check this b	ox 🕨 🗌 ı	f the organiz	ation discontin	ued its	operation	s or dispose	d of more tha	ın 25% of	f its ass	ets	
t n	3	Number of v	oting men	nbers of the o	governing bod	y (Part	VI, line 1a	a) • • • • •				3	2
i a e n	4	Number of Ir	ndepende	nt voting mer	mbers of the g	overnin	g body (F	Part VI, line 1	b) • • • •			4	2
s c	5	Total numbe	r of emplo	yees (Part V	′, line 2a) • •							5	0
& e	6	Total numbe	r of voluni	teers (estima	ite if necessar	y) • •	<u> </u>	<u>.</u>				6	
	7a	Total gross u	unrelated I	ousiness rev	enue from Par ome from Forr	t VIII, Iç	ne 12, 🔯	ALTON MIL	<u> </u>	3		· • • 7a	0
	b	Net unrelate	d busines	s taxable inc	ome from Forr	n 990-	Line 34	LOFIA				7b	0
							2	-	SC		Pric	or Year	Current Year
R e	8	Contribution	s and grai	nts (Part VIII	, line 1h) • •			1AR ·1 ·8 2	nın · Ö	🗀		650	12,789
v	9				I, line 2g)				··· . ట్ల	[663,141	731,900
e n	10	Investment i	ncome (P	art VIII, colu	mn (A), lines 3	3, 4, ah	d 7d)	7.17.17.	ا بنائیس ایسان ا	🗀		262	2 7
u e	11	Other reveni	ue (Part V	III, column (A), lines 5, 6d	, 8c, 9c	, 10c, and	HEIV.	<u>U</u> []	🗀		7,725	23,190
•	12				n 11 (must equ				12) • • • •	🗀	_	671,778	767,886
	13	Grants and	sımılar am	ounts paid (l	Part IX, colum	n (A), I	ines 1-3)						500
-	14	Benefits paid	d to or for	members (Pa	art IX, column	(A), line	e 4) • •			🗀			0
E X	15	Salaries, oth	er compe	nsation, emp	loyee benefits	(Part I	X, column	n (A), lines 5-	10) • • •	🗀		321,209	464,859
P e	16a	Professional	l fundraisir	ng fees (Part	IX, column (A), line 1	1e)			🗀		6,500	0
n	b	Total fundra	ising expe	nses (Part IX	(, column (D),	line 25)) ▶		0				
s e	17	Other expen	ses (Part	IX, column (A	A), lines 11a-1	1d, 11f	-24f) -			 .		368,557	292,981
s	18	Total expens	ses Add	lines 13-17 (must equal Pa	art IX, c	olumn (A), line 25) •				696,266	758,340
	19	Revenue les	s expense	es Subtract	line 18 from lii	ne 12						(24,488	9,546
Net					-					E	Beginni	ng of Year	End of Year
Assets or	20	Total assets	(Part X, I	ne 16) • •						🗀		656,333	655,460
Fund	21	Total liabilitie	es (Part X	, line 26) •						🗀		608,195	597,776
Bal- ances	22	Net assets o	r fund bal	ances Subt	ract line 21 fro	m line :	20 • • •			• • •		48,138	57,684
Par	t II	Signatu	re Bloc	k									
		Under penalti	es of penury	I declare that I i	have examined thi	s return, i	ncluding acc	companying sch	edules and stater	nents, and t	o the bes	of my knowledg	e
		and belief, it is	s true, correc	t, and complete	Declaration of pre	eparer (ot	ner than on	cer) is based on	all information of	wnich prep	arer nas a	any knowledge	18/2
		14	WX I	$\mathcal{A}_{\alpha}\mathcal{O}_{\alpha}$	(related)								410/4016
Sign	ı	Signatui	re of officer	7								Da	te /
Here)	Paul	L. Gar	ber, Pre	sident								
		Type or	print name	and title									
		Preparer's				_	-	Date		Check if		1 '	entifying number
Paid		signature	Geor	ge H Bak	er			03-0	2-2010	self- employe	d ▶□	(see instructi	ons)
Prepa	rer's	Eumin norm	(or vo	George	e H Baker	CPA I	PC				IN	>	
Use C	Only	firm's name (or yours f self-employed), 1002 Jonathan Lane											
		address, and	I ZIP + 4	Tucker	r, GA 3008	34				F	Phone no	▶770-49	6-0292
May t	he IRS	S discuss this	s return wi	th the prepa	rer shown abo	ve? (se	e instruc	tions)					· · · X Yes No

Forn	990 (2008) EDUCATIONAL CENTER FOR APPLIED EKIS	58-1291952	Page 2
	t III Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission		
	EDUCATION		
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	X 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	X 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 expense		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of gran	its and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
40	(Code) (Expenses \$ 540,410 including grants of \$) (Reveni	uo ¢ 735	,476)
44	(Code) (Expenses \$ 540,410 including grants of \$) (Revenue OUR PRIVATELY OPERATED SCHOOL BENEFITS APPROXIMATELY 150 STUDENTS, K THROUGH	•	. ,
	VARIETY OF REASONS, MIGHT OTHERWISE BE DEPRIVED OF AN APPROPRIATE EDUCATIONAL		
	VARIETI OF REASONS, MIGHT CHERWISE BE DEFRIVED OF AN APPROPRIATE EDUCATIONAL	SEITING.	
		·	
			
4b	(Code) (Expenses \$ including grants of \$) (Reven	ue \$)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•
			•
4c	(Code) (Expenses \$ including grants of \$) (Reven	ue \$)
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶ \$ 540,410 (Must equal Part IX, Line 25, column (B))		

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Х Х 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 candidates for public office? If "Yes," complete Schedule C, Part I 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete 4 X 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 5 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 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 8 X 9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," 10 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, 11 Х 12 Did the organization receive an audited financial statement for the year for which it is completing this return 12 that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Х 14a Х 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 15 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 16 Х 17 Х 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 18 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 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 X 19 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 • • • • X 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete 23 X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K If "No," go to question 25 24a Х 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 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

Pa	rt 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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M · · · · · · · · · · · · · · · · · ·	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1 · · · · · · · · · · · · · · · · · ·	34		х
35	is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		х

Form 990 (2008)

<u>Pa</u>	rt 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	#7	_	
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	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	4		
	Statements, filed for the calendar year ending with or within the year covered by this return • • • • • • 2a 0	, r		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? • • • • • • • • • • • • • • • • • • •	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	10 mg		١,
3a		* *** * ***		
	this return? • • • • • • • • • • • • • • • • • • •	3a		Х
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			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			1
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank	3 8]
	and Financial Accounts	<i>र</i> ।		***
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • •	5a		X
b	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			
	Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a	Х	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible? • • • • • • • • • • • • • • • • • • •	6b	X	
7	Organizations that may receive deductible contributions under section 170(c).		,	
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		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 • • • • • • • • • • • • • • • • • • •	- 4		1
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	120	ļ	ļ
	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		4.	
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring		31 ye	
	organization, have excess business holdings at any time during the year? • • • • • • • • • • • • • • • • • • •	8		<u> </u>
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	Max	4.56	 '
а	Did the organization make any taxable distributions under section 4966? • • • • • • • • • • • • • • • • • •	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	-
10	Section 501(c)(7) organizations. Enter		١,	
a	Initiation fees and capital contributions included on Part VIII, line 12		1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities • • • • • • • • • • • • • • • • • • •		-	
11	Section 501(c)(12) organizations. Enter	1	<u> </u>	,
a	Gross income from members or shareholders			- T
b	Gross income from other sources (Do not net amounts due or paid to other sources against			8.0
40:	amounts due or received from them)	30	7.	<u> </u>
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1,12	7.
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12	,	٠٠ ا

Part VI Governance,

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

<u>Sec</u>	tion A. Governing Body and Management			
		Nome 124	Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the		1	9.4
4-	circumstances, processes, or changes in Schedule O. See instructions			2
1a	Enter the number of voting members of the governing body Enter the number of voting members that are independent 1			1 4 E
b		***		\$7.
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	- V	ا. ما
•	any among among, and any ampropria	-	X	<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		
	supervision of officers, directors or trustees, or key employees to a management company or other person? •••••••••	4		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? • • • • • • • • • • • • • • • • • • •	5		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	6		X
6		} •		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? • • • • • • • • • • • • • • • • • • •	7a		.,
L	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
b		,	,	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	整	3	^
_	the year by the following The governing body?	8a		
a	Each committee with authority to act on behalf of the governing body?	8b	X	
b	Does the organization have local chapters, branches, or affiliates?	9a	_^	v
9a	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	Ja	_	X
b	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	-35		
	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	· · ·		
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O · · · · · · · · · · · · · · · · · ·	11		х
<u></u>	tion B. Policies			
Sec	tion B. Policies		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	140
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		<u> </u>	
-	rise to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by	-time	2 7	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			2 37
а	The organization's CEO, Executive Director, or top management official?	15a	-	Х
b	Other officers or key employees of the organization?	15b		X
	Describe the process in Schedule O (see instructions)	+1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	+	ક્લોફ્ટ :	-
	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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
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 X 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			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ Paul L Garber (404)378-2219			
	1900 Dekalb Avenue Atlanta, GA 30307	-		

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

Check this box if the organization did not compensate (A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per week	Posi I t d nr i d u r i s e v t c d e o u r	I	check	(all t	H C e I O M P I e e o y t s e e d	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Paul L Garber										
President	40		ļ	Х				21,430	0	0
June B Garber										_
Secy/Treas.		1	<u> </u>	X	<u> </u>	ļ .	<u> </u>	0	0	0
						<u> </u>				
			_	_						
		<u> </u>								
		ļ. <u> </u>	<u> </u>	_	_					
			į							
							-	_		-
	_		-				-			

Pa	rt VII Section A. Officers, Directors, Trustees, Key	Employees	, and I	ıgr			npensa	itea	Employees (contin		—			
	(A)	(B)	ļ_		(C)				(D)	(E)		_	(F)	
	Name and title	Average	Position (heck	all th	at		Reportable	Reportable	ŀ		stimate	
		hours	1 4 4	l t	6	Кe	Нсе	F	compensation from	compensation from		ar	nount o other	л
		per week	n rı d ur	n r s r t u	Į.	e m	o m g p h e l	0	the	related		cor	npensa	ation
		WCCK	¹ s e	lı s		l l	g p P h e I	m	organization	organizations		۵.	from th	
			V t c	t t □ e	l c	1 0	lenol	e r	(W-2/1099-MISC)	(W-2/1099-MIS			organiz	
			d eo u r	;` e	Г	e e	s a y t t e e e		((** = *********************************	"		nd rela	
			a o	o n		້	ď					or	ganıza	tions
			' r	a I										
									!					
						ļ					\dashv			
						<u> </u>			· · · · · · · · · · · · · · · · · · ·	-				
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											\top			
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						<u> </u>					\dashv			
					\vdash	-								
1b	Total · · · · · · · · · · · · · · · · · · ·		• • •	• •	٠.	• •	• • •	>	21,430		0			0
2	Total number of individuals (including those in 1a) who	received m	ore tha	an \$	100	,000	ın rep	ortat	ole compensation t	rom the				_
	organization >												V	0
3	Did the organization list any former officer, director or	truetoo kov	amplo	,,,,	or h	uahe	et con	nnen	ested		Г		Yes	No
	employee on line 1a? If "Yes," complete Schedule J fo											3		Х
4	For any individual listed on line 1a, is the sum of repor										┢			
	the organization and related organizations greater that	า \$150,000?	If "Yes	s," c	omp	lete	Sched	lule .	J for such		L	~ ·		
	ındıvıdual										. [4		Х
5	Did any person listed on line 1a receive or accrue com	•		-			-				-			
	services rendered to the organization? If "Yes," comple	ete Schedule	J for	sucl	h pe	rson	• •	• •		• • • • • • • • • • • • • • • • • • • •	<u>. </u>	5		X
	tion B. Independent Contractors Complete this table for your five highest compensated	ındonondon	t contr	acto	ore fl	201 -	0001110	4 ~	es than \$100,000	of .				
1	compensation from the organization	maepenaen	COIL	aul	ภ ร แ	iali	eceive	u mc	ne man \$100,000	OI .				
	(A)								(B)			(C)	
	Name and business address	<u> </u>							Description of s	ervices		Compe	nsation	1
	-								-					
2	Total number of independent contractors (including the	ose in 1) who	recei	ved	moi	e th	an \$10	0,00	0 in		-			
	compensation from the organization											•	•	

Part V	<u> </u>	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
Cgoa oitm oiteu rs, rn ibgss uri ibgss uri ini otl osa s, r an d	1a b c d e f	Related organizations · · · · · · · 1d Government grants (contributions) · · 1e All other contributions, gifts, grants, and	2,606 0,183 ··• 12,789			
PSR ree orv	b c	EDUCATIONAL INSTITUTI Business 611710	731,900	731,900	A CONTRACT STATE	
rin acu mee		All other program service revenue · · · · · · Total. Add lines 2a-2f · · · · · · · · · · · · · · · · · · ·	731,900			
		Investment income (including dividends, interest, and other similar amounts) · · · · · · · · · · · · · · · · · · ·	· · • 7	7		
	b c	(i) Real (ii) Per Gross Rents		23,190		
0	b c	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses · · · · Gain or (loss) · · · · · ·	ther			
h e r R e v e n	8a b	Net gain or (loss) · · · · · · · · · · · · · · · · · ·				
u e	9a b	Gross income from gaming activities See Part IV, line 19 · · · · · · · · a Less direct expenses · · · · · · · b Net income or (loss) from gaming activities · · · · · ·				
	b	Gross sales of inventory, less returns and allowances · · · · · · · a Less cost of goods sold · · · · · · b Net income or (loss) from sales of inventory · · · · ·	a ar - or the marker surface that were			
-	11a b c d	Miscellaneous Revenue Business (Code			
	12	Total. Add lines 11a-11d	·· > 767,886	,	C C	O CONTRACTOR OF THE PROPERTY O

Page 9

Page 10

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). (A) Total expenses (B) Program service (D) Do not include amounts reported on lines 6b, (C) Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 500 500 2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 · · · · · · Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Compensation of current officers, directors, 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 373,583 298,867 74,716 Pension plan contributions (include section 401(k) 10,768 2,692 and section 403(b) employer contributions) 13,460 26,682 21,346 5,336 9 40,908 10 51,134 10,226 11 Fees for services (non-employees) 4,067 4,067 а 1,275 1,275 b Legal 4,065 4,065 Lobbying The State of the S 5, 12 4 C Professional fundraising services See Part IV, line 17 • е f 14,443 14,443 19,214 19,214 12 Advertising and promotion 16,355 13,084 3,271 13 14 Information technology 15 16 5,230 5,230 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 21 22 Depreciation, depletion, and amortization 33,739 26,991 6,748 24,954 24,954 23 Insurance 24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) 44,912 Academic Programs 44,912 559 Dues & Subscriptions 559 24,954 24,954 Insurance С Bank Charges 7,321 1,072 6,249 d 4,973 4,973 Telephone е 86,920 62,289 24,631 f 758,340 0 25 Total functional expenses. Add lines 1 through 24f · · 540,410 217,930 26 Joint Costs. Check here ▶☐ If following \ SOP 98-2 Complete this line only if the organization organization reported in column (B) joint costs from a combined educational campaign and

<u> Pai</u>	<u>τχ </u>	Balance Sneet					
			(A)		(B	-	
			Beginning of year		End of	year	
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	39,439	1	<u> </u>	12,2	16
	2	Savings and temporary cash investments • • • • • • • • • • • • • • • • • • •	30,216	2		20,1	57
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net	124,821	4	1	78,22	27
	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				de la	
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete	PLANT PROPERTY.	7.1	74		. `.
		Part II of Schedule L · · · · · · · · · · · · · · · · · ·		6			
A S	7	Notes and loans receivable, net		7		17,49	93
s	8	Inventories for sale or use	_	8			
e t	9	Prepaid expenses and deferred charges	341	9		•	
s	10a	Land, buildings, and equipment cost basis · · · · · 10a 1,334,009		56 \$	7 7		
	ь	Less accumulated depreciation Complete	The state of the s				
		Part VI of Schedule D	444,016	10c	4	09,86	57
	11	Investments - publicly traded securities · · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,	11	<u> </u>	:	
	12	Investments - other securities See Part IV, line 11- · · · · · · · · · · · · · · · · · ·		12	i		
	13	Investments - program-related See Part IV, line 11 · · · · · · · · · · · · · · · · · ·		13			
	14	Intangible assets · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · ·	14			
	15	Other assets See Part IV, line 11 · · · · · · · · · · · · · · · · · ·	17,500	15	 	17,50	00
	16	Total assets. Add lines 1 through 15 (must equal line 34)	656,333	16		55,46	
	17	Accounts payable and accrued expenses · · · · · · · · · · · · · · · · · ·	2,835	17	 	33,73	
	18	Grants payable		18			<u> </u>
	19	Deferred revenue		19			
ī	20	Tax-exempt bond liabilities · · · · · · · · · · · · · · · · · · ·		20	-		
a	21	Escrow account liability Complete Part IV of Schedule D		21	-		
b i	22	Payables to current and former officers, directors, trustees, key	-	21	 		
1		employees, highest compensated employees, and disqualified	,			_	
t		persons Complete Part II of Schedule L	125,000	<u></u> 22		21,66	
i	1 22	Secured mortgages and notes payable to unrelated third parties	480,360	23		42,37	
е	23		400,300	24		42,3	
S	24	Unsecured notes and loans payable			<u> </u>	_	
	25	Other liabilities Complete Part X of Schedule D	600 105	25		07 7	
	26	Total liabilities. Add lines 17 through 25	608,195	26		97,77	
		Organizations that follow SFAS 117, check here \nearrow \boxed{X} and	or artistation and the contract of			¥ , ,	
NF		complete lines 27 through 29, and lines 33 and 34.			The second second		
e u t n	27	Unrestricted net assets · · · · · · · · · · · · · · · · · · ·	48,138	27		57,68	34
d	28	Temporarily restricted net assets · · · · · · · · · · · · · · · · · · ·		28			
A s B	29	Permanently restricted net assets	yes yes	29			
s a		Organizations that do not follow SFAS 117, check here	1 325 - 44	4	- 3b	· ·	
e I	l	and complete lines 30 through 34.	and the second second		4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	'	
t a s n	30	Capital stock or trust principal, or current funds		30	ļ		
C	31	Paid-in or capital surplus, or land, building, or equipment fund		31	ļ		
o e	32	Retained earnings, endowment, accumulated income, or other funds • • • • • • •		32			
rs	33	Total net assets or fund balances · · · · · · · · · · · · · · · · · · ·	48,138	_33		57,68	34
	34	Total liabilities and net assets/fund balances · · · · · · · · · · · · · · · · · · ·	656,333	34	6	55,46	50
Par	t XI	Financial Statements and Reporting					
						Yes	No
1	Accoun	iting method used to prepare the Form 990 🔲 Cash 💢 Accrual 🔲 Othe	er				
2a	Were th	ne organization's financial statements compiled or reviewed by an independent account	ant? • • • • • • • •	• • •	• • • 2a		Х
b	Were th	ne organization's financial statements audited by an independent accountant? ••••		• • •	· · · 2b		X
С	If "Yes"	to lines 2a or 2b, does the organization have a committee that assumes responsibility f	or oversight of			T	
	the aud	it, review, or compilation of its financial statements and selection of an independent acc	countant?		· · · 2c		
3a	As a res	sult of a federal award, was the organization required to undergo an audit or audits as s				T	
	the Sing	gle Audit Act and OMB Circular A-133?			· · · 3a		Х
b	If "Yes,"	"did the organization undergo the required audit or audits?	<u></u>	<u> </u>	• • • 3b		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

EDU	CAT:	IONAL CENTER FO	OR APPLIED EK	CIS					58-1	1291952		
Pa	ırt i	Reason for	Public Charity	y Status (All organiza	ations mus	t complete	e this part) (see inst	ructions)			
The	orga			use it is. (Please check o								
1		A church, convention	n of churches, or as	ssociation of churches d	escribed in	section 1	70(b)(1)(A)(i).				
2	X	A school described i	n section 170(b)(1))(A)(ii). (Attach Schedule	E)							
3		A hospital or a coop	erative hospital ser	vice organization describ	bed in sect	ion 170(b))(1)(A)(iii).	(Attach So	hedule H)		
4		A medical research	organization opera	ted in conjunction with a	hospital de	escribed in	n section 1	70(b)(1)(A)(iii). Ente	r the hospit	al's name) ,
		city, and state										
5		An organization ope	rated for the benefi	it of a college or universi	ty owned o	r operated	by a gove	ernmental	unit descri	bed in		
		section 170(b)(1)(A)	(iv). (Complete Par	t II)								
6		A federal, state, or lo	ocal government or	governmental unit desc	ribed in se	ction 170(b)(1)(A)(v)					
7		An organization that	normally receives	a substantial part of its s	support fror	n a goverr	nmental ur	nt or from	the genera	ıl public		
		described in section	170(b)(1)(A)(vi). (0	Complete Part II)								
8		A community trust de	escribed in section	170(b)(1)(A)(vi). (Comp	lete Part II)						
9		_		(1) more than 33 1/3% (
		receipts from activities	es related to its exe	empt functions - subject t	to certain e	xceptions	, and (2) n	o more tha	n 33 1/3%	of its		
		• • •		and unrelated business		•		11 tax) fror	n busines:	ses		
		acquired by the orga	ınızatıon after June	30, 1975 See section !	509(a)(2). (Complete	Part III)					
10		An organization orga	anized and operate	d exclusively to test for p	oublic safet	y See se	ction 509(a	a)(4). (see	instruction	s)		
11		An organization orga	anized and operate	d exclusively for the ben	efit of, to p	erform the	functions	of, or to c	arry out the	е		
		purposes of one or r	nore publicly suppo	orted organizations desc	ribed in se	ction 509(a)(1) or se	ction 509(a)(2) See	section		
				the type of supporting of	¬*		•		gh 11h			
		a Type I	b Тур				ally integra		d		II-Other	
е		-		rganization is not contro								
		•	-	rs and other than one or	more publ	icly suppo	rted organ	uzations de	escribed in	section		
_		509(a)(1) or section										
f				etermination from the IRS	S that it is a	ı Type I, T	ype II, or T	ype III sup	porting			-
		organization, check						• • • • •	• • • • •	• • • • •	• • • • •	• • • • _
g		- '	06, has the organiz	zation accepted any gift of	or contribut	ion from a	any of the					
		following persons?									٦	
		•	•	controls, either alone o	•	with perso	ons descrit	bea in (ii)				Yes No
		• •		y of the supported organ							11g(i)	
		•	•	cribed in (i) above? ••			• • • • •	• • • • •	• • • • •	• • • • •	11g(ii)	
L			•	n described in (i) or (ii) a			• • • • •	• • • • •	• • • • •		11g(iii)	
<u>h</u>		Provide the following	information about	the organizations the or	ganization	supports	т		- 63	(-46-		
	(i) Na	me of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	-	(v) Did y			Is the ation in col		mount of
		organization		(described on lines 1-9 above or IRC section	governing of		the organization (i) of your		(i) organiz	ed in the	su	pport
				(see instructions))	Yes	No	Yes	No	Yes	S?		
					163	NO	163	110	163	NO		-
					 				-			
					1			 	 	1		
					 				 	1		
					 					 	 -	
									1	1		
						A.S. A.S.	Aligni Mario	(1) Let	1-,			

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ To be completed by organizations described below.

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the	e organization answered "Yes," to Form 9	90, Part IV, line 3, or Form 990-EZ, Pa	rt VI, line 46 (Politi	cal Campaign /	ctivities),	then
•	Section 501(c)(3) organizations Complete Section 501(c) (other than section 501(c) Section 527 organizations Complete Part	(3)) organizations Complete Parts I-A		not complete P	art I-B	
_	e organization answered "Yes," to Form 9		rt VI. line 47 (Lobb	vina Activities)	then	
	Section 501(c)(3) organizations that have					te Part II-B
	Section 501(c)(3) organizations that have					
If the	e organization answered "Yes," to Form 9	90, Part IV, line 5 (Proxy Tax), then				
•	Section 501(c)(4), (5), or (6) organizations	Complete Part III				
Na	me of organization				Employer is	lentification number
EI	OUCATIONAL CENTER FOR APPLIED	EKIS			58-129	1952
Pa	To be completed by all See the instructions for Sched	I organizations exempt under	er section 501(c) and sect	ion 527 (organizations.
1	Provide a description of the organization'	s direct and indirect political campaign	activities in Part I\	/		-
2	Political expenditures · · · · · · ·				• ▶ \$	
3	Volunteer hours				•• _	
Pa	To be completed by all See the instructions for Sched	I organizations exempt under	er section 501((c)(3).		
1	Enter the amount of any excise tax incurr	ed by the organization under section 4	955		· ▶ \$	
2	Enter the amount of any excise tax incurr					<u> </u>
3	If the organization incurred a section 495	5 tax, did it file Form 4720 for this year	?		· · · · ·	· · [] Yes No
4a	Was a correction made?		. .			· · 🔲 Yes 🔲 No
b	If "Yes," describe in Part IV					
Pa	To be completed by all See the instructions for Sched	Il organizations exempt unde	er section 501((c), except s	ection 5	01(c)(3).
1	Enter the amount directly expended by th	e filing organization for section 527 ex	empt function			
	activities · · · · · · · · · · · · · · · · · · ·		. 		• ▶ \$	
2	Enter the amount of the filing organization					
	527 exempt function activities • • • • •		. 		• ▶ \$	
3	Total of direct and indirect exempt function	on expenditures Add lines 1 and 2 and	l enter here and			
	on Form 1120-POL, line 17b · · · ·		· · · · · · · · · · ·		• ▶ \$	
4	Did the filing organization file Form 1120-	POL for this year?				· · Yes No
5	State the names, addresses and employe					
	were made Enter the amount paid and in	ndicate if the amount was paid from the	e filing organization	n's funds or wer	e political	
	contributions received and promptly and	directly delivered to a separate politic	al organization, su	ch as a separa	te segrega	ted
	fund or a political action committee (PAC) If additional space is needed, provide	e information in Pa	art IV		
	(a) Name	(b) Address	(c) EIN	(d) Amount filing organ funds If none	zation's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
				<u> </u>		
			<u> </u>			
	1-14 ·		1		····	
	-					

	Lobbying Expenditures During 4-Year Averaging Period											
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total						
2a	Lobbying non-taxable amount											
b	Lobbying ceiling amount (150% of line 2a, column (e))				क्षा त्र क्ष्मील ज्यूप्त वर्षे							
С	Total lobbying expenditures											
d	Grassroot non-taxable amount											
е	Grassroots ceiling amount (150% of line 2d, column (e))											
f	Grassroots lobbying expenditures											

egislative body? or any other means? ers under section 4912 720 for this year? or through a C for details y members? of under section through a C for the prior year put under section through a C for the prior year npt under section through a C for the prior year npt under section through a C for the prior year npt under section through a C for through thr	n 501(c)(4), se	Yes	X X X X X	**************************************	(b)
egislative body? egislative body? or any other means? ers under section 4912 720 for this year? ent under section or C for details y members? itures from the prior ye	n 501(c)(4), se		X X X X X X		
egislative body? egislative body? or any other means? ers under section 4912 720 for this year? ent under section or C for details y members? itures from the prior ye	n 501(c)(4), se		X X X X X X		
egislative body? egislative body? or any other means? in section 501(c)(3)? ers under section 4912 720 for this year? mpt under section of C for details y members? itures from the prior ye mpt under section	n 501(c)(4), so		X X X X X X	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
egislative body? egislative body? or any other means? in section 501(c)(3)? ers under section 4912 720 for this year? mpt under section of C for details y members? itures from the prior ye mpt under section	n 501(c)(4), so		X X X X X X	Or .	
egislative body? , or any other means? d in section 501(c)(3)? ers under section 4912 720 for this year? mpt under section e C for details y members? ,000 or less? itures from the prior ye mpt under section	n 501(c)(4), so		X X X X X X	Or.	
egislative body? , or any other means? d in section 501(c)(3)? ers under section 4912 720 for this year? mpt under section e C for details y members? ,000 or less? itures from the prior ye mpt under section	n 501(c)(4), so		X X X X X	Or.	
egislative body? or any other means? d in section 501(c)(3)? ers under section 4912 720 for this year? mpt under section e C for details y members? journal of the prior year not under section e the prior year year not under section e the prior year not under section	n 501(c)(4), so		X X X X	Or.	
egislative body? , or any other means? in section 501(c)(3)? ers under section 4912 720 for this year? mpt under section e C for details y members? ,000 or less? itures from the prior ye mpt under section	n 501(c)(4), se		X X X X	Or.	
egislative body? , or any other means? I in section 501(c)(3)? ers under section 4912 720 for this year? mpt under section e C for details y members? journal of the prior year not under section y members?	n 501(c)(4), so		XXX	Or.	
egislative body? or any other means? of in section 501(c)(3)? ers under section 4912 720 for this year? mpt under section of C for details y members? of the prior year not under section of the prior year not under section of the prior year mpt under section	n 501(c)(4), so		X X	:	
or any other means? If in section 501(c)(3)? If in section 4912 If in	n 501(c)(4), so		X	Or.	
ers under section 4912 720 for this year? mpt under section c C for details y members? ,000 or less? utures from the prior ye mpt under section	n 501(c)(4), s		in disease age.	Or.	
ers under section 4912 720 for this year? mpt under section e C for details y members? noon or less? itures from the prior ye mpt under section	n 501(c)(4), s			:	
ers under section 4912 720 for this year? mpt under section c C for details y members? nound or less? utures from the prior ye mpt under section	n 501(c)(4), s			or	
ers under section 4912 720 for this year? mpt under section c C for details y members? ,000 or less? itures from the prior ye mpt under section	n 501(c)(4), se			or	
ers under section 4912 720 for this year? mpt under section c C for details y members? ,000 or less? itures from the prior ye mpt under section	n 501(c)(4), se	42		or	
720 for this year? mpt under section e C for details y members? ,000 or less? itures from the prior ye mpt under section	n 501(c)(4), s	• • •		or	
mpt under section e C for details y members? ,000 or less? itures from the prior ye mpt under section	n 501(c)(4), s		(c)(5),	or	
y members?	····	ection 501	(c)(5),	or	
,000 or less? · · · · · · · · · · · · · · · · · ·				<u> </u>	
,000 or less? · · · · · · · · · · · · · · · · · ·				_	Yes
itures from the prior ye				1	—
npt under section				2	ļ <u>.</u>
	ear? • • • • •		• • • •	3	
C instructions for deta	• • • • • • • •		1		
o not include amounts	of		++ -		
. .			2a		
			2b		
			2c		
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inus 3 and 4) · · ·	• • • • • • • • •	• • • • • •	5		
art I-B, line 4, Part I-C	, line 5, and Part I	I-B, line 1i			
ed on of	uctible section 162(eline 3, what portion nondeductible lobby	uctible section 162(e) dues line 3, what portion of the excess nondeductible lobbying and political us 3 and 4)	uctible section 162(e) dues	2a 2b 2c uctible section 162(e) dues line 3, what portion of the excess nondeductible lobbying and political 4 us 3 and 4) 5	2a 2b 2c uctible section 162(e) dues line 3, what portion of the excess nondeductible lobbying and political 4 us 3 and 4) 5

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service

answered "Yes," to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public

Employer identification number

Name	of the organization		Employer identification number
EDU	CATIONAL CENTER FOR APPLIED	EKIS	58-1291952
	Organizations Maintaining Donor Authe organization answered "Yes" to Form 990, F	dvised Funds or Other Similar Fund	
		(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 advisor	rs in writing that the assets held in donor advise	ed
	funds are the organization's property, subject to the org		
6	Did the organization inform all grantees, donors, and do		
_	used only for charitable purposes and not for the benefit		
	impermissible private benefit? • • • • • • • • • • • • • • • • • • •		· · · · · · · · · · · · · · · Yes No
Pa	· · · · · · · · · · · · · · · · · · ·		
1	Purpose(s) of conservation easements held by the orga		
	Preservation of land for public use (e.g., recreation		orically important land area
	Protection of natural habitat	Preservation of certified	• •
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified	conservation contribution in the form of a cons	ervation easement
_	on the last day of the tax year		
	on the last cay of the tax year		Held at the End of the Year
а	Total number of conservation easements · · · · ·		
b	Total acreage restricted by conservation easements •		
c	Number of conservation easements on a certified history		
d	Number of conservation easements included in (c) acqu		
3	Number of conservation easements modified, transferre		
•	the taxable year	a, released, extinguished, or terminated by the	organization calling
4	Number of states where property subject to conservation	n easement is located	
5	Does the organization have a written policy regarding t		nd
Ū	enforcement of the conservation easements it holds?	•	
6	Staff or volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting,		
8	Does each conservation easement reported on line 2(d		
٠	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? • • • • •	•	· · · · · · · · · · · · · · · · · · ·
9	In Part XIV, describe how the organization reports con-		
•	balance sheet, and include, if applicable, the text of the	•	
	the organization's accounting for conservation easement	•	no trat decorrect
		ions of Art, Historical Treasures, or	Other Similar Accets
<u>Pa</u>	rt III Organizations Maintaining Collect Complete if the organization answered "Yes" t	· · · · · · · · · · · · · · · · · · ·	Other Similar Assets.
	If the organization elected, as permitted under SFAS 11		ance sheet works of
	art, historical treasures, or other similar assets held for		
	provide, in Part XIV, the text of the footnote to its finance		oranie or public service,
h	If the organization elected, as permitted under SFAS 11		e sheet works of art
b	historical treasures, or other similar assets held for pub	•	
	·	ic exhibition, education, or research in fulfilleral	ice 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 XIII, line 1 -		
•			
2	If the organization received or held works of art, historic		gain, provide the
_	following amounts required to be reported under SFAS	•	. .
a	Revenues included in Form 990, Part VIII, line 1		· · · · · · · · > \$
b	Assets included in Form 990, Part X		· · · · · · · · • • •

Sched	dule D (Form 990) 2008 EDUCATIONAL CEN	TER FOR APPLIE	D EKIS		58-12	291952	Page 2
	rt III Organizations Maintaining	Collections of	Art. Historical	Freasures, o	r Other Similar	Assets (con	tinued)
3	Using the organization's accession and other re						
	items (check all that apply)						
а	Public exhibition	d 🗍 Loai	n or exchange progra	ams			
b	Scholarly research	e Othe	• . •				
С	Preservation for future generations						
4	Provide a description of the organization's collection	ctions and explain he	ow they further the o	rganization's exe	empt purpose in		
	Part XIV			J			
5	During the year, did the organization solicit or re	ceive donations of a	irt, historical treasure	es, or other simil	ar		
	assets to be sold to raise funds rather than to be					TYe:	s No
Da	rt IV Trust, Escrow and Custodia						
<u> ra</u>	Part IV, line 9, or reported an amour						
1a	Is the organization an agent, trustee, custodian			other assets not	 -		
	included on Form 990, Part X? · · · · ·					TYe:	s No
b	If "Yes," explain the arrangement in Part XIV and						
_		,				Amount	
С	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 Forr					· · · · Ye	s No
b	If "Yes," explain the arrangement in Part XIV		•				٠ السا
Pa		f organization answ	ered "Yes" to Form 9	90 Part IV line	10		
<u>ra</u>	Elidowillent Funds, complete	(a) Current Year	(b) Prior Year	(c) Two Years Ba		Back (e) Four V	ears Back
1a	Beginning of year balance	(a) Current real	3 7 2	(6) 140 100 0	CON (a) Three reals t	. (C) F Cur I	Caro Dack
b	Contributions		* * * * * * * * * * * * * * * * * * *	Attack . A	147	v -	
c	Investment earnings or losses • • • • • • •		10 mg		1,2,		
d	Grants or scholarships · · · · · · · · · ·			Washington and the same of the			
e	Other expenditures for facilities		1 - 3-18-18-18-18-18-18-18-18-18-18-18-18-18-	1-11			
•	and programs · · · · · · · · · · · ·					I '	
f	Administrative expenses		in stability	12310		with .	-
g	End of year balance		· Fritting				_
2	Provide the estimated percentage of the year er	l nd halance held as		17.4.3.3.3.		• • • • • • • • • • • • • • • • • • • •	
a	Board designated or quasi-endowment	%					
h	Permanent endowment > %						
c	Term endowment ▶ %						
3a	Are there endowment funds not in the possession	on of the organization	n that are held and s	administered for	the		
Ja	•	in or the organization	ii tilat ale lielu aliu a	arriiriisterea ioi	uic	<u> </u>	res No
	organization by						63 140
	organization by					32(i)	
	(i) unrelated organizations · · · · · · ·					3a(i)	_
L	(i) unrelated organizations · · · · · · · · · · · · · · · · · · ·					3a(ii)	
b	(i) unrelated organizations · · · · · · · · · · · · · · · · · · ·	sted as required on S	Schedule R? • • •			 	
4	(i) unrelated organizations · · · · · · · · · (ii) related organizations · · · · · · · · · · · · · · · · · · ·	sted as required on S ganization's endown	Schedule R? · · ·			3a(ii)	
4	(i) unrelated organizations · · · · · · · · · · · · · · · · · · ·	sted as required on S ganization's endown	Schedule R? nent funds ment. See Form 9		10	3a(ii)	

Part VII	Investments - Other Securities.	see Form 990, Part X, line 12		
	(a) Description of security or category	(b) Book value	(c) Method of valuation	n
	(including name of security)		Cost or end-of-year market	value
Financial deri	vatives and other financial products •••••			
Closely-held	equity interests			
Other				·
				<u> </u>
			-	
	· · · · · · · · · · · · · · · · · · ·	- 11		
		-		
				
-				
	(b) should equal Form 990, Part X, col (B) line 12)		gti a	77
Part VIII	Investments - Program Related.	See Form 990, Part X, line 13		
	(a) Description of investment type	(b) Book value	(c) Method of valuation	n
			Cost or end-of-year market	value
-	· · · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·		
	(b) should equal Form 990, Part X, col (B) line 13)	<u> </u>		
Part IX	Other Assets. See Form 990, Part X, line	3 15	Т	
		Description		(b) Book value
OTHER ASS	ETS			17,500
		·····		
Total. (Column	(b) should equal Form 990, Part X, col (B) line 15) • • • •		· · · · · · · · · · · · · <u>· · · · · · </u>	17,500
Part X	Other Liabilities. See Form 990, Part X,	line 25		
	(a) Description of liability	(b) Amount		3
Federal incor	ne taxes		make the state of	
	· · · · · · · · · · · · · · · · · · ·	*		
				100
				
-				100
				Garage Control of the
				The water the same of the same
				THE TANK
	(b) should equal Form 990, Part X, col (B) line 25)	<u> </u>	图象部数据的第三人称单数	
In Doct VIV/ n	rounds the text of the feetnets to the organization!	a financial atalamanta that cana	ota tha araanimatianla liabiliti far	

Sched	dule D (Form 990) 2008 EDUCATIONAL CENTER FOR APPLIED EKIS	58-1291952	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	;	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	<u>. </u>
7	Prior period adjustments	7	····
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4-8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 · · · · · · · · · · · · · · · · · ·	10	
	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Peturn	
1	Total revenue, gains, and other support per audited financial statements · · · · · · · · · · · · · · · · · · ·	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	w /	
a	Net unrealized gains on investments	第 。 (1 来) (3)	
b	Donated services and use of facilities · · · · · · · · · · · · · · · · · · ·	- 17, ,	
	Recoveries of prior year grants		
C	Other (Describe in Part XIV) 2d		
d	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·		
e	Add lines 2a through 2d	2e	· · · · · ·
3	1 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a		
b	Other (Describe in Part XIV)	Year of	
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	4 4 4	
а	Donated services and use of facilities • • • • • • • • • • • • • • • 2a		
b	Prior year adjustments · · · · · · · · · · · · · · · · · · ·		
С	Losses reported on Form 990, Part IX, line 25 · · · · · · · · · · · · · · · · · ·]ૄૄૣૣૣૣૣૣૣૣૣૣૄૄ	
d	Other (Describe in Part XIV) 2d		
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	- ' '	
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a		
b	Other (Describe in Part XIV) • • • • • • • • • • • • • • • • • • •		
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
	rt XIV Supplemental Information	<u> </u>	
	iplete 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		
	2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b		
anu .	zu, rait v, illic 4, rait X, rait XI, illic 0, rait XII, illic 3 20 allo 45, and rait XIII, illic 3 24 allo 45		

SCHEDULE E (Form 990 or 990-EZ)

Schools

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

OMB No 1545-0047

2008

¿ Open to Public Inspection ...

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

EDU	JCATIONAL CENTER FOR APPLIED EKIS 58-12	91952		
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its	[
	brochures, catalogues, and other written communications with the public dealing with student admissions,	7		
	programs, and scholarships?	2	Х	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media	1.2		
	during the period of solicitation for students, or during the registration period if it has no solicitation program,	2ξ-\λ.~ 2με κ ων	140 CO.	
	in a way that makes the policy known to all parts of the general community it serves? If "Yes," please		4	- , <i>'</i>
	describe If "No," please explain · · · · · · · · · · · · · · · · · · ·	3	Х	
	Published on the organization's website and all printed	1	1:3-	
	material available to the public.	,-		
	material available to the pastro.			
		 .		
		- Indian	-	-
4	Does the organization maintain the following?		, '	
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially		<u> </u>	
_	nondiscriminatory basis?	· 4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	1	<u> </u>	
·	with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	_
_	If you answered "No" to any of the above, please explain (If you need more space, attach a separate			
	statement)	,		
	statement y	ļ.,		
		— <u>*</u>	1.	
5	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	5a	 	X
_	oldsone figure of privileges		_	
b	Admissions policies?	5b		Х
_			 	
С	Employment of faculty or administrative staff?	5c		Х
-				
d	Scholarships or other financial assistance?	5d		Х
•				
е	Educational policies?	5e		х
	·			
f	Use of facilities? • • • • • • • • • • • • • • • • • • •	5f		х
g	Athletic programs?	5g		Х
h	Other extracurricular activities?	• • • 5h		Х
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate	1. Sec. 1		
	statement)	1	7	
				F.
			裁	ž,
				7
6a	Does the organization receive any financial aid or assistance from a governmental agency?	· · · 6a		Х
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Х
	If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement	****	11.5	
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through	18 18 18	7	
	4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	7	X	

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

▶ Attach to Form 990 or Form 990-EZ.

2008

Department of the Treasury Internal Revenue Service

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38b or 40b.

Open to Public Inspection

Schedule L (Form 990, or 990-EZ) 2008

OMB No 1545-0047

EDUCATI	enzamon ONAL CENTER FOR APPLIED E	KIS								9195		er	
Part I	Excess Benefit Transactio To be completed by organizations t								0-EZ,	Part V	, line	40b	
					,	,	,		·		-		rected?
1	(a) Name of disqualified person			(b) Description of transaction			n of transaction			_		Yes	No
							-						
				-									<u> </u>
	·												
							·						
	the amount of tax imposed on the orga						e year						
	section 4958 · · · · · · · · · ·						• • • • •	••!	> \$				
3 Enter	the amount of tax, if any, on line 2, abo	ove, reimbi	irsed by	the organi	zation • •	• • • • •	• • • • •	••	▶ \$				
Part II	Loans to and/or From Inter	ested Pa	rsons										
1 411 11	To be completed by organizations t				990, Part IV	, line 26, c	or Form 990-	EZ, Pa	art V, I	line 38	а		
(a) !	Name of interested person and purpose	(b) Loan	to or from	(c)	Original	(d) Balance due (e) In default? (f) A		(f) Ap	oroved	ved (g) Written			
	the organiz		inization?	on? principal amount					by board or committee?		agreement?		
		-						Yes	No	Yes	No	Yes	No
Paul L G	arber	To X	From		125,000		121,667	163	X	X	140	X	140
		^		i			,		- 23				
· 									ļ				
						<u> </u>	101 667					ļ. <u>.</u>	
Part III	Grants or Assistance Ben						121,667			<u> </u>			
rait III	To be completed by organizations					/, line 27							
	(a) Name of interested person	(b) Rela	ationship b	etween inter	ested person a	nd the	(c) Ar	nount of	grant o	r type of	assista	nce	
		-		organizati	ion								
		1											
		 											
	<u> </u>										_		
Part IV	Business Transactions In To be completed by organizations					June 28a	28h or 28d	•					
	(a) Name of interested person	1	ationship b		(c) Amo		(d) Des		of trans	action		(e)Sha	unna of
	(a) Name of interested person	1 ''	ed person a		transac		(0) 500	фірцоп	or dans	LOIOI		organiz	
			organizatio	n								reven	ues?
			 -									Yes	No
		-											
													
					··							<u> </u>	
							1						

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

SCHEDULE O

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

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

OMB No 1545-0047

2008

-	·	4 -	<u> </u>	
•	Jben	το	Public	
	neno			

Employer identification number

58-1291952 EDUCATIONAL CENTER FOR APPLIED EKIS 01. Officer, directors, etc. family relationship (Part VI, line 2) The president and co-founder of the school, Paul L. Garber, provides money to the school when it has a shortage. Over the years the balance due to him has reached \$126,250. school reimburses him from time to time when the funds are available. 02. Form 990 governing body review (Part VI, line 10) The Form 990 is presented to the president, who reviews it. After he is satisfied, the return is reviewed by the board of directors. After their approval, the form is filed. 03. Conflict of interest policy compliance (Part VI, line 12c) The school maintains a conflict of interest policy that is within the guigelines published by the Internal Revenue Service. 04. Governing documents, etc, available to public (Part VI, line 19) Governing documents are available at the organizations's headquarters. Inspections are by appointment during regular business hours.

	Federal Supporting Statements	2008 _{PG01}
Name(s) as shown on return		FEIN
EDUCATIONAL CENTE	ER FOR APPLIED EKIS	58-1291952

Form 990, Schedule D, Part VI, Line 1e Investments - Other Statement #D1e

Description of Investment LAND	Cost/basis (Investment) 209,767	Cost/basis (Other) 0	Depr 0	Book Value 209,767
SCHOOL BUILDINGS	672,416	0	672,416	0
SCHOOL EQUIPMENT	280,174	0	224,139	56,035
259 HAMPTON TERRACE	171,652	0	27,587	144,065
Total	1,334,009		924,142	409,867