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Form **990-EZ**Department of the Treasury  
Internal Revenue Service**Short Form  
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)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

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

OMB No 1545-1150

**2008****Open to Public  
Inspection**

**A For the 2008 calendar year, or tax year beginning** August 1, 2008, and ending July 31, 20 09

**B** Check if applicable:  
☐ Address change  
☐ Name change  
☐ Initial return  
☐ Termination  
☐ Amended return  
☐ Application pending

**C Name of organization**  
**Umpqua Valley Christian Schools**  
 Number and street (or P O box, if mail is not delivered to street address) Room/suite  
**359 Roberts Creek Road**  
 City or town, state or country, and ZIP + 4  
**Roseburg, OR 97471**

**D Employer identification number**  
**93 0951533**

**E Telephone number**  
**( 541 ) 679-4964**

**F Group Exemption Number** ▶

**G Accounting method** ☐ Cash ☒ Accrual  
 Other (specify) ▶

**H Check** ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

**I Website:** ▶ www.uvcs.org

**J Organization type** (check only one) — ☒ 501(c) ( 3 ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

**K Check** ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ** ▶ \$ **945,917.**

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	136,507.
	2	Program service revenue including government fees and contracts	2	742,176.
	3	Membership dues and assessments	3	0.
	4	Investment income	4	4,497.
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	a	Gross revenue (not including \$ <u>20,000.</u> of contributions reported on line 1)	6a	56,446.
b	Less: direct expenses other than fundraising expenses	6b	0.	
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	56,446.	
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe ▶ <u>Statement 2</u> )	8	6,291.	
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8. ▶	9	945,917.	
Expenses	10	Grants and similar amounts paid (attach schedule) <u>Statement 2</u>	10	49,667.
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	625,558.
	13	Professional fees and other payments to independent contractors	13	60.
	14	Occupancy, rent, utilities, and maintenance	14	71,672.
	15	Printing, publications, postage, and shipping	15	6,197.
	16	Other expenses (describe ▶ <u>Statement 3</u> )	16	314,736.
	17	<b>Total expenses.</b> Add lines 10 through 16. ▶	17	1,067,890.
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<121,973.>
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	1,173,633.
	20	Other changes in net assets or fund balances (attach explanation) <u>Statement 4</u>	20	<477.>
	21	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20. ▶	21	1,173,156.

**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	715,971.	22 460,446.
23 Land and buildings	555,549.	23 681,229.
24 Other assets (describe ▶ )	0.	24 0.
25 <b>Total assets</b>	1,271,520.	25 1,141,675.
26 <b>Total liabilities</b> (describe ▶ <u>Statement 5</u> )	98,364.	26 90,491.
27 <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	1,173,156.	27 1,051,184.

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

Cat. No 106421

Form 990-EZ (2008)

SCANNED AUG 03 2010

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**Part III**    **Statement of Program Service Accomplishments** (See the instructions for Part III.)

## Expenses

**What is the organization's primary exempt purpose? Provide Elementary & Secondary Education to Children**  
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others )

28 Expenses to operate the Christian schools for the education of Elementary & Secondary children.

(Grants \$ **49,367.**) If this amount includes foreign grants, check here ☐

28a	653,639.
-----	----------

## 29

(Grants \$ ) If this amount includes foreign grants, check here ☐

29a

## 30

(Grants \$ ) If this amount includes foreign grants, check here ☐

30a

**31** Other program services (attach schedule)

(Grants \$ ) If this amount includes foreign grants, check here ☐

31a

**32 Total program service expenses** (add lines 28a through 31a)

32

**Part IV** List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

[illegible]

**Part V Other Information** (Note the statement requirements in the instructions for Part VI.)

	Yes	No
<b>33</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		✓
<b>34</b> Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		✓
<b>35</b> If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
<b>a</b> Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		✓
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		
<b>36</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		✓
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <b>37a</b>		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year?		✓
<b>38a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		✓
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved <b>38b</b>		
<b>39</b> Section 501(c)(7) organizations. Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9 <b>39a</b>		
<b>b</b> Gross receipts, included on line 9, for public use of club facilities <b>39b</b>		
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ <u>0.</u> ; section 4912 ▶ <u>0.</u> ; section 4955 ▶ <u>0.</u>		
<b>b</b> Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		✓
<b>c</b> Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ <u>0.</u>		
<b>d</b> Enter amount of tax on line 40c reimbursed by the organization ▶ <u>0.</u>		
<b>e</b> All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.		✓
<b>41</b> List the states with which a copy of this return is filed. ▶ <u>Oregon</u>		
<b>42a</b> The books are in care of ▶ <u>Umpqua Valley Christian Schools</u> Telephone no. ▶ <u>( 541 ) 679-4964</u> Located at ▶ <u>359 Roberts Creek Road</u> ZIP + 4 ▶ <u>97471</u>		
<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</b>	Yes	No
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶ _____		✓
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <u>43</u> <input type="checkbox"/>		
<b>44</b> Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
<b>45</b> Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓

**Part VI Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

- 46** 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
- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48** Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a** Did the organization make any transfers to an exempt non-charitable related organization?
- b** If "Yes," was the related organization(s) a section 527 organization?
- 50** Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

	Yes	No
<b>46</b>		<input checked="" type="checkbox"/>
<b>47</b>		<input checked="" type="checkbox"/>
<b>48</b>	<input checked="" type="checkbox"/>	
<b>49a</b>		<input checked="" type="checkbox"/>
<b>49b</b>		

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$100,000	None			

- 51** Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		
Total number of other independent contractors each receiving over \$100,000	None	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer

Finance Chairman

Type or print name and title

Ina M. Jackson

Date

6/28/10

**Paid Preparer's Use Only**

Preparer's signature

Firm's name (or yours if self-employed), address, and ZIP + 4

Date

Check if self-employed ☐

Preparer's Identifying Number (See instructions)

EIN

Phone no ( )

May the IRS discuss this return with the preparer shown above? See instructions

☐ Yes ☐ No

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

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

OMB No. 1545-0047

**2008**

**Open to Public Inspection**

Name of the organization

Umpqua Valley Christian Schools

Employer identification number

93 0951533

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☒ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I      b ☐ Type II      c ☐ Type III—Functionally integrated      d ☐ Type III—Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

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

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

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

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

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

Department of the Treasury  
Internal Revenue Service

**Schools**

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

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

Name of the organization

**Umpqua Valley Christian Schools**

Employer identification number

**93 0951533**

- 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? . . . . .
- 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? . . . . .
- 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain  
The schools non-discriminatory policy is published in the local newspaper.

- 4 Does the organization maintain the following?
- a Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .
- b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .
- c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .
- d Copies of all material used by the organization or on its behalf to solicit contributions? . . . . .  
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)

- 5 Does the organization discriminate by race in any way with respect to:

- a Students' rights or privileges? . . . . .
- b Admissions policies? . . . . .
- c Employment of faculty or administrative staff? . . . . .
- d Scholarships or other financial assistance? . . . . .
- e Educational policies? . . . . .
- f Use of facilities? . . . . .
- g Athletic programs? . . . . .
- h Other extracurricular activities? . . . . .  
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement)

- 6a Does the organization receive any financial aid or assistance from a governmental agency? . . . . .
- b Has the organization's right to such aid ever been revoked or suspended? . . . . .  
If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement.
- 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

	YES	NO
1	✓	
2	✓	
3	✓	
4a	✓	
4b	✓	
4c	✓	
4d	✓	
5a		✓
5b		✓
5c		✓
5d		✓
5e		✓
5f		✓
5g		✓
5h		✓
6a		✓
6b		✓
7	✓	

Department of the Treasury  
Internal Revenue Service

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

OMB No 1545-0047

2008

**Open To Public Inspection**

Name of the organization

**Umpqua Valley Christian Schools**

Employer identification number

93

**0951533**

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

- a ☐ Mail solicitations  
b ☐ Email solicitations  
c ☐ Phone solicitations  
d ☐ In-person solicitations  
e ☐ Solicitation of non-government grants  
f ☐ Solicitation of government grants  
g ☐ Special fundraising events

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total . . . . .						

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



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

		(a) Event #1 <b>Antique Show</b> (event type)	(b) Event #2 <b>Spring Carnival</b> (event type)	(c) Other Events <b>None</b> (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	<b>1</b> Gross receipts . . . . .	23,383.	6,139.		29,522.
	<b>2</b> Less: Charitable contributions . . . . .	<20,000.>	<0.>		<20,000.>
	<b>3</b> Gross revenue (line 1 minus line 2) . . . . .	3,383.	6,139.		9,522.
Direct Expenses	<b>4</b> Cash prizes . . . . .	0.	0.		0.
	<b>5</b> Non-cash prizes . . . . .	0.	690.		690.
	<b>6</b> Rent/facility costs . . . . .	6,250.	333.		6,583.
	<b>7</b> Other direct expenses . . . . .	153.	0.		153.
	<b>8</b> Direct expense summary. Add lines 4 through 7 in column (d) . . . . .				( 7,426. )
<b>9</b> Net income summary. Combine lines 3 and 8 in column (d) . . . . .					2,096.

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	<b>1</b> Gross revenue . . . . .				
Direct Expenses	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Non-cash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
	<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) . . . . .					( )
<b>8</b> Net gaming income summary. Combine lines 1 and 7 in column (d) . . . . .					

		Yes	No
<b>9</b>	Enter the state(s) in which the organization operates gaming activities: _____		
<b>a</b>	Is the organization licensed to operate gaming activities in each of these states? . . . . .		
<b>b</b>	If "No," Explain: _____		
<b>10a</b>	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .		
<b>b</b>	If "Yes," Explain: _____		
<b>11</b>	Does the organization operate gaming activities with nonmembers? . . . . .		
<b>12</b>	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . .		

**Umpqua Valley Christian Schools**

**93-0951533**

**Form 990-EZ**

**Other Revenue**

**Statement 1**

<b>Description</b>	<b>Amount</b>
Late Fees	6,126
NSF Fees	165
<b>Total to Form 990-EZ, Part I, Line 8</b>	<b>6,291</b>

**Umpqua Valley Christian Schools**

**93-0951533**

**Form 990-EZ**

**Grants & Similar Amounts Paid**

**Statement 2**

<u>Description</u>	<u>Amount</u>
Awards & Grants to Other Organizations	450
Specific Assistance to Individuals (Athletic Scholarship)	150
Tuition Assistance to Individuals	22,622
Grant Assistance to Individuals (Tuition Assistance*)	26,445
<b>Total to Form 990-EZ, Part I, Line 10</b>	<b><u>49,667</u></b>

\*Private donation to provide one-time tuition assistance to families impacted by economy during 2008-09 school year.

**Umpqua Valley Christian Schools**

**93-0951533**

**Form 990-EZ**

**Other Expenses**

**Statement 3**

Description	( A )	( B )	( C )	( D )
	Total	Program Services	Management and General	Fundraising
Advertising	9,869	80	9,717	72
Bank Charges	5,282	65	4,965	252
Conference, Meeting & Seminars	1,660	-	1,660	-
Depreciation*	65,864	-	65,864	-
Dues & Subscriptions	824	-	824	-
Equipment Maintenance & Repairs	1,981	25	1,956	-
Gifts & Appreciation Expense	806	-	576	230
Insurance	17,073	-	17,073	-
License and Fees	1,286	-	1,286	-
Meals	1,510	-	1,424	86
Office Supplies General	12,157	-	12,157	-
Software & Computer	2,643	-	2,643	-
Transportation	12,898	-	12,898	-
Travel & Lodging	3,106	1,010	2,096	-
Fundraising	36,878	5,096	-	31,782
Athletic Expense	37,398	37,398	-	-
Instruction and Education	75,515	72,540	2,573	402
Music & Band	2,446	2,446	-	-
School Program (Concerts, Ceremonies, etc)	5,080	4,815	-	265
Student Council & Class Expense	13,230	13,127	-	103
Yearbook	7,230	7,230	-	-
<b>Total to Form 990-EZ, Line 16</b>	<b>314,736</b>	<b>143,832</b>	<b>137,712</b>	<b>33,192</b>

\*Depreciation schedule attached

Federal 990-EZ Depreciation Report, Page 1  
Regular Tax

for All Returns - 2009

Statement 3

Description	Date Acquired	Method	Life	Cost	Cost Bus%	Reduction in Basis	Basis for Depreciation	Accum Depreciation	Amount of Depreciation
1 Small Buses	1/1/1993	ADS	5 0	3,621 00	100 00		3,621 00	3,621 00	-
1 Small Bus	1/1/1993	ADS	5 0	2,875 00	100 00		2,875 00	2,875 00	-
Van	5/1/1991	ADS	7 0	15,643 00	100 00		15,643 00	15,643 00	-
Modular 17	10/1/1989	SL	31 5	4,000 00	100 00		4,000 00	2,312 00	127 00
Modular	7/1/1991	SL	31 5	37,645 00	100 00		37,645 00	20,863 00	1,195 00
Modular EQ T2	2/1/1992	200DB	7 0	4,818 00	100 00		4,818 00	4,818 00	-
Modular T7	8/1/1994	SL	31 5	4,505 00	100 00		4,505 00	1,936 00	143 00
Building T7	9/1/1995	SL	31 5	128,722 00	100 00		128,722 00	50,228 00	4,086 00
Land	9/1/1995	L		31,050 00			31,050 00	-	-
Modular	8/1/1998	SL	27 5	20,000 00	100 00		20,000 00	6,036 00	727 00
Land	8/1/1998	L		50,000 00			50,000 00	-	-
T7 Improvements	9/1/1999	SL	31 5	34,985 00	100 00		34,985 00	8,888 00	1,111 00
Durham Bus	8/21/2000	200DB	5 0	5,300 00	100 00		5,300 00	5,300 00	-
Bus	11/21/2000	200DB	5 0	8,971 00	100 00		8,971 00	8,971 00	-
2 Buses	10/29/2001	HY SL	5 0	3,200 00	100 00		3,200 00	3,200 00	-
Royal Copier	10/28/2002	200DB	5 0	6,620 00	100 00		6,620 00	6,620 00	-
Copier (Elementary)	12/2/2003	200DB	5 0	5,200 00	100 00		5,200 00	5,200 00	-
Playground Equipment	1/7/2004	200DB	5 0	16,247 00	100 00		16,247 00	16,247 00	-
Computer	4/8/2004	200DB	5 0	804 00	100 00		804 00	804 00	-
Dell Computer	6/14/2004	200DB	5 0	969 00	100 00		969 00	969 00	-
Compview Projectors (2)	9/24/2004	200DB	5 0	1,925 00	100 00		1,925 00	1,540 00	385 00
Dell Computers (4-Learning Ctr)	3/31/2005	200DB	5 0	1,996 00	100 00		1,996 00	1,596 00	399 00
2006 Blue Bird Bus	5/25/2005	200DB	5 0	81,005 00	100 00		81,005 00	48,603 00	16,201 00
HS Modular Improvements	1/20/2005	SL	27 5	4,720 00	100 00		4,720 00	688 00	172 00
MBS Modular #1, #2, #3 (Elementary)	7/25/2005	SL	27 5	217,451 00	100 00		217,451 00	31,628 00	7,907 00
Elementary Lot Improvements	7/25/2005	SL	27 5	30,415 00	100 00		30,415 00	4,424 00	1,106 00
Phone System (Elementary)	8/2/2005	200DB	5 0	518 00	100 00		518 00	312 00	104 00
Office Equipment	9/1/2005	200DB	5 0	529 00	100 00		529 00	318 00	106 00
Carpet - Leasehold Improvement (HS)	9/6/2005	SL	27 5	1,076 00	100 00		1,076 00	117 00	39 00
Computer	9/6/2005	200DB	5 0	668 00	100 00		668 00	402 00	134 00
HS Ramp & Deck	9/6/2005	SL	27 5	1,037 00	100 00		1,037 00	114 00	38 00
HS Locker Cement Pad	9/7/2005	SL	27 5	1,161 00	100 00		1,161 00	126 00	42 00
Computer (Homestudy)	9/15/2005	200DB	5 0	398 00	100 00		398 00	240 00	80 00
TV/DVD/VCR	9/27/2005	200DB	5 0	274 00	100 00		274 00	165 00	55 00
Projector	10/4/2005	200DB	5 0	1,475 00	100 00		1,475 00	885 00	295 00
MBS Modular #1, #2, #3 Setup (Elementary)	10/4/2005	SL	27 5	19,685 00	100 00		19,685 00	11,811 00	3,937 00
HS Lockers	11/4/2005	200DB	5 0	3,638 00	100 00		3,638 00	2,184 00	728 00
Elementary Campus Fencing	11/4/2005	SL	27 5	12,000 00	100 00		12,000 00	1,308 00	436 00
Elementary Lot Improvements #2	11/28/2005	SL	27 5	11,542 00	100 00		11,542 00	1,260 00	420 00
Western Bus (14 Passenger)	1/26/2006	200DB	5 0	52,466 00	100 00		52,466 00	31,479 00	10,493 00
State Computers	8/22/2006	200DB	5 0	1,760 00	100 00		1,760 00	704 00	352 00
Cabinet/Answer Machine	10/11/2006	200DB	5 0	280 00	100 00		280 00	112 00	56 00
Fire Resistant File Cabinet	10/11/2006	200DB	5 0	770 00	100 00		770 00	308 00	154 00
ADT Alarm System - Elementary	11/7/2006	200DB	5 0	1,238 00	100 00		1,238 00	496 00	248 00
Fireproof File Cabinet	12/8/2006	200DB	5 0	1,419 00	100 00		1,419 00	568 00	284 00
Elementary Lot Improvements #3	5/30/2007	SL	27 5	5,508 00	100 00		5,508 00	400 00	200 00
Curriculum Shed	10/23/2007	200DB	7 0	3,000 00	100 00		3,000 00	1,200 00	1,200 00
Fireproof File Cabinet #2	1/29/2008	200DB	7 0	1,520 00	100 00		1,520 00	434 00	434 00
Land - Principle Loan Increase in Basis	5/29/2008	L		343 00	100 00		343 00	-	-
NSA2400 Sonic Wall	7/31/2008	200DB	5 0	7,842 00	100 00		7,842 00	1,568 00	1,568 00
Sidewalk Project	4/30/2008	SL	15 0	20,549 00	100 00		20,549 00	1,370 00	1,370 00
Landscape Project	5/23/2008	SL	15 0	7,257 00	100 00		7,257 00	484 00	484 00
Covered Play Structure - Phase 1	7/31/2008	SL	39 0	2,550 00	100 00		2,550 00	65 00	65 00
Covered Play Structure - Phase 2	7/31/2009	SL	39 0	143,850 00	100 00		143,850 00	-	3,688 00
Storage Shed	9/30/2008	SL	7 0	300 00	100 00		300 00	-	43 00
Laptop Computer (Superintendent)	5/8/2009	SL	5 0	1,070 00	100 00		1,070 00	-	214 00
2 Copiers	3/19/2009	SL	5 0	11,300 00	100 00		11,300 00	-	2,260 00
Playground Pavement - Phase 1	12/10/2008	SL	15 0	20,808 00	100 00		20,808 00	-	1,387 00
Retaining Wall	6/17/2009	SL	15 0	8,400 00	100 00		8,400 00	-	560 00
Soccer Goals	5/14/2009	SL	7 0	1,789 00	100 00		1,789 00	-	256 00
Playground Equipment	6/22/2009	SL	7 0	4,027 00	100 00		4,027 00	-	575 00
Total				1,074,734 00			1,074,734 00	311,440 00	65,864 00

Umpqua Valley Christian Schools

93-0951533

Form 990-EZ

Other Changes in Net Assets or Fund Balances

Statement 4

Description	Amount
Interest earned on Edward Jones Capital Projects account posted incorrectly	(447)
Outstanding check canceled on Class of 2008 checking account	(30)
Total to Form 990-EZ, Part I, line 20	(477)

Umpqua Valley Christian Schools

93-0951533

Form 990-EZ

Total Liabilities

Statement 5

Description	Amount
Accounts Payable	2,721
Payroll Liabilities	457
Deferred & Unearned Revenue - Tuition	40,781
Umpqua Bank	46,532
Total to Form 990-EZ, Part II, Line 26	90,491