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990 Fbrm

Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047 2009

Open to Public Inspection

		toos calendar year, or tax year beginning 001 01, 2009, an		00N_3	
	heck if applicable	Please C Name of organization, number and street, city, town, state, and ZIP co	de D Employer	identification i	number
1 1	Address cha	use IRS label or	20	-337426	7
\prod	Name chang	e print or OMAHA HOMESCHOOL LEARNING CENTER	E Telephone		
П.	nitial return	type See	1 '	2-293-7	621
Н	Ferminated	Specific 1011 MARTAN AVE	G Gross receipts		021
H	Amended re	institute and the second		\$	
	Application			a group return	
\Box	ending	F Name and address of principal officer	for affi	liates?	∐ Yes 🄀 No
			H(b) Are all at	ffiliates included? attach a list	
1 1	ax-exem	pt status X 501(c)(3) ◀ (insert no) 4947(a)(1) or 527		ructions)	Yes No
<u>η</u> Λ	Vebsite:	•	H(c) Group e:	xemption number	<u> </u>
	orm of orga		of formation	M State of leg	al domicile
P	art I	Summary			
		refly describe the organization's mission or most significant activities			
	T	HE PURPOSE IS TO SUPPORT YOUTH AND FAMILIES	INVOLVED	IN	
32	H	OMESCHOOLING OF YOUTH ACCORDING TO CHRISTIA	N BELIEFS	/VALUES	
Governance	_			· · · · · · -	
Š	2 C	neck this box If the organization discontinued its operations or disposed of more	than 25% of its ne	et assets	
ၓ	3 N	umber of voting members of the governing body (Part VI, line 1a)		3	8
∞ ŏ	4 N	umber of independent voting members of the governing body (Part VI, line 1b)		4	
Activities &	1	otal number of employees (Part V, line 2a)		5	13
₹	1	otal number of volunteers (estimate if necessary)		6	
Ac	1	otal gross unrelated business revenue from Part VIII, column (C), line 12		7a	
	1	• • • • • • • • • • • • • • • • • • • •		7b	
_	b N	et unrelated business taxable income from Form 990-T, line 34	T		
			Prior Year		irrent Year
ne	1	ontributions and grants (Part VIII, line 1h)			859.
ē		rogram service revenue (Part VIII, line 2g)			64514.
Revenue	10 ln	vestment income (Part VIII, column (A), lines 3, 4, and 7d)			
_	11 0	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
	12 To	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			65373.
	13 G	rants and similar amounts paid (Part IX, column (A), lines 1-3)	L		4475.
	14 B	enefits paid to or for members (Part IX, column (A), line 4)			
S	15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			40850.
Expenses	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)		1	
ed)	ьт	otal fundraising expenses, (Part IX, column (D), line 25) ▶	I		
ŵ	17 0	ther expenses (Part IX, column (A), lines 113-119-14-24-11/ED			19234.
		otal expenses - Add lines 13-17 (must equal Partix, column (A), line-25)			64559.
		evenue less expenses Subtract line 18 from line 12			814.
		P SEP 2 / 2010 17	Beginning of Y	'ear E	nd of Year
ts or	20 T	otal assets (Part X, line 16)	161		16958.
Asse	21 T		20	78.	2274.
Net Assets or	22 1	et assets or fund balances Subtract line 21 from time 20	140		14684.
	art II	Signature Block			
-	a.c.	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statem	ents and to the best of n	ny knowledne	
		and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on allunformation of			
		and belief, it is true, correct, and complete Declaration of preparer (other trian offices is based on all minimation of	willar preparer has any k	<u> </u>	
۵.		Ma H	1	9-21-	- 10
	gn				
He	ere	Signature of officer		ate	
		John & Jonnelly, Presion	Ψ/1/		
		Type or print name and title			ontifuno cumb
Pa	ıd	Preparer's Date	Check if self-	_ (seė instructi	entifying number ons)
		signature 09/08/2010	employed ► D		
	eparer's	Firms name (or yours COLLINS CONSULTING SERVICE	EIN		91107
US	e Only	if self-employed), address, and ZIP + 4 31 E MAIN TREYNOR IA 51575 -	Phone no	> 712-4	87-3853
Ma	y the IR	S discuss this return with the preparer shown above? (See instructions)		X	Yes No
		Act and Panerwork Reduction Act Notice, see the separate instructions.		F	orm 990 (2009)

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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orm	990 (2009)	OMAHA HOMESCHO	OOL LEARNING CENTER	20-33	74267 Page 2
Par			vice Accomplishments		7
1		ibe the organization's missi			,
	SEE AT	TACHED STATEM	₹N.T.		
				-	
2			ificant program services during the year w	hich were not listed on	
		m 990 or 990-EZ?			Yes X No
3		cribe these new services or		du ata a a a a a a a a a a a a a a a	Yes X No
3		cribe these changes on Sch	or make significant changes in how it conducted the C	Jucts any program services?	∐ Yes ☒ No
4			ents for each of the organization's three la	argest program services by expenses	
	Section 501((c)(3) and 501(c)(4) organiz	ations and section 4947(a)(1) trusts are re	equired to report the amount of grants	and
	allocations to	o others, the total expenses	, and revenue, if any, for each program se	rvice reported	
	(0+4-	\	64550	4475	65252
4a	(Code) (Expenses \$	64559. including grants of \$	4475.)(Revenue\$	65373.
	TO PRO	VIDE SUPPLEME	NTAL EDUCATIONAL SERV	VICES TO INDIVIDUAL	
		E HOMESCHOOLE			
					
					
		· 4=+7 ···	**************************************		
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$	
		-			
					
	-			·	-,
					
					
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$	
4d	Other progr	am services (Describe in S	chedule O)		
	(Expenses	\$	including grants of \$)(Revenue \$)
4e	Total progr	am service expenses 🕨	64559.		Form 990 (2009)

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Part IV Checklist of Required Schedules

If "Yes," complete Schedule D, Part V

- No Yes •Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes." complete Schedule A Х Is the organization required to complete Schedule B, Schedule of Contributors? X 2 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 Χ Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C. X 4 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 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to 6 provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes." complete Schedule D. Part I. X 6 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III X 8 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, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?
- 11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable
 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete
 - Schedule D, Part VI

 Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more
 - of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII

 Did the organization report an amount for investments program related in Part X, line 13 that is 5% or more
 - Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX

of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII

- Did the organization report an amount for other liabilities in Part X, line 25° if "Yes," complete Schedule D, Part X
- Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X

Did the organization obtain a separate, independent audited financial statement for the tax year? If "Yes," complete Schedule D. Parts XI, XII, and XIII.

12 Schedule D. Parts XI, XII, and XIII 12A Was the organization included in a consolidated, independent audited financial statement for the tax year? Yes No 12A Х If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, Х 14b business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 organization or entity located outside the United States? If "Yes," complete Schedule F. Part II X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 to individuals located outside the United States? If "Yes," complete Schedule F, Part III X 16 Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), line 11e? If "Yes," complete Schedule G, Part I 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Х 19 If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H Х

Form 990 (2009)

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11

X

Par	IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			,
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's			
	current and former officers, directors, trustees, key employees, and highest compensated employee's? If "Yes,"			ĺ
	complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			1
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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	-	1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part !	25a		X
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, directly or indirectly			
	(see Schedule L, Part IV instructions for definitions of "direct" and "indirect" and applicable filing thresholds,	,		,
	conditions, and exceptions)	1 ,	1	1
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			٦,
	Schedule L, Part IV	28b_		X_
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family			,,
	member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	-	X -
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29_	ļ — —	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	ļ	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	,,		x
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	 	 ^
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	24		X
	III, IV, and V, line 1	34	ļ	+-^-
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	25		X
	Schedule R, Part V, line 2	35	 	+ ^
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	30		X
	organization? If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	+^
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		X
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 	X
38	Did the organization complete Schedule O and provide explanations for Part VI, lines 11 and 19?	38	L	

1	Statements Regarding Other IKS Filmigs and Tax Compliance	—		
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		Yes	No
10				
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1a 6 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
Ū	gaming (gambling) winnings to prize winners?	1c	x	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 13			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
~	Note If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	20	A 1	-
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a	1	Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	30		
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country	44		
-	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
	and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1	Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	$\neg \neg$	<u> </u>
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c	į	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	· I	-1
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	-		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1 _ 1	1	
_	benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7g		
h	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h	ı	
8	organizations Did the supporting organization, or a donor advised fund maintained by a sponsoring organization,		-	
	have excess business holdings at any time during the year?	8		-
9	Sponsoring organizations maintaining donor advised funds.		'	
	Did the organization make any taxable distributions under section 4966?	9a	. !	
b	D. III	9b		
10	and the second s		,	
a	Land and Consider the contributions included an Dark VIII. Inc. 12			
b	O was also also to a Ferry COO Dort VIII has 40 for subhis use of slub feedbase.	_		
	Section 501(c)(12) organizations Enter	-		
а	O a service of the service and a service and	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)	_	1	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
		Fo	ırm 990	(2009)

Part VI Governance, Management, and Disclosure

Pa	,	•	'No" ["]	
B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following? a The governing body? b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		,		
Secti	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body	8		
	<u> </u>			
_	·	2	l x	ì
3		-		<u> </u>
_		3		Х
4		\ -	<u> </u>	Х
5	·	5		Х
6		 	X	
7a				
		7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	<u> </u>		
	the year by the following?			
а	The governing body? .	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b_	<u> </u>	X
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	}		
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	<u> </u>	X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
		10a		X
p				
		10b	<u> </u>	
11			١,,	1
			X	1
		12a		X
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10				
19				
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ►JOHN DONNELLY 1011 MARIA BELLEVUE NE 68005 402-2	93-762	21	
		Form	990	(200

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Check this box if the organization did not compensate any current officer, director, or trustee

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B)			(C)			(D)	(E)	(F)
Name and Title	Average		on (cl	$\overline{}$	all t	_	_	Reportable	Reportable	Estimated
	hours per	Individual trustee or director	Institutional trustee	Officer	Key employee	육등	Former	compensation	compensation	amount of
	week	dire	titut	ξĒ	yer	Be] i	from	from related	other
	-	ctor	ion		힏	yee yee	¬	the	organizations	compensation
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		stee	ıst		Ф	en		(W-2/1099-MISC)		organization
		"	99		{	Highest compensated employee			!	and related
JOHN DONNELLY	 	 -		-		ă	-			organizations
DIRECTOR	40			x				29740.	О	О
HOLLY DONNELLY	 		<u> </u>	[- -		-	 	23,10.	ļ	
OFFICER	1	Ì		x	Ì]		0	0	0
JOHN AYERS	 -	 		F		1-	 			<u>_</u>
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CARA AYERS	 	 	-	[t^-			
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DAVE BROCKHAUS	<u> </u>				-		\vdash			
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JYNELL BROCKHA					ļ —					
OFFICER	1			Х				0	0	0
DAVE MILLON										
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NICOLE MILLON]				
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1b Total 29740. Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization > Yes No 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization (B) (C) (A) Description of services Compensation Name and business address Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization > Copyright form software only, 2009 Universal Tax Systems, Inc. All rights reserved Form 990 (2009) US990\$\$8 Rev 1

		009) OMAHA HOMESCHOOL LE	ARNING	CENTER		20-3374	267 Page 9
Part	VIIIc	Statement of Revenue		(4)			
`. 	•	•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Program Service Revenue and other similar amounts	b c d e f g h	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f Total Add lines 1a-1f Bus TUITION	859.	859. 64514.	64514.		
m Servic	c _ d _ e _			1			
Progra	f g	All other program service revenue Total Add lines 2a-2f	•	64514.	1		
	3 4 5	Investment income (including dividends, inte other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) F Gross Rents	rest, and				
	b c d	Less rental expenses Rental income or (loss) Net rental income or (loss)	▶ Other	-			·
	b	other than inventory Less cost or other basis and sales expenses			• -	-	
	d	Gain or (loss) Net gain or (loss)	>				
Other Revenue	8a b	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 Less direct expenses b		1	ı		1
0	9a	Net income or (loss) from fundraising events Gross income from gaming activities See Part IV, line 19 a	<u> </u>				
	c 10a	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances	•				
	b c	Net income or (loss) from sales of inventory Miscellaneous Revenue	siness Code		İ		
	11a b c d e 12	All other revenue Total. Add lines 11a-11d Total Revenue Add lines 1h, 2g, 3, 4, 5, 6d	7d 8c				
		9c, 10c, and 11e	. u, uu,	65373.	64514.		Form 990 (2009

) and 501(c)(4) organ			,
Do no	All other organizations must complete continuity amounts reported on lines 6b,			columns (B), (C) and (E (C)	
	b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	Management and	(D) Fundraising
1	Grants and other assistance to governments and		expenses	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in		 ,		÷
_	the U.S. See Part IV, line 22	4475.	4475.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				4.9
4	Benefits paid to or for members				•
5	Compensation of current officers, directors,				
	trustees, and key employees	37520.	37520.		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	3330.	3330.		
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
ď	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				····
g	Other				
12	Advertising and promotion	271.	271.	<u> </u>	
13	Office expenses	907.	907.		
14	Information technology				
15	Royalties				
16	Occupancy	239.	239.		
17	Travel				
18	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	327.	327.		
23	Insurance	225.	225.		
24	Other expenses Itemize expenses not		i'		•
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)		1 2 2 2 2 2		
а	CONSULTING	12081.	12081.		
þ	CONTRIBUTIONS	2700.	2700.	-	
С	MISCELLANEOUS EXP	2484.	2484.		
d					
е					· · · · · · · · · · · · · · · · · · ·
f	All other expenses				
25	Total functional expenses Add lines 1 through 24f	64559.	64559.		
26	Joint Costs Check here ►		İ		
	SOP 98-2 Complete this line only if the org	H			
	rangeted in column (P) joint costs from a combined	1	1	1	i

educational campaign and fundraising solicitation

Par	t X 🔻	Balance Sheet					74207 Fage II
,		•			(A)		(B)
					Beginning of year		End of year
	.1	Cash - non-interest-bearing			15361.	1	16829.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, di					
		employees, and highest compensated employee	5				
	6	Receivables from other disqualified persons (as					•
		4958(f)(1)) and persons described in section 499	58(c)(3)(B) Complete			
		Part II of Schedule L				6	
3ts	7	Notes and loans receivable, net				7	
Assets	8	inventories for sale or use			8		
•	9	Prepaid expenses and deferred charges		,		9	
	10a	, 3, ,					
		basis Complete Part VI of Schedule D	10a	1633.		1 1	
	b	Less accumulated depreciation	10b	1504.	783.	10c	129.
	11	investments - publicly traded securities			11		
	12	Investments - other securities See Part IV, line		12			
	13	Investments - program-related See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	• • •		15		
	16	Total assets Add lines 1 through 15 (must equa	al line 3	4)	16144.	16	16958.
	17	Accounts payable and accrued expenses			2078.	17	2274.
	18	Grants payable	2	18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		(0)		20	
es	21	Escrow or custodial account liability Complete F				21	
Liabilities	22	Payables to current and former officers, director					·
iat		employees, highest compensated employees, a	na aisc	ualified			
	23	persons Complete Part II of Schedule L Secured mortgages and notes payable to unrela	stad the	rd nadina		22	
	24	Unsecured notes and loans payable to unrelate		· ·		23	
	25	Other liabilities Complete Part X of Schedule D	a u iiru	Jarties		25	
	26	Total liabilities Add lines 17 through 25		ļ	2078.	26	2274.
	20	Organizations that follow SFAS 117, check he	<u></u>	X and	2070.	20	
		complete lines 27 through 29, and lines 33 and		and			
ces	27	Unrestricted net assets	u 5 4		14066.	27	14684.
lan	28	Temporarily restricted net assets			11000.	28	
Ва	29	Permanently restricted net assets				29	
pun		Organizations that do not follow SFAS 117, ch	eck he	ere 🕨 🗍	L 	1 20 1	
Ē		and complete lines 30 through 34.		•			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds				30	
sse	31	Paid-in or capital surplus, or land, building, or ea	guipme	nt fund		31	
t As	32	Retained earnings, endowment, accumulated in				32	
Se	33	Total net assets or fund balances		5. 50101 101100	14066.	33	14684.
	34	Total liabilities and net assets/fund balances			16144.	34	16958.

Form **990** (2009)

As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

the Single Audit Act and OMB Circular A-133?

If "Yes," did the organization undergo the required audit or audits?

b

Form 990 (2009)

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3b

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

► Attach to Form 990 or Form 990-EZ

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization is a section 501(c)(3) organizations or a section 4947(a)(1) nonexempt charitable trusts.

▶ See separate instructions

Open to Public Inspection

Name of the organization				er identificatio		
OMAHA HOMESCHOOL LEARNIN				-337426	7	
Part Reason for Public Charity St				ructions		
The organization is not a private foundation because A church, convention of churches, or associated in the convention of churches, or associated in the convention of churches, or associated in the convention of churches, or associated in the convention of churches, or associated in the convention of churches, or associated in the convention of churches, or associated in the convention of churches, or associated in the convention of churches, or associated in the convention of churches, or associated in the convention of churches, or associated in the convention of churches, or associated in the convention of churches, or associated in the churches, or as of the ch	ation of churches described in (Attach Schedule E) organization described insection	section 170(b)(1)(A on 170(b)(1)(A)(iii))(i).	Enter the hos	spital's name,	
5 An organization operated for the benefit of a 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or gover 7 An organization that normally receives a subsection a section 170(b)(1)(A)(vi) (Complete A community trust described insection 170(b) 9 X An organization that normally receives (1) m receipts from activities related to its exempt from activities activities from	rnmental unit described insect stantial part of its support from lete Part II) D)(1)(A)(vi) (Complete Part II nore than 33 1/3 % of its supp	tion 170(b)(1)(A)(v) n a governmental u) ort from contribution	nit or from the	general public ip fees, and gr	oss	
receipts from activities related to its exempt f support from gross investment income and u acquired by the organization after June 30, 1 An organization organized and operated exclusion purposes of one or more publicly supported to 509(a)(3). Check the box that describes the transport of the following persons other than foundation managers and 509(a)(1) or section 509(a)(2). If the organization received a written determined organization, check this box. Gince August 17, 2006, has the organization (i). A person who directly or indirectly controlled and (iii) below, the governing body of the (ii). A family member of a person described (iii). A 35% controlled entity of a person described (iii).	inrelated business taxable inc. 975 Sessection 509(a)(2) (Columnia in the image) flusively to test for public safet in the inc. flusively for the benefit of, to programizations described in set in the image) c	ome (less section 6 complete Part III) y Sesection 509(a) (1) or some and complete line inctionally integrated y or indirectly by on its supported organically incompleted organically incompleted organically supported organically supported organically for incomplete incomplete incomplete incomplete organically supported organica	(a)(4) s of, or to carrection 509(a)(s 11e through d d	y out the 2) Sesection 111h Type III - Oth qualified cribed in section	ner	s No
h Provide the following information about the s (i) Name of supported organization Organization	supported organization(s) (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	governing document?	(v) Did you notify the organization in col (i) of your support? Yes No	(vi) Is the organization col (i) organized in the U S?		
Total For Privacy Act and Paperwork Reduction Act Not	tice, see the Instructions for	Form 990.	Sche	dule A (Form	990 or 990-EZ) 2009

Rev 1

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

sec	tion A: Public Support		 				
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	!					
	include any "unusual grants ")	5410.	1690.	2405.	961.	859.	11325.
2	Gross receipts from admissions, merchan-						
	dise sold or services performed, or facilities						
	furnished in any activity that is related to	1		1			
	the organization's tax-exempt purpose	35170.	35257.	59040.	56218.	64514.	250199.
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			Ì			
	its behalf						
5	The value of services or facilities		İ		-		
	furnished by a governmental unit to the			Ì)	
	organization without charge						
6	Total. Add lines 1 through 5	40580.	36947.	61445.	57179.	65373.	261524.
7 a	Amounts included on lines 1, 2, and 3			1			
	received from disqualified persons						
b	Amounts included on lines 2 and 3		ĺ	_			
	received from other than disqualified persons that exceed the greater of		1	ľ			
	\$5,000 or 1% of the amount on line		1	1			
	13 for the year]				
С	Add lines 7a and 7b	<u> </u>					
8	Public support (Subtract line 7c from line 6)				·		261524.
	tion B. Total Support			<u></u>			
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	40580.	36947.	61445.	57179.	65373.	261524.
10a	Gross income from interest, dividends,						
	payments received on securities loans,	[ļ	ł			
	rents, royalties and income from similar						
	sources		·				
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses]					
	acquired after June 30,1975				- 		
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether	Į į		,			
	or not the business is regularly carried on		ļ <u> </u>				
12	Other income Do not include gain or						
	loss from the sale of capital assets	[
	(Explain in Part IV)	10500	26215	55.4.5	55150	<u> </u>	0.61.504
	Total support. (Add lines 9, 10c, 11, & 12)	40580.	36947.	61445.	57179.	65373.	261524.
14	First five years. If the Form 990 is for the org	anization's first, s	second, third, fou	rth, or fifth tax ye	ar as a section	501(c)(3)	. \Box
	organization, check this box andstop here	 					
	tion C. Computation of Public Supp					1	100 00 %
15	Public support percentage for 2009 (line 8, co			in (f))		15	100.00 %
16	Public support percentage from 2008 Schedu					16	100.00 %
Sec	ction D. Computation of Investment					11	0.00.=:
17				column (f))		17	0.00 %
18	Investment income percentage from 2008 Sch					18	0.00 %
198	a 33 1/3 % support tests - 2009. If the organiza						7 is . 딞
	not more than 33 1/3 %, check this box andst						► X
þ	33 1/3 % support tests - 2008. If the organiza						and fine 18
	is not more than 33 1/3 %, check this box and						7 H
20	Private foundation, if the organization did no	it check a box on	line 14, 19a, or	19b, check this b	ox and see instr	uctions	P

SCHEDULE D (Form 990)

Qepartment of the Treasury Internal Revenue*Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public

Name of the organization Employer identification number OMAHA HOMESCHOOL LEARNING CENTER 20-3374267 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part.II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the Held at the End of the Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, reporting of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes" to Form 990, Part IV, line 8 1 a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Part VI Investments - Land,	Buildings, and Equipment.	See Form 990, P	art X, line 10	
Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land b Buildings				
c Leasehold improvements				
d Equipment		1,633.	1,504.	129
e Other				
otal. Add lines 1a-1e (Column (d) should e	qual Form 990, Part X, column (B),	line 10(c))	•	129

Schedule D (Form 990) 2009

edule D (Form 990) 2009 OMAHA HOMESCHOOL LEARNING		20-3374267	Page 4
Reconciliation of Change in Net Assets from Form	990 to Financial Sta	tements	
Total revenue (Form 990, Part VIII, column (A), line 12)			5,373.
Total expenses (Form 990, Part IX, column (A), line 25)		2 6	4,559.
Excess or (deficit) for the year Subtract line 2 from line 1		3	814.
Net unrealized gains (losses) on investments		4	
Donated services and use of facilities		5	
Investment expenses		6	
Prior period adjustments		7	
Other (Describe in Part XIV)		8	
Total adjustments (net) Add lines 4-8		9	
Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10	814.
Reconciliation of Revenue per Audited Financial St	atements With Reve		
Total revenue, gains, and other support per audited financial statements		1	
Amounts included on line 1 but not on Form 990, Part VIII, line 12	1. 1		
Net unrealized gains on investments	2a		
Donated services and use of facilities	2b		
Recoveries of prior year grants	2c		
Other (Describe in Part XIV)	2d	·	
Add lines 2a through 2d		2e	
Subtract line 2e from line 1		3	
Amounts included on Form 990, Part VIII, line 12, but not on line	1 1		
Investment expenses not included on Form 990, Part VIII, line 7b	4a		
Other (Describe in Part XIV)	4b		
Add lines 4a and 4b		4c	
Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12		5	
Reconciliation of Expenses per Audited Financial S	Statements With Exp	enses per Return	
Total expenses and losses per audited financial statements		1	
Amounts included on line 1 but not on Form 990, Part IX, line 25			
Donated services and use of facilities	2a		
Prior year adjustments	2b		
Losses reported on Form 990, Part IX, line 25	2c		
Other (Describe in Part XIV)	2d		
Add lines 2a through 2d		2e	
Subtract line 2e from line 1		3	
Amounts included on Form 990, Part IX, line 25, but not on line			
Investment expenses not included on Form 990, Part VIII, line 7b	4a		
Other (Describe in Part XIV)	4b		
Add lines 4a and 4b		4c	
Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 1	8)	5	
Supplemental Information			
plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, F	Part III, lines 1a and 4, Par	t IV, lines 1b and 2b, Part V,	line 4,
X Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also c	complete this part to provid	de any additional information	1
		Schedule D (Fo	rm 990) 200

OMB No 1545-0172 Form 4562 Depreciation and Amortization 2009 (Including Information on Listed Property) Capartment of the Treasury Attachment ► See separate instructions. Internal Revenue Service Attach to your tax return. Sequence No 67 Name(s) shown on return Business or activity to which this form relates Identifying number OMAHA HOMESCHOOL LEARNING CENTSUPPORT HOMESCHOOLING 20-3374267 Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 1 Maximum amount. See the instructions for a higher limit for certain businesses. 250,000. 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 800,000 3 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property Enter the amount from line 29 7 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 Part III - MACRS Depreciation (Do not include listed property) (See instructions) Section A 17 327. 17 MACRS deductions for assets placed in service in tax years beginning before 2009 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for depr (b) Month and (d) Recovery (g) Depreciation (e) year placed in (f) Method (a) Classification of property (business/investment use Convention deduction period only - see instructions) 19a 3-year property b 5-year property 7-year property 10-year property d 15-year property 20-year property 25 yrs S/I 25-year property S/L Residential rental 27 5 yrs MM 27 5 yrs MM S/L property 39 yrs MM S/L Nonresidential real MM property Section C-Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System S/L 20a Class life S/L 12 yrs 12-year S/L 40 yrs MM 40-year C

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21

For assets shown above and placed in service during the current year, enter the

Enter here and on the appropriate lines of your return Partnerships and S corporations - see instructions

Summary (See instructions)

Listed property Enter amount from line 28

Part IV

21

23

327.

21

22

23