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Department of the Treasury Internal Revenue Service

URBLESS AS CHASINAL

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)

(except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements



	For the	2008 calend	dar year,	or tax yea	ir beginning – 87	01	, 2008, a	and ending	7/3	31	, 2009
В	Check if a	pplicable]							D Employer Ide	entification Number
	Addr	ess change	Please us IRS label	e Abilei	ne Christian	Schools	Inc			75-213	7523
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		e change	or type See	Ab. 10	ne, TX 79601	.vu. #303					
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		ination	tions	1							
	\neg	nded return	1							G Gross receipt	s \$ 2,130,727.
	\vdash	icalion pending	F Name	and address	of principal officer			Н/	a) le thie :	a group return for	
	Appii	ication perionig								affiliates included	
		l		As C A						altach a list (see	
<u> </u>	Tax-e	xempt statu)◀ (insert no) 4947(a	a)(1) or	527		•	
J	Webs	ite ► WW	w abı	<u>lenech</u> r	istian.com			н	(c) Group	exemption number	. 🛌
K	Type of	organization	Corpo	ration T	rust Association	Other >	L Ye	ear of Formation	1	M State	of legal domicile
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•ব	3 14	umber of vo	oting mei	mbers of th	ne governing body	(Part VI, line 1a	a) 			3	15
ės	4 17	umber of in	aepenae	nt voting r	nembers of the go	verning body (P	art VI, line	Г р)		4	
A \$	5 1	otal number	of empl	oyees (Pa	rt V, line 2a)			1\		5	
づ ^す					mate if necessary			1 \		6	
>					evenue from Part		lumn (C)			7	
<u>z</u> _	b N	et unrelated	busines	ss taxable	income from Form	990-T, line 34				7	b 0.
Revenue Activities	1						\ /	\	р	rior Year	Current Year
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2011	14 B	enefits paid	I to or fo	r m 😡 🖼	Fart EX, column	(A), line (4)		j	/ \		
=	15 5				mployee benefits		A), lines !	5-10)	$\overline{\lambda}_1$,137,970	. 1,319,603.
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, å	b T	otal fundrais	sing exp	enses (Par	t IX, colimn (D),	ne 25) 🕴 📐		2,236 <u>.</u>	THE PARTY		A CONTRACTOR OF THE PARTY OF TH
ш	17 0	ther expens	ses (Part	IX, colum	n (A), lines 11a-11	d. 11f-249		1		628,030	. 616,884.
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Assets or						Λ	//		Begir	Ining of Year	End of Year
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4.P	21 T	otal liabilitie	es (Part)	X, line 26)		$1 \setminus 1$	7			280,329	401,482.
5.5				•	h						
in.					btract line 21 from	n Ime 20				1,554,589	1,514,738.
115	attll類	Signati	ure bic	OCK	 						
		Under penaltie	es of perjury	, I declare tha	have examined this r	eturn, including accor	mpanying sched	dules and state	ments, and	d to the best of my	knowledge and belief, it is
		uue, correct, a	and comple	1 Declaration	of preparer (other than	dicer) is based on a	all information o	oi which prepare	er nas any		
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He	ere	Signature	of officer	1			·		 Da	ate	
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Pa		Preparer's	_		1/1/2	//	1	3/10/	/, _ s	elf- mployed ►	55.5
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O	nly	employed) address, and	<u>40</u>		SS ST STE 3				E		2271305
		ZIP + 4	AB	ILENE,	TX 79601-51	46			F	Phone no ► (3	
Ma	y the IR	S discuss th	his return	with the i	oreparer shown ab	ove? (see instru	uctions)				X Yes No
					duction Act Notice			lions		TEEA0112L 12	2/22/08 Form 990 (2008)

Form 990 (2008) Abliene Christian Schools, Inc.	75-21	3/523	Page 2
Partillis Statement of Program Service Accomplishments (see instructions)			
Briefly describe the organization's mission			
See Schedule O			
1			
2 Did the organization undertake any significant program services during the year which were not listed or	n the prior		
Form 990 or 990-EZ?	title prior	Yes	X No
If 'Yes,' describe these new services on Schedule O			K NO
		□ v	∇ No
3 Did the organization cease conducting, or make significant changes in how it conducts, any program se	rvices	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 service and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants are	s by expens	es Section 5	001(c)(3) he total
expenses, and revenue, if any, for each program service reported	id allocation	3 10 0111013, 1	ne total
(a4) 77 (4, 24) (4)			
4a (Code (Expenses \$ 1,506,036. including grants of \$)	(Revenue	\$)
Abilene Christian Schools is a private primary and secondary ins			
offering curriculum which leads to a high school diploma recognit	zed_by_t	<u>he Texas</u>	
Education Agency.			
	·		
4b (Code	(Revenue	\$)
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// TOP- INCOMENT			
4c (Code) (Expenses \$ including grants of \$)	(Revenue	\$)
		 _	
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4d Other program services (Describe in Schedule O)			
(Expenses \$ including grants of \$) (Revenue	\$		
4e Total program service expenses ► \$ 1,506,036. (Must equal Part IX, Line 25, column			

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Χ
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
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	_5_		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part 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	Х	
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 that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	X	
14 8	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
1	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		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	X	
19	5 The second state of the second seco	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 17 If 'Yes,' complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		X
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K If 'No,'go to question 25	24a		Х
Ł	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 8	a 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		Х
ı	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		Х
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
BA/		Forn	n 990	(2008)

٠		1	Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
;	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		X
		204		
	Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		X
•	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		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		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		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
BAA		Form	990	(2008)

TEEA0104L 12/18/08

amounts due or received from them).

BAA

Page 5 Partive 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 0 1 a 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 10 2 a 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 0 , ji 2b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2bNote. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) THE W 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return 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 4 a financial account in a foreign country (such as a bank account, securities account, or other financial account) 100 b If 'Yes,' enter the name of the foreign country rel See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and VA. Financial Accounts Χ 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Χ b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? Χ 6a Did the organization solicit any contributions that were not tax deductible? 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). 1 1 10 7 a Χ a Did the organization provide goods or services in exchange for any guid pro quo contribution of more than \$75? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Χ Form 8282 7с d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal X benefit contract? 7 e 7 f Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Χ g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 q Χ 7h h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 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 8 excess business holdings at any time during the year? 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. 65. LVA 经政 9 a a Did the organization make any taxable distributions under section 4966? 9 b b Did the organization make any distribution to a donor, donor advisor, or related person? 12.06 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10 a b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against

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

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

11 b

12b

12a

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Form 990 (2008)

Form 990 (2008) Abilene Christian Schools, Inc.

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

Section A - Couchning Reduced Management

<u> 5ec</u>	ion A. Governing Body and Management				
	For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, processes, or changes in Schedule O See instructions	describe the circumstances,		Yes	No
1 a	Enter the number of voting members of the governing body	1a 15		ができ	
	Enter the number of voting members that are independent	1b 15			
	Did any officer, director, trustee, or key employee have a family relationship or a business re officer, director, trustee or key employee?	elationship with any other	2		X
3	Did the organization delegate control over management duties customarily performed by or of officers, directors or trustees, or key employees to a management company or other pers	under the direct supervision on?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization	onle perote?	5		Х
6	Does the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization become a supplication of the organization become a supplication of the organization of the organization become a supplication of the organization of the organization become a supplication of the organization of the organi	on's assets,	6		X
			-		
	Does the organization have members, stockholders, or other persons who may elect one or governing body?		7a 7b		X
	Are any decisions of the governing body subject to approval by members, stockholders, or o	ther persons?	70	No. 4.25	^ भरुखक
	Did the organization contemporaneously document the meetings held or written actions under the following	ertaken during the year by	74.7		
	The governing body?		8 a		X
	Each committee with authority to act on behalf of the governing body?		8b	ļ-——	X
9 a	Does the organization have local chapters, branches, or affiliates?		9a	ļ	X
ħ	If 'Yes,' does the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with those of the organization?	of such chapters, affiliates,	9 b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was file describe in Schedule O the process, if any, the organization uses to review the Form 990 $^\circ$	d? All organizations must See Schedule O	10	Х	
	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who ca organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	annot be reached at the	11		Χ_
Sec	tion B. Policies				
				Yes	No
12 a	Does the organization have a written conflict of interest policy? If 'No,' go to line 13		12a	X	
	Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts?	s that could give rise	12b		X
C	Does the organization regularly and consistently monitor and enforce compliance with the poschedule O how this is done	olicy? If 'Yes,' describe in	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 persons, comparability data, and contemporaneous substantiation of the deliberation and deliberation a	d approval by independent ecision			
	The organization's CEO, Executive Director, or top management official?		15a		X
	Other officers of key employees of the organization?		15 b		X
	Describe the process in Schedule O (see instructions)		#2.7%		E 22 2
16.			127/11/17	為語	
	Did the organization invest in, contribute assets to, or participate in a joint venture or similal entity during the year?		16a		Χ
i	If 'Yes,' has the organization adopted a written policy or procedure requiring the organizatio in joint venture arrangements under applicable federal tax law, and taken steps to safeguar status with respect to such arrangements?	n to evaluate its participation d the organization's exempt	16b		
Sec	tion C. Disclosures				
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 Forms 1023 (or 1024 if applicable), 990, a inspection. Indicate how you make these available. Check all that apply	and 990-T (501(c)(3)s only) a	avaılab	le for	public
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how) the organization makes its governing docustatements available to the public	ments, conflict of interest po	olicy, a	nd fin	ancial
20	State the name, physical address, and telephone number of the person who possesses the	books and records of the org	ganıza	tion	
	Craig Fisher 2550 N Judge Ely Blvd Abilene TX 79601 325				
BAA			Form	1 990	(2008)
	•				\/

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) or 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 no	ot compen	sate a	ny (office	er, d	directo	r, tr	ustee, or key employe	e	
(A)	(D)	(E)	(F)							
Name and Title	Average hours		tion (check	k all I	hat app		Reportable compensation from	Reportable compensation from	Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099 MISC)	compensation from related organizations (W-2/1099-MISC)	amounl of other compensation from the organization and related organizations
Mary Anderson										
Trustee] 1	Х						0.	0.	0.
Terry Brown										
Trustee	1	Х						0.	0	_0.
Steve Cunningham										
Trustee	1	X						0.	0.	0.
John L. Estes, Jr.										
Trustee] 1	X			ŀ			0.	0.	0.
Robert Hall										
Trustee	1	Х						0.	0.	0.
Phillip Hettich										
Trustee	1 1	Х						0.	0.	0.
Bill Hilton										
Trustee	1	Х						0.	0.	0.
Jack Rich	<u> </u>		†							
Trustee	1 1	X						0.	0	0.
Kent Rideout									·	
Trustee	1 1	Х						0.	0.	0.
Bryan Shilcutt							_			
Trustee	1	Х			1	1		0.	0.	0.
John L. Estes, III	 			 						
Director	1 1	Х				j		0.	0.	0.
John Tyson, Jr.	 	 -:-	-						<u>_</u>	
Trustee	1 1	X						0.	0.	0.
Dale Higginbotham			<u> </u>		<u> </u>	 	 			
Director	$\stackrel{ extstyle -1}{ extstyle -1}$	X	1		Ì]		0.	0.)	0.
Darryl_Jinkerson	 	<u> </u>	┢┈		 			<u> </u>		
Director	1	X					İ	0.	0	0.
Kitty Wasemiller	 	1			ļ					
Director	\dashv 1	X						0.	0.	0.
Craige_Fisher	 	 ^	†			 	t			
President	40				X			95,000.	0.	0.
	 		\dagger	1	+		\vdash		<u> </u>	
	1						1			
		1			1	Ь	1	<u> </u>	<u> </u>	L

(A)	(B)			((:)			(D)	(E)	(F)
Name and Title	Average hours per week			Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099 MISC)	Reportable compensation from related organization (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		,								
1 b Total								95,000.	(0. 0
2 Total number of individuals (including those in 1a) organization ► 0	who rec	eıve	d m	ore	thar	n \$1	00,0	00 in reportable o	compensation fro	m the
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such i 4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater findividual 	ndıvıdua oortabli	al e co	mpe	ะกรล	tion	and	d oth	ner compensation	from	3 X 3 X 4 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sc	ompens hedule .	satio J for	n fr	om ch p	any erso	unr n	elate	ed organization fo	r services	5 X
Section B. Independent Contractors									4100 000	
Complete this table for your five highest compensation from the organization	ted inde	epen	den	t co	ntra	ctor	s tha	at received more	tnan \$100,000 of	
(A) Name and business addres	ss				•			Description	of Services	(C) Compensation
2 Total number of independent contractors (including								1 2122 222		

compensation from the organization > 0

Par	t ^a V.I	III Statement of Re	venue		•			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
GIFTS, GRANTS	b d	Federated campaigns. Membership dues Fundraising events Related organizations	1 a 1 b 1 c 1 d	62,220.				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f g	Government grants (contribution All other contributions, gifts, g similar amounts not included in Noncash contributions included in Total Add lines 1a-1f	rants, and above 1 f	54,704.	116,924			
\rightarrow				Business Code	The state of the s			
PROGRAM SERVICE REVENUE	2 a	Tuition	[2,666,315.	2,666,315.		
E RE		Registration and F	ees		97,169.	97,169.		
N. S		Discounts Allowed			-716,670.	-716,670.		
MSE		Scholarships and F	īu yīg -		-462,059.	-462,059.		
GRA		After School Care All other program service			12,151. 97,892.	12,151. 97,892.		
PRO		Total Add lines 2a-2f	Le revenue	-	1,694,798.	CONTRACTOR PROPERTY.	NAMES OF THE PARTY OF THE PART	建筑器 建筑设置的
	3	Investment income (incother similar amounts)	luding dividends	, interest and	23,081.			23,081.
	4	Income from investmen	t of tax-exempt	bond proceeds 🟲				
	5	Royalties		>	Core in control by a new two a 1 titles	Cas. Ti. Th. 101 41. 144 M. 1441 A SACRTIS	on development of the second of the second	alm VI to a to a sold of the ball of the
	۲-	Cara Davida	(ı) Real	(ii) Personal				
		Gross Rents Less rental expenses	· · · · · · · · · · · · · · · · · · ·					
		Rental income or (loss)						
ĺ		Net rental income or (lo	199	<u> </u>	G.M. Strick of Liver in Artist Party Service	HARMET TO BELLEVIE	Not a far Straight out and a second of the state.	D.A. TONE DESIGNATION OF REIN
		Gross amount from sales of	(i) Securities	(II) Other	14 TA JACO 19 19 40 7 18		man mannath	的最后的概念的思
	/ a	assets other than inventory		173,883.				
	Ь	Less cost or other basis						
	_	and sales expenses		76,300.				
	c	: Gain or (loss)		97,583.				
	d	l Net gain or (loss)		-	97,583.	97,583		and the same of th
NUE	8 a	Gross income from fund (not including \$						
REVE		of contributions reporte	d on line 1c)	104 660				
OTHER REVENU		See Part IV, line 18	а					
110		 Less direct expenses Net income or (loss) from 	b b fundraising o	127 1101	62,220.		SERVICE OF THE	62,220.
		Gross income from gan See Part IV, line 19						
		Less direct expenses	b					
		: Net income or (loss) fro	m gamıng actıvı	ties	1244 40000044400000000044000000000000000	america de la casta sa las desertes de la casta de la		,
		Gross sales of inventor and allowances						
	t	Less cost of goods sol	d b					HARRIE EL POP
		Net income or (loss) fro			- I was a few second and a few second	770 SLEE 30/10-00 2	2 112(1) 1 20 2 2 (2)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Miscellaneous Rever		Business Code	Service Services		2230年125日	<u>[2]]</u> 英国第三国第二国
		Miscellaneous_	ĸeneune		17,378.	17,378.		
) 			-	-	 	
	,	d All other revenue			<u> </u>	 	 	
		e Total. Add lines 11a-11	d L	•	17,378.	到的2000年	STATE OF STA	MANAGE STATE
		Total Revenue. Add lin 10c, and 11e		5, 6d, 7d, 8c, 9c,		1,809,759.	0.	85,301.

Form 990 (2008)

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). (D) (B) (A) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII Fundraising Program service Management and Total expenses expenses expenses general expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, Grants and other assistance to individuals in 2 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 Benefits paid to or for members Compensation of current officers, directors, 0. trustees, and key employees 100,000 25,000 75,000 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) 0. 0 0 0 31,014. 93,041 Other salaries and wages 955,540 831,485 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 143,915 28,236 5,211. 9 Other employee benefits 177,362 2,547. Payroll taxes 86,701 70,351 13,803 Fees for services (non-employees) a Management **b** Legal 5,000 5,000 c Accounting d Lobbyina e Prof fundraising svcs See Part IV, In 17 f Investment management fees g Other 12 Advertising and promotion Office expenses 13 14 Information technology 15 Royalties 54,069 54,069 16 Occupancy 10,018 17 10,018 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 89,345 89,345 32,950. 32,950 23 Insurance 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) 16,512 a Supplies 121,300. 104,788. b Cafeteria Supplies 107,452. 107,452 c Extra Curricular Expense 55,152. 55,152 d Repairs and Maintenance 50,517. 50,517 e Bus Expense 17,304 17,304 47,260 13,464. f All other expenses 73,777 13,053 378,215 52,236. Total functional expenses Add lines 1 through 24f 1,936,487 1,506,036 Joint Costs. Check here ► | if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

•			(A) Beginning of year		(B) End of year
	- <u>`</u>	Cash - non-interest-bearing	29,892.	1	29,147.
	2	Savings and temporary cash investments	331,559.	2	429,580.
	3	Pledges and grants receivable, net	331,337.	3	125,500.
	4	Accounts receivable, net	2,951.	4	4,785.
	5	Receivables from current and former officers, directors, trustees, key employees,	2,331.		27,700.
		or other related parties Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))	40000000000000000000000000000000000000	國際	
Α		and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
S	7	Notes and loans receivable, net		7	
ASSETS	8	Inventories for sale or use		8	
S	9	Prepaid expenses and deferred charges	27,478.	9	33,234
		Land, buildings, and equipment cost basis 10a 2,379,688.			
	b	Less accumulated depreciation Complete Part VI of		CE L	THE PROPERTY OF THE PARTY OF TH
		Schedule D 10b 1,713,034.	812,699.	10 c	666,654.
	11	Investments — publicly-traded securities	630,339.	11	752,820.
	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	1 024 010	15	1 01 6 220
	16	Total assets Add lines 1 through 15 (must equal line 34)	1,834,918.	16	1,916,220.
	17 18	Accounts payable and accrued expenses	21,948.	17	29,342.
	19	Grants payable Deferred revenue		18	
Ļ	20	Tax-exempt bond liabilities		20	
I A B	21	Escrow account liability Complete Part IV of Schedule D		21	
ı	22	Payables to current and former officers, directors, trustees, key employees,	<u> </u>	121	200-200-200-00-00-00-00-00-00-00-00-00-0
LITIES		highest compensated employees, and disqualified persons. Complete Part II			1 T T T T T T T T T T T T T T T T T T T
1		of Schedule L	12.5.2.1	22	
S	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable		24	
	25	Other liabilities Complete Part X of Schedule D	258,381.	25	372,140.
	26	Total liabilities. Add lines 17 through 25	280,329.	26	401,482.
N E T		Organizations that follow SFAS 117, check here ► X and complete lines	秋湖湖南湖 湖湖湖	[4.65%	St. V. Shiring St.
Ť		27 through 29 and lines 33 and 34.			
ASSET	27	Unrestricted net assets	724,758.	27	812,079.
	28	Temporarily restricted net assets	355,637.	28	229,533.
Ś	29	Permanently restricted net assets	474,194.	29	473,126.
O R		Organizations that do not follow SFAS 117, check here ► and complete	STATE OF THE STATE	13063	WALLEY THE
FUZO		lines 30 through 34.			A CONTRACTOR OF THE PROPERTY O
D	30	Capital stock or trust principal, or current funds.		30	
B	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
BALAZCES	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ç	33	Total net assets or fund balances	1,554,589.	33	1,514,738.
	34	Total liabilities and net assets/fund balances	1,834,918.	34	1,916,220.
Pe	irt\X	图 Financial Statements and Reporting			
			,		Yes No
		counting method used to prepare the Form 990 $igsqcup$ Cash $igsqcup X$ Accrual $igsqcup$	Other		
2		ere the organization's financial statements compiled or reviewed by an independent	accountant?		2a X
		ere the organization's financial statements audited by an independent accountant?			2b X
	c If '	Yes' to 2a or 2b, does the organization have a committee that assumes responsibil riew, or compilation of its financial statements and selection of an independent acc	ity for oversight of the a	audıt,	2c X
:		•		Sinal	
·	Au	a result of a federal award, was the organization required to undergo an audit or a dit Act and OMB Circular A-133?	,	Cirigi	3a X
	b If '	Yes,' did the organization undergo the required audit or audits?			3b
BA					Form 990 (2008)

SCHEDULE A (Form 990 or 990-EZ)

Total

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

Openito Public

Department of the Treasury Internal Revenue Service		► Attach to	Form 990 or Form 990-E	Z. ► See	separa	te instri	uctions			i linspe	ction	
Name of the organization			· · · · · · · · · · · · · · · · · · ·					Employer	identificat	ion number		
Abilene Chri	stian S	Schools, Inc.						75-21	37523	l		
Part 限 Reason	for Pub	lic Charity Statu	s (All organizations	must c	omple	te this	part)	(see i	nstruct	ions)		
The organization is	iot a priva	ate foundation becau	se it is (Please check or	nly one	organiza	ation)						
			ociation of churches desc		section	170(b)(1)(A)(ı).					
			A)(iı). (Attach Schedule E									
		•	e organization described		-							
		•	d in conjunction with a h	ospital c	lescribe	d in sec	tion 170)(b)(1)(A	(III) En	iter the ho	spital's	
name, city 5 An organiz 170(b)(1)(A	ation ope		of a college or university	owned	or opera	ated by	a gover	nmental	unit des	scribed in	section	
			governmental unit descrit	bed in s	ection 1	70(b)(1)	(A)(v).					
7 An organiz	ation that		substantial part of its su					or from	the ger	neral public	: descr	ıbed
~~			1 70(b)(1)(A)(vi) (Complet		-							
from activit	es related Lincome a	to its exempt function	more than 33-1/3 % of its s is – subject to certain exce iss taxable income (less omplete Part III)	eptions, a	and (2) n	o more t	han 33-	1/3 % of	its suppo	ort from aro	SS	ifter
			exclusively to test for pu		-							
more publ describes	cly suppo the type	irted organizations of	exclusively for the benef described in section 509(a zation and complete lines	a)(1) or : s 11e thr	section ough 11	509(a)(2 h	?) See	of, or car section	rry out th 509(a)(3	ne purpose) Check t	s of or he box	ne or that
а Туре		b Type II		– Func					d	Type III-		
e By checkir than found 509(a)(2)	g this box ation mar	x, I certify that the or nagers and other tha	ganization is not controll n one or more publicly si	led direc upportec	tly or in Lorgania	directly zations (by one describe	or more ed in sec	disquali Stion 509	fied person (a)(1) or s	ons oth section	ier
f If the orga check this	nization re box	eceived a written det	ermination from the IRS	that is a	Type I	, Type II	or Typ	e III sup	porting	organizatio	n,	
g Since Aug	ust 17, 20	106, has the organiza	ition accepted any gift of	r contrib	ution fro	om any	of the fo	ollowing	persons	;7	Yes	No
(ı) a pe belo	son who v, the gov	directly or indirectly verning body of the s	controls, either alone or upported organization?	together	with pe	rsons d	escribed	in (II)	and (III)	11 g (ı)		
(II) a far	uly memt	per of a person desc	cribed in (i) above?							11 g (II)		
(III) a 35	% controll	led entity of a persor	n described in (i) or (ii) al	bove?						11 g (III)	<u> </u>	
h Provide th	e followin	g information about	the organizations the org	anızatıo	n suppo	rts	, .	· · · · · ·				
(i) Name of Sup Organizalii	orted n	(ii) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organizat (i) listed	Is the tion in cold in your trning ment?	the organ	ou notify ization in (i) of upport?	organizat (i) organi	s the ion in col zed in the S ?	(vii) Amou	nt of Sup	port
				Yes	No	Yes	No	Yes	No			
										4		
								ļ				
	ĺ							1				
				 				 				
	ļ											
					說過	N. H. S.	"如何"	60次分	· Carrie			

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

Schedule A (Form 990 or 990-EZ) 2008

,; CI	City Support Schedule 101				טאָניואָאָנוע) מווי		八八八	VI)	
Sect	(Complete only if you check tion A. Public Support	ed the box on line	5, 7, or 8 of Part	:1)					-
									-
	ndar year (or fiscal year ining in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	8	(f) Total	
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')								-
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf								
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.								
4	Total. Add lines 1-3								_
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)								_
	Public support. Subtract line 5 from line 4					開發發			_
Sec	tion B. Total Support		·						_
	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8	(f) Total	
7	Amounts from line 4								_
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources								
9	Net income form unrelated business activities, whether or not the business is regularly carried on								
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV)								
11	Total support Add lines 7 through 10						< 5 d.H		
12	Gross receipts from related activ	vities, etc (see in:	structions)				12		
13	First five years. If the Form 990 organization, check this box and	is for the organiz	ation's first, seco	nd, third, fourth,	or fifth tax year as	s a section !	501(c)((3)	1
Sec	tion C. Computation of Pu	ıblıc Support P	Percentage						
14	Public support percentage for 2	008 (line 6, colum	n (f) divided by lii	ne 11, column (f)			14	%	_
15	Public support percentage for 2	007 Schedule A, F	Part IV-A, line 26f				15	%	_
16 a	33-1/3 support test -2008 . If the and stop here. The organization	ne organization did n qualifies as a pu	I not check the bo blicly supported o	ox on line 13, and organization.	d the line 14 is 33	-1/3 % or m	ore, cl	heck this box]
t	33-1/3 support test — 2007 If the and stop here. The organization	ne organization did n qualifies as a pu	d not check a box blicly supported o	on line 13, or 16a irganization	a, and line 15 is 3	3-1/3% or n	nore, c	heck this box]
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fact	meets the 'facts-	and circumstance	s' test, check this	box and stop he	re. Explain i	ın Part	IV how]
ł	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-ar	n meets the 'facts- nd-circumstances'	and-circumstance test The organ	es' test, check this ization qualifies a	s box and stop he s a publicly suppo	re. Explain orted organi	ın Part zatıon	: IV how the ►]
18	Private foundation If the organ	nization did not ch	eck a box on line	, 13, 16a, 16b, 17					لِـ
BAA					Sc	hedule A (F	orm 9	90 or 990-EZ) 20	ງ8

(Complete only if you checked the box on line 9 of Part I)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal yr beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008		(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , ,		
2	Gross receipts from	<u> </u>						
2	admissions, merchandise sold							
	or services performed, or facilities furnished in a activity							
	that is related to the						1	
	organization's tax-exempt							
2	purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the							· · · · · · · · · · · · · · · · · · ·
	organization's benefit and							
	either paid to or expended on its behalf							
5	The value of services or						_	
	facilities furnished by a	į						
	governmental unit to the organization without charge							
_	<u> </u>							
	Total. Add lines 1-5							
, ,	Amounts included on lines 1, 2, 3 received from disqualified							
	persons					İ		
t	Amounts included on lines 2							
	and 3 received from other than disqualified persons that				1			
	exceed the greater of 1% of							
	the total of lines 9, 10c, 11, and 12 for the year or \$5,000						1	
	Add lines 7a and 7b							
8	Public support (Subtract line							
•	7c from line 6)	के देश हैं के किस के किस के किस के किस की किस की किस की किस की किस की किस की किस की किस की किस की किस की किस क किस की किस क	METALLER OF THE STREET	obinsperanteur	PARTERINA LANGUES	5.75.044.55.182	15-00	
Sec	tion B. Total Support	1754年184日 1860 - 184日 1840 -	ANALYSIN TO THE STATE OF	<u>Marian de la properción de la constanta de la constanta de la constanta de la constanta de la constanta de la</u>	ELTER CHARLE		Failti	
					1			
	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008		(f) Total
	Amounts from line 6 Gross income from interest,							
102	dividends, payments received							
	on securities loans, rents.							
	royalties and income form similar sources						ļ	
ı								
L	Unrelated business taxable income (less section 511							
	taxes) from businesses							
	acquired after June 30, 1975							
	Add lines 10a and 10b							
11	Net income from unrelated business activities not included inline 10b,							
	whether or not the business is				İ		j	
	regularly carried on							
12	Other income Do not include gain or loss from the sale of						1	
	capital assets (Explain in							
	Part IV)	W						
13	Total support. (add ins 9, 10c, 11, and 12)	40000000000000000000000000000000000000	医抗胆管性	经来现的特殊			感到	
14	First five years. If the Form 990 organization, check this box and	is for the organiza	ation's first, secon	nd, third, fourth,	or fifth tax year a	s a section 5	01(c)(3)	▶□
Sec	tion C. Computation of Pu		lavaanta na					
				10 1 (0)		 -		
	Public support percentage for 20)	}	15	<u>%</u>
500	Public support percentage from	2007 Schedule A,	Part IV-A, line 2/	' g		1	16	%
	tion D. Computation of Inv						 -	
17	, and the periodicago i				ımn (f)).	<u>ļ</u>	17	%_
18	Investment income percentage t					Į	18	%
19 a	33-1/3 support tests - 2008. If the	organization did not	check the box on I	ine 14, and line 15	is more than 33-1/3	3%, and line 1	7 is not	. [
	more than 33-1/3%, check this t	oox and stop here	. The organization	i qualifies as a p	ublicly supported	organization		
ŀ	o 33-1/3 support tests — 2007. If t is not more than 33-1/3%, check	he organization di	d not check a box	on line 14 or 19	a, and line 16 is i	more than 33	1-1/3%, a	and line 18
		vina novigina 210	h nere, the ordan	ization qualines	as a publicly supp	orieu organi.	Lation	· I I
20	Private foundation If the organ	ization did not cho	ck a hov on line	14 19a or 19h	check this hav and	d see instruc	tions	▶ □

Schedule A	(Form 990 c	or 990-EZ)	2008 At	ollene	Christ	ian Sc	chools,	Inc.		75-213752	23	Page 4
Pantival	Part II, In	ental Info ie 17a or	17b; or	. Comple Part III, I	te this i line 12	part to p Provide	provide the any oth	ne explan er additio	ation requi nal informa	75-213752 red by Part ation (see ii	II, line 1(nstruction), 1S)
•						-						
												
				- -								
						- -						
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SCHEDULE D (Form 990)

Supplemental Financial Statements

2008

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

140 Openito Publica 14 Employer Identification number

	lene Christian Schools, Inc.		75-2137 <u>523</u>
	Organizations Maintaining Donor the organization answered 'Yes' to	r Advised Funds or Other Similar Fur o Form 990, Part IV, line 6	nds or Accounts Complete If
2	Total number at end of year Aggregate contributions to (during year)	(a) Donor advised funds	(b) Funds and other accounts
	Aggregate grants from (during year) Aggregate value at end of year		
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the assets held in d to the organization's exclusive legal control?	lonor advised Yes No
	Did the organization inform all grantees, dono used only for charitable purposes and not for impermissible private benefit??	the benefit of the donor or donor advisor or otl	her Yes No
	划 Conservation Easements Comple		to Form 990, Part IV, line 7
	Purpose(s) of conservation easements held by Preservation of land for public use (e.g., r.) Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held of the tax year	ecreation or pleasure) Preservation Preservation	of an historically important land area of certified historic structure m of a conservation easement on the last day
b c d 3	Total number of conservation easements Total acreage restricted by conservation ease Number of conservation easements on a certi Number of conservation easements included i Number of conservation easements modified, year Number of states where property subject to conservation.	fied historic structure included in (a) n (c) acquired after 8/17/06 transferred, released, extinguished, or termina	Held at the End of the Year 2a 2b 2c 2d ated by the organization during the taxable
5	Does the organization have a written policy reenforcement of the conservation easement it	holds?	∐ Yes ☐ No
6 7	Staff or volunteer hours devoted to monitoring Amount of expenses incurred in monitoring, ii		
8	Does each conservation easement reported o $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	n line 2(d) above satisfy the requirements of s	ection Yes No
9	In Part XIV, describe how the organization report include, if applicable, the text of the footnote conservation easements	to the organization's financial statements that	describes the organization's accounting for
Par	Complete if the organization ans	ctions of Art, Historical Treasures, o wered 'Yes' to Form 990, Part IV, line	r Other Similar Assets 8
1 a	If the organization elected, as permitted unde treasures, or other similar assets held for pub the text of the footnote to its financial statemi	lic exhibition, education, or research in further	nent and balance sheet works of art, historical rance of public service, provide, in Part XIV,
b	olf the organization elected, as permitted unde treasures, or other similar assets held for pub amounts relating to these items	ilic exhibition, education, or research in further	ment and balance sheet works of art, historical rance of public service, provide the following
	(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 a amounts required to be reported under SFAS	116 relating to these items	
	a Revenues included in Form 990, Part VIII, line	e 1	* \$
t	Assets included in Form 990, Part X		► \$

Schedule D (Form 990) 2008 Abile	ne Christ	ian	Schools,	Inc.			75-213	7523		Page 2
Rartll। Organizations Maintai	ning Collec	tions	of Art, Hist	orica	l Treasures, o	r Other Si			ontinu	ed)
3 Using the organization's accession that apply)										
a Public exhibition			d Loan	or exc	change programs					
b Scholarly research			e Other							
c Preservation for future genera	ations									
4 Provide a description of the organ Part XIV		ctions	and explain ho	w they	further the organ	nization's ex	empt purpos	ie in		
5 During the year, did the organizal assets to be sold to raise funds re	ather than to b	e mair	ntained as part	of the	organization's co	llection?		Yes		No
Part V. Trust, Escrow and Cu IV, line 9, or reported	stodial Arra an amount	angen on Fo	nents Comp orm 990, Par	lete il t X, I	f organization ine 21	answered	'Yes' to F	orm 9	90, Pa	art
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian	, or oth	ner intermediar	y for c	ontributions or otl	her assets n	ot f	Yes	_	No
b If 'Yes,' explain the arrangement	in Part XIV ar	nd com	nlete the follow	una tal	hle		l		L	7140
and the arrangement	iii ait xiv ai	iu com	piete the lonow	ring tai	bie	[·	Amount		
c Beginning balance						1 c		AIIIOUIII		
d Additions during the year						1 d				
e Distributions during the year						1 e				
f Ending balance						11				
2a Did the organization include an a	mount on Forr	n 990.	Part X, line 21	7		<u> </u>		Yes	Т	No
b If 'Yes,' explain the arrangement		•	•				(_	_
PartiVi Endowment Funds Cor		ganıza	ation answer	red 'Y	es' to Form 99	90, Part IV	/, line 10			
	(a) Current y		(b) Prior yea	ar	(c) Two years bac	k (d) Thr	ee years back	(e) F	our years	back
1a Beginning of year balance	466,	875.	於原於開始組織	14.14	设建设建设设置	in sings				光色的
b Contributions	6,	251.	养金融器的	建物	和政策的關係的	到一种的	思想的問	制物類	旅館	70 TO
c Investment earnings or losses			部學學學的	学近常		歌 网络	产的自然的	被缺	網網	提製製料
d Grants or scholarships	-		學的學術	8	经过程的 在外面	是結構認為必	华加州	STATE OF	學學院	学活用
e Other expenditures for facilities and programs										High High
f Administrative expenses			以其中的			可能是在其外	"首即"清清"		强海道	E VE YEY
g End of year balance	473,		No. of the last	的試練	是特別的的	的	建筑等。1987年		等的	A CALL
2 Provide the estimated percentage		nd bala	ance held as							
a Board designated or quasi-endow	rment ►		%							
b Permanent endowment ►	%									
c Term endowment ►	[%]									
3a Are there endowment funds not in organization by	n the possessi	on of t	he organizatior	n that a	are held and adm	ınıstered for	the	ſ	Yes	No
(i) unrelated organizations								3a(ı)		X
(II) related organizations								3a(II)		X
b If 'Yes' to 3a(II), are the related o	rganizations li	sted as	s required on S	chedu	le R?			3b		X
4 Describe in Part XIV the intended	uses of the o	rganiza	ation's endown	nent fu	nds					
Part VI Investments—Land, B	uildings, ar	ıd Eqi	uipment. Se	e For	m 990, Part X	., line 10				
Description of investment		a) Cos	t or other basis vestment)	(b)) Cost or other basis (other)	(c) Depr		(d) E	Book Va	lue
1a Land					223,700.	国际报	40 1 1 2 20 1 1 1		223,	700.
b Buildings					1,896,231.	1,50	50,708.		335,	523.
c Leasehold improvements					123,705.		16,203.		77,	502.
d Equipment					65,735.		15,694.		20,	041.
e Other					70,317.		50,429.		9,	,888.
Total. Add lines la-le (Column (d) sho	ould equal For	m 990,	Part X, columi	n (B),	line 10(c))		-		666,	654.

BAA

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 Abilene Christian	Schools, Inc.	75-	2137523 Page 3
PartiVIII Investments-Other Securities See Fo	orm 990, Part X, III	nė 12 N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	valuation market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
	•		
		<u> </u>	
Total (Column (b) should equal Form 990 Part X, col (B) line 12)		经验的国际公司的国际的	18年10年18年18日
Part VIII Investments-Program Related (See I			.,
(a) Description of investment type	(b) Book value	(c) Method of v Cost or end-of-year	valuation
		Cost of end-of-year	market value
			······································
Total Column (b)(should equal Form 990, Part X, Col (B) line 13)		· · · · · · · · · · · · · · · · · · ·	Chronical Phone Car
Part X Other Assets (See Form 990, Part X,	line 15) N/I		Compagnition for the Control of the
	escription		(b) Book value
Total. Column (b) Total (should equal Form 990, Part X, co	ol (B), line 15)		•
PartX Other Liabilities (See Form 990, Part	X, line 25)		
(a) Description of Liability	(b) Amount		
Federal Income Taxes			
Deferred Revenue	355,4	77. [李] [] [] [] [] [] [] [] [] []	
Payroll liabilities	16,6	63.	
	_,		
Total Column (b) Total (should equal Form 990, Part X, col (B) line 25)	► 372,1	40 200	
In Part XIV provide the text of the feetbate to the escape	alianta financial atata-	ante that concrete the organization's	hability for uncortain tay

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

Paint XII Reconciliation of Change in Net Assets from Form 990 to Financial Statements 1 Total revenue (Form 990, Part VIII, column (A), line 12)	Ange in Net Assets from Form 990 to Financial Statements	•		
Paint XII Reconciliation of Change in Net Assets from Form 990 to Financial Statements 1 Total revenue (Form 990, Part VIII, column (A), line 12)	Ange in Net Assets from Form 990 to Financial Statements	Schedule D (Form 990) 2008 Abilene Christian Schools, In	ic. 75-21	.37523 Page 4
2 , Total expenses (Form 990, Part IX, column (A), line 25) 3 Excess or (deficit) for the year Subtract line 2 from line 1 5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (net) Add lines 4-8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 11 Total revenue, gains, and other support per audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investments expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12) 5 2,011,9 Part XIIII Reconcilitation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d 2e c Losses reported on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d 2e c Losses reported on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d	1, 936, 487.	PartXI Reconciliation of Change in Net Assets from Form 9	990 to Financial Statements	
3 Excess or (deficit) for the year Subtract line 2 from line 1 4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (net) Add lines 4.8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 75, 4 ###################################	Subtract line 2 from line 1	1 Total revenue (Form 990, Part VIII, column (A), line 12)		2,011,984.
4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (net) Add lines 4-8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 75, 4 Reconcilitation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 1 2,011,9 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investments expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12) PREVIOUS Reconcilitation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 1 1, 936, 4 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments 2 La Subtract line 2 and 2 and 3 and 4 and 3 and 4 and	n investments critities les 4-8 per financial statements Combine lines 3 and 9 per financial statements With Revenue per Return support per audited financial statements not on Form 990, Part VIII, line 12 nents critities 2a	2 , Total expenses (Form 990, Part IX, column (A), line 25)		1,936,487.
5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (net) Add lines 4-8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 75, 41 Part XIII/ Reconcilitation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 2 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investments expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12) 5 2, 011, 9 Part XIII/ Reconcilitation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d	Describitions Descri	3 Excess or (deficit) for the year Subtract line 2 from line 1		75,497.
6 Investment expenses 7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (net) Add lines 4-8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 75, 4 Part XIII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a investments expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d	See 1-8 Per financial statements Combine lines 3 and 9 75, 497.	4 Net unrealized gains (losses) on investments		
7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (net) Add lines 4-8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 75, 4' Part XILIA Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investments expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12) 5 Quality Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d	per financial statements Combine lines 3 and 9 Evenue per Audited Financial Statements With Revenue per Return support per audited financial statements not on Form 990, Part VIII, line 12 nents culties 2a -53,128. 2b 2c 2d 2c	5 Donated services and use of facilities		
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a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 2,011,9 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investments expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12) 5 2,011,9 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d	2a		s <u>1</u>	1,958,856.
b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 2,011,9 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investments expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12) 5 2,011,9 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d	2b 2c 2d 2e -53,128 3 2,011,984 3 2,011,984 2e -53,128 3 2,011,984 3 2,011,984 3 2,011,984 3 2,011,984 3 2,011,984 3 2,011,984 3 2,011,984 3 2,011,984 3 3 2,011,984 3 3 2,011,984 3 3 3 3 3 3 3 3 3		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
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d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investments expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d	2d 2e -53,128 3 2,011,984		2b (B)	
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d Other (Describe in Part XIV) e Add lines 2a through 2d 2e	2d 2e 3 1, 936, 487. I, Part IX, line 25, but not on line 1: 4a 4b 4c 4c (This should equal Form 990, Part I, line 18) 5 1, 936, 487. Interpretation 2 2e 3 1, 936, 487. Interpretation 2 2e 3 1, 936, 487.		1	
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	rmation scriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V,			
	scriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V,		1, line 18)	1,930,467.
PartXIV: Supplemental Information	scriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, III, lines 2d and 4b, and Part XIII, lines 2d and 4b	readily ival supplemental information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V	II, lines 2d and 4b, and Part XIII, lines 2d and 4b	Complete this part to provide the descriptions required for Part II, lines 3, 5,	and 9, Part III, lines 1a and 4, Part IV, line	es 1b and 2b, Part V,
line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b		line 4, Part X, Part XI, line 8, Part XII, lines 20 and 4b, and Part XIII, lines 20	d and 4b	
	TEEA3304L 12/23/08 Schedule D (Form 990) 2008	BAA TEEA3304L 12/	/23/08 Sc	hedule D (Form 990) 2008

Schedule D (FORM 990) 2008			rage	ာ
Rant/XIV: Supplemental Information (con	tınued) ·	•		_
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BAA

SCHEDULE E (Form 990 or 990-EZ)

Schools

OMB No 1545 0047

2008

ZUUO

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

48. Open to Publicity Inspection, Leave Inspecti

ιbi	lene Christian Schools, Inc.	75-2137523			
				YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its chaptering instrument, or in a resolution of its governing body?	arter, bylaws, other	1 39.66	X	ह्य- <u>स्ट</u> ा
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in catalogues, and other written communications with the public dealing with student admissions, progrand scholarships?	all its brochures, ams,	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast period of solicitation for students, or during the registration period if it had no solicitation program, if the policy known to all parts of the general community it serves? If 'Yes,' please describe If 'No', please If 'No', please If	n a way that makes	3	X	
	See Supplemental				
				1	
4	Does the organization maintain the following?		最為	13.7	Page 1
ä	a Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	X	
ı	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		4 b	Х	
	Copies of all catalogues, brochures, announcements, and other written communications to the public student admissions, programs, and scholarships?	c dealing with	4 c		
(d Copies of all material used by the organization or on its behalf to solicit contributions?	ta atalamant \	4 d		1.50
	If you answered 'No,' to any of the above, please explain (If you need more space, attach a separa				
_	Dan the assessment of the second to		港灣		
5	Does the organization discriminate by race in any way with respect to a Students' rights or privileges?		5 a	KRI	X
	b Admissions policies?		5 b		Х
	c Employment of faculty or administrative staff?		50		X
	d Scholarships or other financial assistance?		50	1	X
	e Educational policies?		5€	_	Х
	f Use of facilities?		5 f		Х
	g Athletic programs?		50	3	Х
	h Other extracurricular activities?		51	1	X
	If you answered 'Yes,' to any of the above, please explain (If you need more space, attach a separ	rate statement)	がある。		
6	a Does the organization receive any financial aid or assistance from a governmental agency?		6	a	X
	b Has the organization's right to such aid ever been revoked or suspended?		6	ь	X
	If you answered 'Yes,' to either line 6a or line b, please explain using an attached statement				
,	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation		7	X X	s servi

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545 0047

2008

Department of the Treasury Internal Revenue Service

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

Openito Public

Name of the organization Employer identification number						
Abilene Christian Schools	Abilene Christian Schools, Inc. 75-2137523					
Ra附級 Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17						
1 Indicate whether the organization	raised funds thi	rough any	of the foll	lowing activities Check	all that apply	
Mail solicitations				Solicitation of non-	government grants	
Email solicitations				Solicitation of gove	rnment grants	
Phone solicitations				X Special fundraising	events	
In-person solicitations						
2a Did the organization have written employees listed in Form 990, Pai	or oral agreement	ent with ar	ny individu	ral (including officers, d	rectors, trustees or ke	ey Yes XNo
b If 'Yes,' list the ten highest paid in compensated at least \$5,000 by the	idividuals or en	lities (fund	fraisers) n	oursuant to agreements	under which the fundi	
	To diguinzation	1	111010		(v) Amount paid to	
(1) Name of individual or entity (fundraiser)	(II) Activity	have custor	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
			}			
		1				
		ļ <u></u>				
		ļ				
		ļ				
				}		
	 					
	1	1	1			
Total			>			0.
					<u> </u>	
3 List all states in which the organiz or licensing	zation is registe	red or lice	nsed to so	olicit funds or has been	notified it is exempt f	rom registration
or neerising						
					 -	

Schedule G ((Form 990 or	990-EZ) 2008	Abilene	Christian	Schools.	Inc.

75-2137523

Page 2

1 7 41		reported more than \$15,000 on F	the organization a form 990-EZ, line 6	riswered Yes to Fo a. List events with	orm 990, Part IV, II gross receipts grea	ne 18, or ater than \$5,000
8.		•	(a) Event #1 Auction (event type)	(b) Event #2 Magazine Sales (event type)	(c) Other Events 2 (total number)	(d) Total Events (Add col (a) through col (c))
MCZM<	1	Gross receipts	38,627.	24,065.	41,971.	104,663.
Ē	2	Less Charitable contributions				
	3	Gross revenue (line 1 minus line 2)	38,627.	24,065.	41,971.	104,663.
	4	Cash prizes				
D I R E C T	5	Non-cash prizes				
	6	Rent/facility costs				
EXPENSES	7	Other direct expenses	7,735.	12,957.	21,751.	42,443.
	9	Direct expense summary Add lines 4- ti Net income summary Combine lines 3 a	ind 8 in column (d)		-	42,443. 62,220.
Par	itšiiii	Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye	s' to Form 990, Pai	rt IV, line 19, or re	ported more than
R E V E N U E			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
E	1	Gross revenue				
_	2	Cash prizes				
D P E N S T S	3	Non-cash prizes				
Č S T E S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	Yes%	
	7	Direct expense summary Add lines 2 thr	rough 5 in column (d)		-	
	8	Net gaming income summary Combine	lines 1 and 7 in column	(d)	•	
ā	a Is th	er the state(s) in which the organization of ne organization licensed to operate gaming lo,' Explain				YES NO 9a
10 a	– – a Wer	e any of the organization's gaming license	es revoked, suspended	or terminated during th		j
1	۱f 'Y 	'es,' Explain				
11 12	ls th	es the organization operate gaming activitions to organization a grantor, beneficiary or tr		ember of a partnership	or other entity formed t	11
BAA	adm	ninister charitable gaming?	TFF A 3702L			m 990 or 990-EZ) 2008

Schedule G (Form 990 or 990-EZ) 2008 Abilene Chr	ristian Schools, Inc.	75-213752	23 <u>Page 3</u>
			YES NO
13 Indicate the percentage of gaming activity operated in	ın		自由第二条 图
a The organization's facility		13a %	
b An outside facility		13b %	
14 Provide the name and address of the person who pro	epares the organization's gaming/special	events books and records	
Name F		_	
Address -			心理性翻译 。
			march of the state
15a Does the organization have a contact with a third pa			15a
b If 'Yes,' enter the amount of gaming revenue receive		and the amount	
of gaming revenue retained by the third party $\$$			
c If 'Yes,' enter name and address			
Name •			
A.1.1			
Address -			
16 60			
16 Gaming manager information			
Name ►			
Name			
Gaming manager compensation ► \$			
Description of services provided			
Director/officer Employee	Independent contractor		
17 Mandatory distributions			
a is the organization required under state law to make	e charitable distributions from the gaming	proceeds to retain the	
state gaming license?	c changes distributions from the garming	P. 222300 to 1910 110	17a
b Enter the amount of distributions required under sta	ate law distributed to other exempt organi	zations or spent in the	[2] 医乳腺红
organization's own exempt activities during the tax	year ►\$		图的 医原性
BAA	TEEA3703L 07/18/08	Schedule G (Form 9	90 or 990-EZ) 2008

SCHEDULE O (Form 990)

Supplemental Information to Form 990

2008

Department of the Treasury Internal Revenue Service Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Rublic

Name of the organization	Employer identification number
Abilene Christian Schools, Inc.	75-2137523
Form 990, Part III, Line 1 - Organization Mission	
Abilene_Christian_Schools_seeks_to_ensure_an_atmosphere_in_whice	ch students can grow
in_wisdom, in stature, and in favor with God and man. The scho	ool seeks development
of_moral_excellence_knowledge,_self-control,_perserverance_gg	odliness, brotherly
kindness, and love.	
Form 990, Part VI, Line 10 - Form 990 Review Process	
The Board finance committee reviews the Form 990.	
,	

2008

Schedule E - Supplemental Information

Page 2

Client 140

Abilene Christian Schools, Inc.

75-2137523

11/29/10

02 29PM

Schedule E, Line 3
Racially Nondiscriminatory Policy Publicized

Abilene Christian Schools admit students of any race, color, sex, religion, national and ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students of the school. It does not discriminate on the basis of race, color, sex, religion, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

Form **8868** (Rev April 2008)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

If you are	filing for an Automatic 3-Mor	th Extension, complete only Part I and check this bo	x ► X
If you are	filing for an Additional (Not A	utomatic) 3-Month Extension, complete only Part II	(on page 2 of this form)
Do not comp	olete Part II unless you have al	eady been granted an automatic 3-month extension	on a previously filed Form 8868
Paritime /	Automatic 3-Month Exte	nsion of Time. Only submit original (no cop	ues peeded)
		, (o.)	
A corporation	required to file Form 990-T a	nd requesting an automatic 6-month extension — che	ck this box and complete Part I only . >
	porations (including 1120-C file	rs), partnerships, REMICS, and trusts must use Form	
Electronic Fi	iling (e-file). Generally, you can	electropically file Form 8868 if you want a 3-month	automatic extension of time to file and of the
returns noted the additiona Form 990-T. this form, vis	below (6 months for a corpor I (not automatic) 3-month exte Instead, you must submit the int www.irs gov/efile and click o	n electronically file Form 8868 if you want a 3-month ation required to file Form 990-T). However, you can insion or (2) you file Forms 990-BL, 6069, or 8870, grully completed and signed page 2 (Part II) of Form 8 in e-file for Charities & Nonprofits.	out file Form 8868 electronically if (1) you want oup returns, or a composite or consolidated 868 For more details on the electronic filing of
	Name of Exempt Organization		Employer identification number
Type or			, ,
print	Abilene Christian	Schools, Inc	75-2137523
ile by the	Number, street, and room or suite num	per. If a P O box, see instructions.	13-213/323
due date for filing your return. See	401 Cypress St #303		
return. See Instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions		
Charletena e	Abilene, TX 79601	rrate application for each return):	<u> </u>
X Form 990	•		□ F. 4700
			Form 4720
		Form 5227	
 -			Form 6069
Form 990	Form 990-PF Form 1041-A Form		Form 8870
Telephoni If the org If this is check this the exter I I reque	for a Group Return, enter the cases box is box is if it is for part insion will cover. ist an automatic 3-month (6 magnetic forms)	FAX No. ► 325-672-1262 fice or place of business in the United States, check to organization's four digit Group Exemption Number (Gof the group, check this box. ► and attach a list on this for a corporation required to file Form 990-T) exile the exempt organization return for the organization	his box
The ex	tension is for the organization'	s return for:	
▶ [calendar year 20 or		
► <u>X</u>	tax year beginning 8/01	$_{-}$, 20 08 , and ending $7/31$, 20	_09_
	tax year is for less than 12 mo		return Change in accounting period
3a If this a	application is for Form 990-BL, undable credits. See instructio	990-PF, 990-T, 4720, or 6069, enter the tentative tax	(, less any 3a \$ 0.
b If this a made	application is for Form 990-PF Include any prior year overpay	or 990-T, enter any refundable credits and estimated ment allowed as a credit.	tax payments 3b \$ 0.
c Baland deposi See in	ce Due. Subtract line 3b from li t with FTD coupon or, if require structions.	ne 3a Include your payment with this form, or, if reqed, by using EFTPS (Electronic Federal Tax Payment	uired, System) 3c \$ 0.
Caution. If y payment ins	ou are going to make an elect tructions.	ronic fund withdrawal with this Form 8868, see Form	
BAA For Pr	ivacy Act and Paperwork Red	uction Act Notice, see instructions.	Form 8868 (Rev. 4-2008)