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ILS 12 00 PM Pg 7
Form - 990 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

| <u>A</u>                   | For  | the 200             | 9 calendar year, or tax year beginning 07/01/09, and ending 06/30/1  | U                                     |                              |   |
|----------------------------|--|---------------------|--|---------------------------------------|------------------------------|---|
| В                          | Check  | rf applical         |  |                                       | D Employ                     | er identification number                            |
|                            | Addres   | s change            | use IRS C/O LILLER GREEN   |                                       |                              |   |
|                            | Name   | change              | label or print or Doing Business As  |                                       | 23-1                         | 2225232   |
|                            |  | ·                   | type. Number and street (or P O box if mail is not delivered to street address)  | Room/suite                            |                              | ne number   |
|                            | Initial r  | eturn               | See 5902 DEVON PLACE   | Noombalke                             | •                            | -844-4409   |
|                            | Termin   | ation               | Specific   |                                       |                              |   |
|                            | Ameno  | ded return          |  | -                                     | G Gross receip               | NS 4  |
| ⊢                          |  |                     | e  |                                       | LI/a) to the co              |   |
|                            | Applica  | ation pend          | F Name and address of principal officer  |                                       |                              | group return for                                    |
|                            |  |                     |  |                                       | affiliates<br>H(b) Are all a | ffiliates -   |
|                            |  |                     |  |                                       | included                     |   |
| _                          |  |                     |  |                                       | If "No," a                   | attach a list (see instructions)                    |
| <u> </u>                   |  | xempt               |  |                                       |                              |   |
| J                          |  | site <sup>.</sup> 🕨 | <u> </u>   |                                       | H(c) Group e                 | xemption number                                     |
|                            |  | forganiz            |  | Year of formation                     |                              | M State of legal domicile                           |
|                            | art  | <u> </u>            | Summary  |                                       |                              |   |
|                            | 1  | Briefl              | y describe the organization's mission or most significant activities   |                                       |                              |   |
| ø                          |  | I                   | Y LEAF SCHOOL, INC. PROVIDES HIGH QUALITY EDUCATION T  | 0                                     |                              |   |
| JE S                       |  | PI                  | RESCHOOL THROUGH 8TH GRADE STUDENTS IN A   |                                       |                              |   |
| Ë                          |  | N                   | ON-DISCRIMINATORY ENVIRONMENT.   |                                       |                              |   |
| Š                          | 2  | Chec                | k this box $ ightharpoonup$ if the organization discontinued its operations or disposed of more than 25%   | of its net assets                     |                              |   |
| O O                        | 3  |                     | ber of voting members of the governing body (Part VI, line 1a)   |                                       | 3                            |   |
| Š                          | 4  |                     | ber of independent voting members of the governing body (Part VI, line 1b)   |                                       | 4                            | <del></del>   |
| itie                       | 5  |                     | number of employees (Part V, line 2a)  |                                       | 5                            |   |
| 20 Activities & Governance | ٦  |                     | number of employees (Part V, line 2a) number of volunteers (estimate if necessary) gross unrelated business revenue from Part VIII, column (C), line 12  | 1                                     | 6                            | ·····   |
| <b>0</b> ₩                 |  |                     | number of volunteers (estimate in necessary)   | . 🛥                                   |                              |   |
| 7                          | '  |                     |  |                                       | 7a                           | 0   |
| 6                          | <del>                                     </del> | Netu                | Inrelated business taxable income from Form 990-T, line 34   | Prior Year                            | 7b                           | Current Year  |
| -                          | 8  | Cont                | ributions and grants (Part VIII, line 1h)  |                                       |                              | Content real  |
| 뽈                          | "  |                     | ram service revenue (Part VIII, line 2g)   |                                       |                              |   |
| <b>₹</b>                   | 40   | _                   | · • • • • • • • • • • • • • • • • • • •  |                                       | 3                            | <del></del>   |
| Z,Š                        | 10   |                     | thment income (Part VIII, column (A), lines 3, 4, and 7d)  |                                       |                              |   |
| H                          | 111  |                     | r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   |                                       | 3                            | <del></del>   |
| SCANNED AND I              | 1, 12  |                     | revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)   |                                       |                              |   |
| 2                          | <u> </u> 13                                      |                     | ts and similar amounts paid (Part IX, column (A), lines 1–3)   | <del></del>                           |                              | <del>-</del>  |
| 8                          | 🍹 14   |                     | fits paid to or for members (Part IX, column (A), line 4)  |                                       |                              |   |
| တ္က န                      | 15   |                     | nes, other compensation, employee benefits (Part IX, column (A), lines 5–10)   | 29                                    | ,755                         | <del> </del>  |
| ŝ                          | 16   | a Profe             | ssional fundraising fees (Part IX, column (A), line 11e)   |                                       |                              |   |
| ž.                         | 1  | <b>b</b> Total      | fundraising expenses (Part IX, column (D), line 25) ▶  | `                                     |                              |   |
| Ú                          | 17   | Othe                | r expenses (Part IX, column (A), lines 11a-11d, 11f-24f)   |                                       | ,851                         | 41,211  |
|                            | 18   | Total               | expenses Add lines 13-17 (must equal Part IX, column (A), line 25)   | 213                                   | ,606                         | 41,211  |
|                            |  | Reve                | nue less expenses. Subtract line 18 from line 12   |                                       | ,603                         | -41,211   |
| Assets or                  | 2  |                     |  | Beginning of Curre                    |                              | End of Year   |
| sets                       | <b>20</b>  | Total               | assets (Part X, line 16)   | 56                                    | ,903                         | 34,194  |
| A P                        | 21   | Total               | liabilities (Part X, line 26)  | ·                                     |                              | 18,502  |
| ž                          | 22   | Net a               | ssets or fund balances Subtract line 21 from line 20   | 56                                    | ,903                         | <u>15,692</u>                                       |
|                            | art  | 1                   | Signature Block  |                                       |                              |   |
|                            |  |                     | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules are and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all inform |                                       |                              |   |
| ۰.                         |  |                     |  |                                       | 1                            | 1-1.  |
| Sig                        | _  |                     | - Heller 16 M new  |                                       |                              | 3 [1]   |
| He                         | re   |                     | Signature of officer   |                                       | Date                         |   |
|                            |  |                     | Liller B, Green, Director  |                                       |                              |   |
|                            |  |                     | Type or print name and title   | <del></del>                           |                              | Discourage retained to                              |
| _                          |  |                     | Preparer's Date  | Check if                              |                              | Preparer's identifying number<br>(see instructions) |
| Pa                         |  |                     | signature PAUL J. CANNATARO CPA MST 12/0   | 9/10 self-<br>employe                 | d ▶ X                        | P00340832   |
|                            | өраг   |                     | PAUL J. CANNATARO CPAZ MS TAXATI   |                                       | EIN ▶                        | 23-2220469  |
| Us                         | e Or   | nly                 | Firm's name (or yours if self-employed),   |                                       | Phone                        |   |
|                            |  |                     | address, and ZIP + 4 DREXEL HILL, PA 19026   |                                       | 1                            | 610-623-8900  |
| Ma                         | v the I  | RS die              | cuss this return with the preparer shown above? (see instructions)   | · · · · · · · · · · · · · · · · · · · | 1 110                        | X Yes No  |
| IVIA                       | 7 LIIV I   | , <b>.</b>          | odos una rejora triur une proporer sulvitri abete ( (SEE IHSUUGIIOHS)  |                                       |                              | 42    C3     NU                                     |

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

Form **990** (2009)

) (Revenue \$

(Expenses \$

4d Other program services (Describe in Schedule O)

4e Total program service expenses ▶

including grants of \$

| 7 ( | artik Checklist of Nequilled Schedules   |            |     |              |
|-----|--|------------|-----|--------------|
| _   |  |            | 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          |     | X            |
| 3   | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to   |            |     | 77           |
|     | candidates for public office? If "Yes," complete Schedule C, Part I  | 3          |     | X            |
| 4   | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete  |            |     | T.           |
| _   | Schedule C, Part II  | 4          |     | _ <u>X</u> _ |
| 5   | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)  | _          |     |              |
| 6   | notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III  | 5          |     |              |
| 0   | Did the organization maintain any donor advised funds or any similar funds or accounts where donors have   |            |     |              |
|     | the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"  | _          |     | v            |
| 7   | complete Schedule D, Part I  | 6          |     | <u> </u>     |
| ′   | Did the organization receive or hold a conservation easement, including easements to preserve open space,  | _          |     | v            |
|     | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II   | 7          |     | <u>X</u>     |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"  | _          |     | v            |
| 9   | complete Schedule D, Part III  | 8          | -   | <u>X</u> _   |
| 9   | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part  | ļ          |     |              |
|     | X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV                        |            |     | v            |
| 0   | · · · · · · · · · · · · · · · · · · ·  | 9          |     | <u> </u>     |
|     | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10         |     | х            |
| 1   |  | ''         |     |              |
| •   | Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable                     | 11         | x   |              |
| _   | ▶ 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   |            | 1   |              |
|     | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII   |            | 1   |              |
|     | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more  |            | 1   |              |
| Ī   | 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 assets related 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  |            | 1   |              |
|     | 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                                      |            | 1   |              |
|     | the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X   |            | 1   |              |
| 2   | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete  |            | -   |              |
|     | Schedule D, Parts XI, XII, and XIII  | 12         |     | X            |
| 2A  | Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No  |            |     | - 11 -       |
|     | If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional   |            | 1   |              |
| 3   | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | <u>1</u> 3 |     | X            |
| 4a  | Did the organization maintain an office, employees, or agents outside of the United States?  | 14a        |     | X            |
| b   | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,  |            |     |              |
|     | business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I  | 14b        |     | _X_          |
| 5   | 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         |     | <u> </u>     |
| 6   | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance  |            |     |              |
|     | to individuals located outside the United States? If "Yes," complete Schedule F, Part III  | 16         |     | X            |
| 7   | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services  |            | ĺ   |              |
|     | on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I   | <u>1</u> 7 |     | _ <u>x</u> _ |
| 8   | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on  |            |     |              |
|     | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II   | 18         |     | <u> </u>     |
| 9   | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?   |            | }   |              |
|     | If "Yes," complete Schedule G, Part III  | 19         |     | <u> </u>     |
| 0   | Did the organization operate one or more hospitals? If "Yes," complete Schedule H  | 20         |     | <u> </u>     |

| _P  | art 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              |      |     |               |
|     | employees? If "Yes," complete Schedule J   | 23   |     | X             |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than                  |      |     |               |
|     | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines            |      |     |               |
|     | 24b through 24d and complete Schedule K If "No," go to line 25   | 24a  |     | X             |
| Ь   | 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  |     |               |
| d   | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?              | 24d  |     |               |
| 25a | ( ), ( ), ( ), ( )   |      |     |               |
|     | with a disqualified person during the year? If "Yes," complete Schedule L, Part I                                    | 25a  |     | _X_           |
| b   | 3.3  |      |     |               |
|     | prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or           |      |     | 45            |
|     | 990-EZ? If "Yes," complete Schedule L, Part I  | 25b  |     | <u>X</u>      |
| 26  | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or    |      |     | 37            |
|     | 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?        |      |     | v             |
|     | 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 (see Schedule L.            |      |     |               |
|     | Part IV instructions for applicable filing thresholds, conditions, and exceptions)                                   |      | •   | v             |
| а   | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV              | 28a  |     | <u> </u>      |
| b   | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete               | 001  |     | x             |
|     | Schedule L, Part IV  | 28b  |     |               |
| 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 direct or indirect owner? If "Yes," complete Schedule L,        | 20.5 |     | x             |
| 20  | Part IV  | 28c  |     | X             |
| 29  | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M             | 29   |     |               |
| 30  | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified       | 30   |     | x             |
| 24  | conservation contributions? If "Yes," complete Schedule M  | 30   |     |               |
| 31  | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N.  Part I  | 31   |     | Х             |
| 32  | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete     | -31  |     |               |
| J.  | Schedule N, Part II  | 32   |     | X             |
| 33  | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations           | 32   |     | <del></del> - |
| 33  | sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  | 33   |     | X             |
| 34  | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,           |      |     |               |
| •   | III, IV, and V, line 1   | 34   |     | x             |
| 35  | Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete         | -    |     |               |
|     | Schedule R, Part V, line 2   | 35   |     | X             |
| 36  | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related         |      |     |               |
|     | organization? If "Yes," complete Schedule R, Part V, line 2  | 36   |     | X             |
| 37  | Did the organization conduct more than 5% of its activities through an entity that is not a related organization     |      |     | <del>-</del>  |
| ٠.  | 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 in Schedule O for Part VI, lines 11 and            |      |     |               |
|     | 19? <b>Note</b> . All Form 990 filers are required to complete Schedule O  | 38 ] |     | X             |

|          | Otatements Regarding Other INO 1 lings and Tax Compliance   |          |     |              |
|----------|---|----------|-----|--------------|
| 1a       | Enter the number reported in Poy 2 of Form 1006. Annual Summers and Transmittel of  | F        | Yes | No           |
| ıa       |   |          |     |              |
| b        | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1a  1b  |          |     |              |
| c        | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable   |          |     |              |
| •        | gaming (gambling) winnings to prize winners?  | 10       | :   | х            |
| 2a       |   | 10       |     |              |
|          | Statements, filed for the calendar year ending with or within the year covered by this return  2a   |          |     |              |
| ь        | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  | 2b       |     | F            |
|          | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see   |          |     |              |
|          | instructions)   |          |     |              |
| 3a       | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by   |          |     |              |
|          | this return?  | 3a       | 1   | Х            |
| b        | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  | 3b       | ·   |              |
| 4a       | At any time during the calendar year, did the organization have an interest in, or a signature or other authority   |          |     |              |
|          | over, a financial account in a foreign country (such as a bank account, securities account, or other financial  |          |     |              |
|          | account)?   | 4a       |     | X            |
| þ        | If "Yes," enter the name of the foreign country ▶   |          | , , | ,,,          |
|          | See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank   |          |     |              |
|          | and Financial Accounts  |          | 1   |              |
| 5a       | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?   | 5a       |     | _X           |
| b        | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  | 5b       |     | <u> </u>     |
| С        | If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding  |          |     |              |
|          | Prohibited Tax Shelter Transaction?   | 5c       |     | _            |
| 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       |     | _ <u>x</u> _ |
| b        | If "Yes," did the organization include with every solicitation an express statement that such contributions or  |          | ł   |              |
| -        | gifts were not tax deductible?  | 6b       |     |              |
| 7        | Organizations that may receive deductible contributions under section 170(c).   |          | 1   |              |
| а        | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods   |          | ŀ   |              |
| b        | and services provided to the payor?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  | 7a       |     |              |
| c        | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was  | 7b       |     |              |
| Ū        | required to file Form 8282?   | 7c       |     |              |
| d        | If "Yes," indicate the number of Forms 8282 filed during the year 7d  | 1        |     | <del></del>  |
| 8        | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal   | <b>-</b> | Ī   |              |
| -        | benefit contract?   | 7e       | ŧ   |              |
| f        | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  | 7f       |     |              |
| g        | For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  | 7g       |     |              |
| h        | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as   |          |     |              |
|          | required?   | 7h       |     |              |
| 8        | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting   |          |     |              |
|          | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring  |          | 1   |              |
|          | organization, have excess business holdings at any time during the year?  | 8        |     |              |
| 9        | Sponsoring organizations maintaining donor advised funds  |          | 1   |              |
| а        | Did the organization make any taxable distributions under section 4966?   | 9a       |     |              |
| b        | Did the organization make a distribution to a donor, donor advisor, or related person?  | 9b       |     |              |
| 10       | Section 501(c)(7) organizations. Enter  |          | ]   |              |
| a        | Initiation fees and capital contributions included on Part VIII, line 12  | _        | 1   |              |
| b<br>I4  | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  [10b]  | _        | į   |              |
| 11       | Section 501(c)(12) organizations. Enter   |          | 1   |              |
| a        | Gross income from members or shareholders  Cross income from other equipment (Po not not are amounts due or not to other equipment)   | -        | 1   |              |
| р        | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )  |          | 1   |              |
| 122      | , , , , , , , , , , , , , , , , , , ,   | <b>-</b> | ŧ   |              |
| i2a<br>h | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b | 12a      |     |              |
| <u>b</u> | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b   | <u> </u> |     |              |

Form 990 (2009) IVY LEAF SCHOOL, INC. 23-2225232 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body 1a 1a b Enter the number of voting members that are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code ) Yes No X 10a Does the organization have local chapters, branches, or affiliates? 10a If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with those of the organization? 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 X 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give X rise to conflicts? 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this is done 13 13 Does the organization have a written whistleblower policy? 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15a Х 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard 16b the organization's exempt status with respect to such arrangements? Section C. Disclosure PA 17 List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)

- 18

available for public inspection. Indicate how you make these available. Check all that apply

Own website | Another's website | Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the 5902 DEVON P; ACE MRS LILLER GREEN organization >

PHILADELPHIA

PA 19138

215-844-4409

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

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

- 1a Complete this table for all persons required to be listed 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."

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

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

| (A) Name and Title | (B)<br>Average | Pos                               | ition (               | (chec   | C)<br>k ali t | hat a                        | pply)  | (D) Reportable compensation           | (E)<br>Reportable<br>compensation          | (F)<br>Estimated<br>amount of  |
|--------------------|----------------|-----------------------------------|-----------------------|---------|---------------|------------------------------|--------|---------------------------------------|--|--|
|                    | week           | Individual trustee<br>or director | Institutional trustee | Officer | Key employee  | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | other other compensation from the organization and related organizations |
| SEE ATTACHED       |                |                                   |                       |         |               |                              |        | 0                                     | 0  | 0  |
|                    |                |                                   |                       |         |               |                              |        |                                       |  |  |
|                    |                |                                   |                       |         |               |                              |        |                                       |  |  |
|                    |                |                                   |                       |         |               |                              |        |                                       |  |  |
|                    |                |                                   |                       |         |               |                              |        |                                       |  |  |
|                    |                |                                   |                       |         |               |                              |        | ١                                     |  |  |
|                    |                |                                   |                       |         |               |                              |        |                                       |  |  |
|                    |                |                                   |                       |         |               |                              |        |                                       |  |  |
|                    |                |                                   |                       |         |               |                              |        |                                       |  |  |
|                    |                | _                                 |                       |         |               |                              |        | ,                                     |  |  |
|                    |                |                                   |                       |         |               |                              |        |                                       | <u></u>                                    |  |
|                    |                |                                   |                       |         |               |                              |        |                                       |  |  |
|                    |                |                                   |                       |         |               |                              |        |                                       |  |  |
|                    |                |                                   |                       |         |               |                              |        |                                       |  |  |
| . ,                |                |                                   |                       |         |               |                              |        |                                       |  |  |
|                    |                |                                   |                       |         |               |                              |        |                                       | -  |  |
|                    |                |                                   |                       |         |               |                              |        |                                       |  |  |

DAA

| Pa   | t VII Section A. Officers,  | Directors, Trus             | tees                           | , Key                 | y Em    | plo          | /ees,                        | and      | d Highest Compensated E                        | mployees (continued)                       |                            |   |                 |
|--|---|-----------------------------|--------------------------------|-----------------------|---------|--------------|------------------------------|----------|--|--|----------------------------|---|-----------------|
|  | (A)<br>Name and Title   | (B)<br>Average<br>hours per |                                |                       | chec    | C)<br>kallt  | hat ap                       |          | (D) Reportable compensation                    | (E)<br>Reportable<br>compensation          | Est                        | (F)<br>imated<br>ount of                                      |                 |
|  |   | week                        | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former   | from<br>the<br>organization<br>(W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | comp<br>fro<br>orga<br>and | ther<br>ensation<br>m the<br>nization<br>related<br>nizations |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  | . **                                       |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
| 1b   | Total  Total number of individuals (individuals)  | duding but not lim          | utod                           | to th                 | 000     | listo        |                              | <u> </u> | who received more than \$1                     | 00.000 ip                                  | l                          |   |                 |
| 2  | reportable compensation from  |                             |                                |                       | ose     | istet        | . au                         | ve)      | who received more than \$1                     |  |                            |   | <u> </u>        |
| 3  | Did the organization list any for   |                             |                                |                       |         |              |                              | loye     | e, or highest compensated                      |  |                            | Yes   | No<br>X         |
| 4  | employee on line 1a? If "Yes," of<br>For any individual listed on line<br>the organization and related organization | 1a, is the sum of           | repo                           | ortab                 | le co   | mpe          | ensat                        | ion a    | and other compensation from                    | m<br>uch                                   | 3                          |   | 1               |
| 5  | individual  Did any person listed on line 1a  | receive or accru            | е со                           | mpe                   | nsati   | ion fi       | rom a                        | any ι    | unrelated organization for                     | ~··  | 4                          | -   | X               |
|  | services rendered to the organ  |                             | comp                           | olete                 | Sch     | edul         | e J fo                       | r su     | ich person                                     |  | 5                          |   | X               |
| 1  | tion B. Independent Contractor  Complete this table for your five compensation from the organize                    | e highest comper            | sate                           | d inc                 | lepe    | nder         | nt cor                       | ntrac    | ctors that received more tha                   | n \$100,000 of                             |                            |   |                 |
| (A) Name and business address  (B) Description of services |   |                             |                                |                       |         |              | (C)<br>Compens               | ation    |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              | -                            |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              | _        |  |  |                            |   |                 |
|  |   |                             |                                |                       |         | -            |                              |          |  |  |                            |   |                 |
|  |   |                             |                                |                       |         |              |                              | <u> </u> | <del></del>                                    |  |                            | <del></del>   |                 |
| <b>2</b><br>DAA  | Total number of independent c more than \$100,000 in comper   |                             |                                |                       |         |              | to th                        | ose      | listed above) who received                     |  |                            | 0<br>orm <b>99</b>  | <b>0</b> (2009) |

| P77** P1  | 0 (2009) IVI LEAF SC  |                  | .NC.        |  | 23-2223232                             |   | Page 3   |
|---|---|------------------|-------------|--|--|---|--|
| Part V  | /III Statement of Reve                                      | nue              |             | /A\  | (0)                                    | (C)                                     | 1 /D)  |
|   | •   |                  |             | (A)<br>Total revenue                               | (B) Related or exempt function revenue | (C)<br>Unrelated<br>business<br>revenue | (D) Revenue excluded from tax under sections 512, 513, or 514  |
| 3 <u>1</u> 3                                      | Federated campaigns   | 1a               |             |  |  | <del>n an i arabanana - i aha</del>     | THE THE STATE OF T |
| Ē .   | Membership dues   | 1b               |             | :  |  |   |  |
|   | Fundraising events  | 1c               |             |  |  |   |  |
| ar d  | Related organizations                                       | 1d               |             | `  |  |   |  |
| E e   | Government grants (contributions)                           | 1e               |             |  |  |   |  |
| S 1   | All other contributions, gifts, grants,                     |                  |             |  |  |   | 1  |
|   | and similar amounts not included above                      | 1f               |             |  |  |   | <b>!</b>   |
| 힏   | Noncash contributions included in lines 1a-                 | -1f: \$          |             |  |  |   | •  |
| Program Service Kevenue and other similar amounts | Total. Add lines 1a-1f                                      |                  | <b>&gt;</b> |  |  |   |  |
| 2   |   |                  | Busn Code   |  |  |   |  |
| Ē   2a  | ı   |                  |             |  |  | - <del></del>                           | <del></del>  |
| <u>ا ال</u>                                       |   |                  |             |  |  |   |  |
| c   | :   |                  |             |  |  |   |  |
| [ 전   | I   |                  |             |  |  |   |  |
| E   e   |   |                  |             |  |  |   |  |
| 호  1  | f All other program service revei                           | nue              |             |  |  |   | <u></u>  |
| <u> </u>  | Total. Add lines 2a–2f                                      |                  | <b>&gt;</b> |  |  |   |  |
| 3   | , ,   | dividends, inter | est, and    |  |  |   |  |
|   | other similar amounts)                                      |                  | <u> </u>    |  |  |   | <del></del>  |
| 4   | Income from investment of tax                               | -exempt bond p   | proceeds -  |  |  |   |  |
| 5   | Royalties   |                  | <b>•</b>    |  |  | ······································  |  |
|   | (ı) Real  | (11              | ) Personal  |  | 1                                      |   |  |
| 6a  |   |                  |             | ,  | ,                                      |   |  |
| þ   | `   | <del></del>      |             |  |  |   |  |
| C   | ` ' <del> </del>  |                  |             |  | :                                      |   | -  |
| d<br>7a   | Net rental income or (loss) Gross amount from (i) Securitie |                  | (II) Other  |  | ,                                      |   |  |
|   | sales of assets   |                  | (ii) Other  |  |  |   |  |
| 1.  | other than inventory  |                  |             |  |  |   | 1  |
| 6   |   |                  |             |  | 1                                      |   | 1  |
| ١.  | basis & sales exps<br>Gain or (loss)                        |                  |             |  |  |   |  |
| d   |   |                  | <b>•</b>    |  | Ī                                      |   |  |
| _   8a  |   | ents             |             |  | <del></del>                            | ···                                     |  |
| <b>o</b> 1  | (not including \$   |                  |             |  | ‡<br>‡                                 |   | ‡  |
| Other Revenu                                      | of contributions reported on line 1c                        | ,                |             |  |  | `                                       |  |
| ₽   | See Part IV, line 18  | ′ a              | ļ           |  |  |   | 1  |
| 힐 ,   | Less direct expenses  | b                |             |  |  |   | 1  |
| 5   3   | : Net income or (loss) from fund                            | Iraising events  | <b>•</b>    |  |  |   |  |
| 1   | Gross income from gaming activitie                          |                  |             | · <del>, , , , , , , , , , , , , , , , , , ,</del> |  |   |  |
|   | See Part IV, line 19  | a                | į           |  | , ,                                    |   |  |
| l b   | Less direct expenses  | b                |             |  | ,                                      |   |  |
|   | Net income or (loss) from gam                               | ing activities   | <b>&gt;</b> |  |  |   |  |
| 10ε   | Gross sales of inventory, less                              |                  |             |  |  | •                                       | Ĭ  |
|   | returns and allowances                                      | a                |             |  | 1                                      |   | 1  |
| b   | Less cost of goods sold                                     | b                |             |  | ‡                                      |   | 1  |
| <u></u>   | Net income or (loss) from sale                              |                  | <u> </u>    |  |  |   |  |
|   | Miscellaneous Revenue                                       | e                | Busn Code   |  | , , ,                                  |   | †  |
| 11a   | 1   |                  |             |  |  |   | <del> </del>   |
| l to  | )   |                  |             |  |  |   |  |
| 0   | ;   |                  |             |  | _                                      |   | <u>.</u>   |
| d   |   |                  | L           |  |  | · · · · · · · · · · · · · · · · · · ·   |  |
| 6   |   |                  | ▶           | -  | _                                      |   | <del> </del>   |
| 12  | Total Revenue. See instruction                              | ns               | <u> </u>    | 0  | 0                                      | <u></u>                                 | Form <b>990</b> (2005  |

Page 10

#### **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).

|          | not include amounts reported on lines 6b,  | (A) Total expenses | (B)<br>Program service                | (C)<br>Management and                            | (D)<br>Fundraising                                 |
|----------|--|--------------------|---------------------------------------|--|--|
|          | 8b, 9b, and 10b of Part VIII.  |                    | expenses                              | general expenses                                 | expenses   |
| 1        | Grant's and other assistance to governments and  |                    |                                       | :  |  |
|          | organizations in the U.S. See Part IV, line 21   |                    |                                       |  |  |
| 2        | Grants and other assistance to individuals in  |                    |                                       |  |  |
|          | the U.S. See Part IV, line 22  |                    | ·                                     |  |  |
| 3        | Grants and other assistance to governments,  |                    |                                       |  |  |
|          | organizations, and individuals outside the   |                    |                                       |  |  |
|          | U.S. See Part IV, lines 15 and 16  |                    |                                       |  |  |
| 4        | Benefits paid to or for members  |                    |                                       |  |  |
| 5        | Compensation of current officers, directors,   |                    |                                       |  |  |
|          | trustees, and key employees  |                    |                                       |  |  |
| 6        | Compensation not included above, to disqualified   |                    |                                       |  |  |
| •        | persons (as defined under section 4958(f)(1)) and  |                    |                                       |  |  |
|          | persons described in section 4958(c)(3)(B)   |                    |                                       |  |  |
| 7        | Other salanes and wages  |                    |                                       | 1  |  |
| 8        | Pension plan contributions (include section 401(k)   |                    |                                       |  | #*** <del>**</del> * * * * * * * * * * * * * * * * |
| Ü        | and section 403(b) employer contributions)   |                    |                                       |  |  |
| ۵        |  |                    |                                       |  |  |
| 9        | Other employee benefits Payroll taxes  |                    | ·                                     |  |  |
| 10       | •  | <u></u>            |                                       |  |  |
| 11       | Fees for services (non-employees)  |                    |                                       |  |  |
| _        | Management   |                    |                                       |  |  |
| b        | Legal  | 20,477             |                                       | 20,477   | •  |
|          | Accounting   | 20,177             |                                       |  | <del></del>  |
|          | Lobbying   |                    |                                       |  |  |
| _        | Professional fundraising services See Part IV, line 17                                     |                    | <del></del>                           |  |  |
| f        | Investment management fees   |                    |                                       | <del></del>                                      |  |
| 9        | Other  |                    |                                       |  |  |
| 12       | Advertising and promotion  |                    |                                       | <del>                                     </del> | <del></del>  |
| 13       | Office expenses  |                    |                                       | <del> </del>                                     |  |
| 14       | Information technology   | -                  |                                       | <del> </del>                                     | · · · · · · · · · · · · · · · · · · ·              |
| 15       | Royalties  |                    |                                       | <del> </del>                                     |  |
| 16       | Occupancy  |                    |                                       | <del> </del>                                     |  |
| 17       | Travel   |                    |                                       | <del>                                     </del> |  |
| 18       | Payments of travel or entertainment expenses   |                    |                                       |  |  |
|          | for any federal, state, or local public officials  |                    |                                       | <del> </del>                                     | <del></del>  |
| 19       | Conferences, conventions, and meetings   |                    |                                       | <del> </del>                                     |  |
| 20       | Interest   |                    |                                       |  | <u> </u>   |
| 21       | Payments to affiliates   | 16 000             | · · · · · · · · · · · · · · · · · · · | 16,008   |  |
| 22       | Depreciation, depletion, and amortization  | 16,008             | ···                                   | 10,000   | -  |
| 23       | Insurance  |                    |                                       |  |  |
|          |  |                    |                                       | `  |  |
| 24       | Other expenses Itemize expenses not  | . \$               |                                       |  |  |
|          | covered above (Expenses grouped together   | [                  |                                       | , ,  |  |
|          | and labeled miscellaneous may not exceed   |                    | ŧ                                     |  |  |
|          | 5% of total expenses shown on line 25 below )  | 2,112              |                                       | 2,112  |  |
| а        | PROFESSIONAL SERVICES  |                    |                                       | 2,112  |  |
| b        | GENERAL MISCELLANEOUS  | 2,023              | <del></del>                           | 460  |  |
| C        | REPAIRS & MAINTENANCE  | 92                 |                                       | 92   |  |
| d        | EDUCATIONAL SUPPLIES OFFICE EXPENSE  | 39                 |                                       | 39   | •  |
| 6        |  |                    |                                       | 32   |  |
|          | All other expenses   | 41,211             |                                       | 41,211   |  |
| 25<br>26 | Total functional expenses. Add lines 1 through 24f  Joint costs. Check here ▶ If following |                    |                                       |  |  |
| 26       | SOP 98-2 Complete this line only if the  |                    |                                       |  |  |
|          | organization reported in column (B) joint costs from a combined educational campaign and   |                    |                                       |  |  |
|          | fundraising solicitation   |                    |                                       | <u></u>  | 5 000 (000)  |

|               | art) | Ralance Shoot   |              |                                       | - 4443434                             |                | Page 11     |  |  |  |  |
|---------------|------|---|--------------|---------------------------------------|---------------------------------------|----------------|-------------|--|--|--|--|
| <u> </u>      | ## / | Salance Sheet   |              |                                       | (A)                                   | T              | (B)         |  |  |  |  |
|               |      | •   |              |                                       | Beginning of year                     |                | End of year |  |  |  |  |
|               | 1    | Cash—non-interest bearing                                   |              |                                       |                                       | 1              |             |  |  |  |  |
|               | 2    | Savings and temporary cash investments                      |              | }                                     | 25,203                                | 2              | 18,502      |  |  |  |  |
|               | 3    | Pledges and grants receivable, net                          |              |                                       | 23,203                                | 3              | +0,302      |  |  |  |  |
|               | 4    | Accounts receivable, net                                    |              | -                                     |                                       | 4              | <del></del> |  |  |  |  |
|               | 5    | Receivables from current and former officers, directors,    | rustees      | key                                   | · · · · · · · · · · · · · · · · · · · | 7              | <del></del> |  |  |  |  |
|               |      | employees, and highest compensated employees Comp           |              | · •                                   |                                       | 1              |             |  |  |  |  |
|               |      | Schedule L  | note i ai    | [                                     |                                       | 5              |             |  |  |  |  |
|               | 6    | Receivables from other disqualified persons (as defined     | under sø     | ection                                | <del>1,</del>                         |                |             |  |  |  |  |
|               |      | 4958(f)(1)) and persons described in section 4958(c)(3)(    |              | į.                                    |                                       |                |             |  |  |  |  |
|               |      | Part II of Schedule L                                       | B) 0011      | ipiete                                |                                       | 6              |             |  |  |  |  |
| ts            | 7    | Notes and loans receivable, net                             |              | -                                     |                                       | 7              | <del></del> |  |  |  |  |
| Assets        | 8    | Inventories for sale or use                                 |              | <u></u>                               |                                       | 8              | <del></del> |  |  |  |  |
| ĕ             | 9    | Prepaid expenses and deferred charges                       |              | -                                     |                                       | 9              | <del></del> |  |  |  |  |
|               | _    | Land, buildings, and equipment cost or                      | 1            |                                       |                                       | -              |             |  |  |  |  |
|               |      | other basis Complete Part VI of Schedule D                  | 10a          | 769,879                               |                                       | 1              |             |  |  |  |  |
|               | h    | Less accumulated depreciation                               | 10a          | 754,187                               | 31,700                                | 10c            | 15,692      |  |  |  |  |
|               | 11   | Investments—publicly traded securities                      | LIUD         | 7317107                               | 31,700                                | 11             | 15,052      |  |  |  |  |
|               | 12   | Investments—other securities See Part IV, line 11           | -            |                                       | 12                                    |                |             |  |  |  |  |
|               | 13   | Investments—program-related See Part IV, line 11            |              |                                       |                                       |                |             |  |  |  |  |
|               | 14   | Intangible assets   |              | 13<br>14                              |                                       |                |             |  |  |  |  |
|               | 15   | Other assets See Part IV, line 11                           | -            | <del></del>                           |                                       |                |             |  |  |  |  |
|               | 16   | ,   | ,            | -                                     | 56,903                                | 1 <sup>5</sup> | 34,194      |  |  |  |  |
|               | 17   | Total assets. Add lines 1 through 15 (must equal line 34    | <del>/</del> |                                       | 30,903                                | 17             | 18,502      |  |  |  |  |
|               | 18   | Accounts payable and accrued expenses                       | ·———         |                                       | 10,302                                |                |             |  |  |  |  |
|               | 19   | Grants payable Deferred revenue                             | -            |                                       | 18                                    |                |             |  |  |  |  |
|               | 20   |   |              | -                                     |                                       | 19             | <del></del> |  |  |  |  |
| "             |      | Tax-exempt bond liabilities                                 | Calcul       | -  -  -  -  -  -  -  -  -  -  -  -  - |                                       | 20             | <del></del> |  |  |  |  |
| Liabilities   | 21   | Escrow or custodial account liability Complete Part IV of   |              | lie D                                 | · · · · · · · · · · · · · · · · · · · | 21             |             |  |  |  |  |
| ij            | 22   | Payables to current and former officers, directors, trustee |              | ļ.                                    |                                       | 1              |             |  |  |  |  |
| iak           |      | employees, highest compensated employees, and disqui        | alified      |                                       |                                       | aa †           |             |  |  |  |  |
| _             | 22   | persons Complete Part II of Schedule L                      |              | -                                     |                                       | 22             |             |  |  |  |  |
|               | 23   | Secured mortgages and notes payable to unrelated third      | •            | -                                     |                                       | 23             |             |  |  |  |  |
|               | 24   | Unsecured notes and loans payable to unrelated third pa     | rties        | -                                     |                                       | 24             |             |  |  |  |  |
|               | 25   | Other liabilities Complete Part X of Schedule D             |              | -                                     |                                       | 25             | 18,502      |  |  |  |  |
|               | 26   | Total liabilities. Add lines 17 through 25                  | ٠ . اح       |                                       |                                       | 26             | 10,302      |  |  |  |  |
| Fund Balances |      | Organizations that follow SFAS 117, check here ▶            | n_ and       |                                       | ·                                     | 1              |             |  |  |  |  |
| ă             | 27   | complete lines 27 through 29, and lines 33 and 34.          |              |                                       | 56,903                                | 2-             | 15,692      |  |  |  |  |
| al            | 27   | Unrestricted net assets                                     |              | -                                     | 30,903                                | 27             | 15,092      |  |  |  |  |
|               | 28   | Temporarily restricted net assets                           |              | }                                     |                                       | 28             |             |  |  |  |  |
| un            | 29   | Permanently restricted net assets                           | <b>.</b>     | -,                                    |                                       | 29             |             |  |  |  |  |
|               |      | Organizations that do not follow SFAS 117, check he         | re 🖊         | _                                     |                                       | ŧ              |             |  |  |  |  |
| o             | 20   | and complete lines 30 through 34.                           | •            |                                       |                                       |                |             |  |  |  |  |
| ets           | 30   | Capital stock or trust principal, or current funds          | £            | -                                     |                                       | 30             |             |  |  |  |  |
| SS            | 31   | Paid-in or capital surplus, or land, building, or equipment |              |                                       |                                       |                |             |  |  |  |  |
| Net Assets    | 32   | Retained earnings, endowment, accumulated income, or        | otner fu     | inas                                  | E 6 002                               | 32             | 1F 600      |  |  |  |  |
| Zel           | 33   | Total net assets or fund balances                           |              | -                                     | 56,903                                | 33             | 15,692      |  |  |  |  |
|               | 34_  | Total liabilities and net assets/fund balances              |              |                                       | 56,903                                | 34             | 34,194      |  |  |  |  |

Form **990** (2009)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2009)

3b

SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

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

OMB No 1545-0047 2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

IVY LEAF SCHOOL, INC.

C/O LILLER GREEN

Employer identification number 23 - 2225232

|            | •        |  | <u> </u>           | THER G           | KEEN                                   |                 |  |                             |            |             | 23.            | - 444    | 3434        |         |  |
|------------|----------|--|--------------------|------------------|--|-----------------|--|-----------------------------|------------|-------------|----------------|----------|-------------|---------|--|
| P          | art I    | Reas   | on for Publ        | ic Charity       | Status (All orga                       | inizations      | must co  | omplete                     | this p     | art.) S     | ee ins         | truction | ons         |         |  |
| The        | organ    | nization is not  | a private found    | ation because    | it is (For lines 1 thr                 | ough 11, che    | ck only or                                       | ne box )                    |            |             |                | -        |             |         |  |
| 1          |          | A church, cor  | nvention of chu    | rches, or asso   | ciation of churches                    | described in    | section 1  | 70(b)(1)(                   | A)(i).     |             |                |          |             |         |  |
| 2          | X        |  |                    |                  | N)(ii). (Attach Schedu                 |                 |  |                             | ,,,        |             |                |          |             |         |  |
| 3          | П        |  |                    |                  | e organization descr                   |                 | on 170(b)  | (1)(A)(iii)                 |            |             |                |          |             |         |  |
| 4          |          | •  | •                  | •                | in conjunction with a                  |                 |  |                             |            | )(A)(iii)   | Enter th       | e hospi  | ıtal's name |         |  |
|            | ш        | city, and state  | _                  |                  | an conjunction than t                  | a moophur de    | oriboa iii                                       |                             |            | //-///-     |                | ic noop. | naro namo,  |         |  |
| 5          |          | •  |                    | r the benefit of | a college or upwere                    | uhi awaad ar    | anaratad   | by a gay                    | rnmonte    | al unit do  | aaribad        |          |             |         |  |
| J          | Ш        |  |                    |                  | a college or univers                   | illy owned of   | operateu   | by a gove                   | ennienta   | ai uiiii de | scribed        | III      |             |         |  |
| _          |          | •  | b)(1)(A)(iv). (C   | •                | •                                      |                 |  |                             |            |             |                |          |             |         |  |
| -          | -        | •  | , -                |                  | vernmental unit des                    |                 | •  |                             |            |             |                |          |             |         |  |
| 7          |          | •  |                    | -                | ubstantial part of its                 | support from    | a govern   | mental ur                   | ut or fron | n the gei   | neral pu       | plic     |             |         |  |
| _          |          |  | • •                |                  | mplete Part II)                        |                 |  |                             |            |             |                |          |             |         |  |
| 8          | $\vdash$ | -  |                    |                  | <b>70(b)(1)(A)(vi).</b> (Com           | •               | •  |                             |            |             |                |          |             |         |  |
| 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 investme     | ent income and   | d unrelated business                   | taxable inco    | me (less   | section 5                   | 11 tax) fr | om busi     | nesses         |          |             |         |  |
|            |          | acquired by t  | ne organization    | after June 30    | , 1975 See section                     | 509(a)(2) (     | Complete   | Part III)                   |            |             |                |          |             |         |  |
| 10         |          | An organizati  | on organized ai    | nd operated e    | xclusively to test for                 | public safety   | See sec  | tion 509(                   | a)(4).     |             |                |          |             |         |  |
| 11         |          | An organizati  | on organized ai    | nd operated e    | xclusively for the ber                 | nefit of, to pe | rform the  | functions                   | of, or to  | carry ou    | t the          |          |             |         |  |
|            |          | purposes of o  | ne or more pul     | blicly supporte  | d organizations desc                   | cribed in sect  | tion 509(a                                       | )(1) or se                  | ction 509  | 9(a)(2) S   | See <b>sec</b> | tion     |             |         |  |
|            |          | 509(a)(3). Ch  | eck the box tha    | at describes th  | e type of supporting                   | organization    | and comp   | olete lines                 | 11e thr    | ough 11     | h              |          |             |         |  |
|            |          | а Туре   | l <b>b</b>         | Type II          | c Type                                 | III–Functiona   | illy integra                                     | ted                         | d          | Тур         | e III–Otl      | ner      |             |         |  |
| е          |          | By checking t  | his box; I certify | y that the orga  | nization is not contro                 | olled directly  | or indirect                                      | ly by one                   | or more    | disquali    | fied           |          |             |         |  |
|            | _        | persons othe   | r than foundatio   | n managers a     | ind other than one o                   | r more public   | dy suppor  | ted organ                   | izations   | describe    | d in sec       | tion     |             |         |  |
|            |          | 509(a)(1) or s   | ection 509(a)(2    | 2)               |  |                 |  |                             |            |             |                |          |             |         |  |
| f          |          |  |                    |                  | mination from the IR                   | S that it is a  | Type I, Ty                                       | pe II, or T                 | ype III s  | upportin    | g              |          |             |         |  |
|            |          |  | check this box     |                  |  |                 |  | •                           |            |             | _              |          |             |         |  |
| g          |          | _  |                    | the organization | on accepted any gift                   | or contribution | on from ar                                       | nv of the                   |            |             |                |          |             |         |  |
| 9          |          | following per  |                    | <b>g</b>         | -··· , 5···                            |                 |  | ,                           |            |             |                |          |             |         |  |
|            |          |  |                    | r indirectly cor | ntrols, either alone or                | r together wil  | h nersons  | describe                    | d in (ii)  |             |                |          |             | Yes     | No   |
|            |          | •  | -                  | -                | the supported organ                    | _               | in persone                                       | acsonbe                     | (,         |             |                |          | 11g(i)      | +       | <del>                                     </del> |
|            |          |  |                    |                  | ed in (i) above?                       | iiZaliOi11      |  |                             |            |             |                |          | 11g(ii)     | - 1     | <del> </del>                                     |
|            |          | • •  | · ·                |                  | • •                                    | ahovo?          |  |                             |            |             |                |          | 11g(iii     |         | $\vdash$   |
| _          |          | • •  | -                  | •                | escribed in (i) or (ii) a              |                 |  |                             |            |             |                |          | [1,8/111    | ш       |  |
| _ <u>n</u> |          |  | T                  |                  | e supported organiza                   |                 | (hy) to the c                                    | reservation                 | (v) Dela   | ou notify   | (41)           | s the    | (vii) Am    | ount of |  |
| (1)        |          | of supported anization   | (11)               | EIN              | (III) Type of orga<br>(described on li |                 | in col (I) lis                                   | rganization<br>sted in your |            | nization in | organizat      |          | sup         |         |  |
|            | 5        |  |                    |                  | above or IRC s                         |                 | 1  | document?                   | col (i)    |             | (i) organı     |          | , ,         |         |  |
|            |          |  |                    |                  | (see instruct                          | ions))          | V  |                             |            | port?       | Voc.           |          | 1           |         |  |
|            |          |  | <del> </del>       |                  |  |                 | Yes  | No                          | Yes        | No          | Yes            | No       |             |         |  |
|            |          |  |                    |                  |  |                 |  |                             |            |             |                |          |             |         |  |
|            |          |  | <del> </del>       |                  |  |                 |  |                             |            |             |                |          |             |         |  |
|            |          |  |                    |                  |  |                 | 1  |                             |            |             |                |          |             |         |  |
|            |          | <del></del>  | <del></del>        |                  |  | <del></del>     | <del>                                     </del> | <del>-</del>                |            |             | <u> </u>       |          |             |         |  |
|            |          |  |                    |                  |  | <u> </u>        |  |                             |            | ļ<br>       |                |          |             |         |  |
|            |          |  |                    |                  |  |                 |  |                             |            |             |                |          |             |         |  |
|            |          |  |                    |                  |  |                 |  |                             |            |             |                |          |             |         |  |
|            |          | <u> </u>   |                    | <del></del>      |  |                 |  |                             |            |             | -              |          |             |         |  |
|            |          |  | <u> </u>           |                  | <u>‡</u>                               |                 | 1  |                             |            | 1           | ĺ              |          |             |         |  |

Schedule A (Form 990 or 990-EZ) 2009 IVY LEAF SCHOOL, INC.

Page 2

| P   | art II Support Schedule for O   | rganizations D        | escribed in Se                          | ections 170(b)           | (1)(A)(iv) and       | 170(b)(1)(A)(vi)                        |             |
|-----|---|-----------------------|---|--------------------------|----------------------|---|-------------|
|     | . (Complete only if you che   | ecked the box of      | on line 5, 7, or                        | 8 of Part I)             |                      | ·                                       | <del></del> |
|     | tion A. Public Support  |                       | · · · · · · · · · · · · · · · · · · ·   | ····                     |                      | , |             |
| Ca  | lendar year (or fiscal year beginning in) ▶   | (a) 2005              | ( <b>b</b> ) 2006                       | (c) 2007                 | (d) 2008             | (e) 2009                                | (f) Total   |
| 1   | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")  |                       |   |                          |                      |   |             |
| 2   | Tax revenues levied for the organization's<br>benefit and either paid to or expended on<br>its behalf   |                       |   |                          |                      |   |             |
| 3   | The value of services or facilities furnished by a governmental unit to the organization without charge   |                       | 7                                       |                          |                      |   | ···         |
| 4   | Total. Add lines 1 through 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) |                       |   |                          |                      |   |             |
| 6   | Public support. Subtract line 5 from line 4   |                       |   |                          |                      |   |             |
|     | tion B. Total Support   |                       |   |                          | <del></del>          |   |             |
| Ca  | lendar year (or fiscal year beginning in) ▶   | (a) 2005              | ( <b>b</b> ) 2006                       | (c) 2007                 | (d) 2008             | (e) 2009                                | (f) Total   |
| 7   | Amounts from line 4   |                       |   |                          |                      |   |             |
| 8   | Gross income from interest, dividends,<br>payments received on securities loans,<br>rents, royalties and income from similar<br>sources   |                       |   |                          |                      |   |             |
| 9   | Net income from unrelated business activities, whether or not the business is regularly carried on  |                       |   |                          |                      |   |             |
| 0   | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)   |                       |   |                          |                      |   |             |
| 11  | Total support. Add lines 7 through 10   |                       |   | <u> </u>                 |                      | 12                                      | <del></del> |
| 2   | Gross receipts from related activities, etc. (  | •                     | accord third fourt                      | h or fifth tay year i    | as a spetion 501(c)  | <u> </u>                                |             |
| 3   | First five years. If the Form 990 is for the  | -                     | secona, inira, ioan                     | ii, oi iiitii tax yeai a | as a section so i(c) | (3)                                     | ▶ □         |
| 300 | organization, check this box and stop here tion C. Computation of Public Su   |                       | ane                                     | <del></del>              |                      |   |             |
| 4   | Public support percentage for 2009 (line 6,   | <del></del>           |   | (f))                     |                      | 14                                      | %           |
| 5   | Public support percentage from 2008 Sche  |                       |   | \' <i>'</i> //           |                      | 15                                      | %           |
| 6a  | 33 1/3 % support test—2009. If the organi   |                       |   | 3. and line 14 is 33     | 1/3 % or more, che   | L                                       |             |
| -   | and stop here. The organization qualifies a   |                       |   | ., •                     | ,                    |   | ▶ []        |
| b   | 33 1/3 % support test—2008. If the organi   |                       | •                                       | or 16a, and line 15      | ıs 33 1/3 % or more  | e, check this                           | _           |
| _   | box and <b>stop here</b> . The organization qualif  |                       |   |                          |                      |   | ▶ 🗌         |
| 7a  | 10%-facts-and-circumstances test—200  |                       |   |                          | or 16b, and line 14  | ıs 10% or                               |             |
|     | more, and if the organization meets the "fac  |                       |   |                          |                      |   |             |
|     | organization meets the "facts-and-circumst  |                       |   |                          |                      |   | ▶ []        |
| b   | 10%-facts-and-circumstances test—200  | B If the organization | n did not check a b                     | ox on line 13, 16a,      | 16b, or 17a, and lii | ne 15 is 10% or                         |             |
|     | more, and if the organization meets the "fac  |                       |   |                          |                      |   |             |
|     | organization meets the "facts-and-circumst  |                       |   |                          |                      |   | ▶ □         |
| 8   | Private foundation. If the organization did   | not check a box on    | line 13, 16a, 16b,                      | 17a, or 17b, check       | this box and see in  | nstructions                             | ▶ ∐         |
|     |   |                       |   | <del></del>              | <del></del>          | <del></del>                             |             |

23-2225232 IVY LEAF SCHOOL, INC. Schedule A (Form 990 or 990-EZ) 2009 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (d) 2008 (a) 2005 (b) 2006 (c) 2007 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that sexceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support (Subtract line 7c from R line 6 ) Section B. Total Support (d) 2008 (e) 2009 (f) Total (c) 2007 Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 Amounts from line 6 Gross income from interest, dividends, 10a payments received on securities loans. rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, 13 and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 % 16 % Public support percentage from 2008 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage % 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 18 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3 % support tests-2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and

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

Schedule A (Form 990 or 990-EZ) 2009 IVY LEAF SCHOOL, INC.

23-2225232

Page 4

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 Provide any other additional information. See instructions

#### SCHEDULE D (Form 990)

Department 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

Open to Public Inspection

| Nam                                     | e of the organization   |  | Employe     | r identification number         |
|---|---|--|-------------|---------------------------------|
| I                                       | VY LEAF SCHOOL, INC.  |  |             |                                 |
| <u>C</u>                                | O LILLER GREEN  |  |             | 225232                          |
| P                                       | Organizations Maintaining Donor Advised Fun<br>the organization answered "Yes" to Form 990, F   |  | counts      | . Complete if                   |
|   |   | (a) Donor advised funds                          | (b)         | Funds and other accounts        |
| 1                                       | Total number at end of year   |  |             |                                 |
| 2                                       | Aggregate contributions to (during year)  |  |             |                                 |
| 3                                       | Aggregate grants from (during year)   |  |             |                                 |
| 4                                       | Aggregate value at end of year  |  |             |                                 |
| 5                                       | Did the organization inform all donors and donor advisors in writing that the   | ne assets held in donor advised                  |             |                                 |
|   | funds are the organization's property, subject to the organization's exclus   | ive legal control?                               |             | Yes No                          |
| 6                                       | Did the organization inform all grantees, donors, and donor advisors in wi  | riting that grant funds can be                   |             |                                 |
|   | used only for charitable purposes and not for the benefit of the donor or d   | onor advisor, or for any other                   |             |                                 |
| *************************************** | purpose conferring impermissible private benefit?   |  |             | Yes No                          |
| P                                       | art II Conservation Easements. Complete if the orga   | nization answered "Yes" to Form                  | 990, Pa     | art IV, line 7                  |
| 1                                       | Purpose(s) of conservation easements held by the organization (check al   | l that apply)                                    |             |                                 |
|   | Preservation of land for public use (e.g., recreation or pleasure)  | Preservation of an historically impo             | rtant land  | area                            |
|   | Protection of natural habitat   | Preservation of certified historic stri          | ucture      |                                 |
|   | Preservation of open space  |  |             |                                 |
| 2                                       | Complete lines 2a through 2d if the organization held a qualified conserva  | ation contribution in the form of a conservation | on          |                                 |
|   | easement on the last day of the tax year  |  | ·········   |                                 |
|   |   |  |             | Held at the End of the Tax Year |
| а                                       | Total number of conservation easements  |  | 2a          |                                 |
| b                                       | Total acreage restricted by conservation easements  |  | 2b          |                                 |
| C                                       | Number of conservation easements on a certified historic structure include  | led in (a)                                       | 2c          |                                 |
| d                                       | Number of conservation easements included in (c) acquired after 8/17/06   |  | 2d          |                                 |
| 3                                       | Number of conservation easements modified, transferred, released, extin   | guished, or terminated by the organization of    | luring      |                                 |
|   | the taxable year  |  |             |                                 |
| 4                                       | Number of states where property subject to conservation easement is loc   | ated   |             |                                 |
| 5                                       | Does the organization have a written policy regarding the periodic monito   | ring, inspection, handling of                    |             | n n                             |
|   | violations, and enforcement of the conservation easements it holds?   |  |             | Yes No                          |
| 6                                       | Staff and volunteer hours devoted to monitoring, inspecting, and enforcing  | g conservation easements during the year         |             |                                 |
|   | <b>-</b>  |  |             |                                 |
| 7                                       | Amount of expenses incurred in monitoring, inspecting, and enforcing cor  | nservation easements during the year             |             |                                 |
|   | <b>S</b>  |  |             |                                 |
| 8                                       | Does each conservation easement reported on line 2(d) above satisfy the   | e requirements of section                        |             | □ v <sub>aa</sub> □ Na          |
| _                                       | 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?   |  |             | Yes No                          |
| 9                                       | In Part XIV, describe how the organization reports conservation easement balance sheet, and include, if applicable, the text of the footnote to the organization. |  |             |                                 |
|   | the organization's accounting for conservation easements  | gamzation's illiancial statements that describ   | Jes         |                                 |
| D <sub>2</sub>                          | organizations Maintaining Collections of Art,   | Historical Treasures or Other Si                 | milar A     | ssets                           |
|   | Complete if the organization answered "Yes" to  |  |             |                                 |
| 1a                                      | If the organization elected, as permitted under SFAS 116, not to report in  | its revenue statement and balance sheet we       | orks of     |                                 |
|   | art, historical treasures, or other similar assets held for public exhibition, e  | education, or research in furtherance of publ    | ic service  | S.                              |
|   | provide, in Part XIV, the text of the footnote to its financial statements tha  | t describes these items                          |             |                                 |
| b                                       | If the organization elected, as permitted under SFAS 116, to report in its r  | evenue statement and balance sheet works         | of art,     |                                 |
|   | historical treasures, or other similar assets held for public exhibition, educ  | cation, or research in furtherance of public se  | ervice,     |                                 |
|   | provide the following amounts relating to these items   |  |             |                                 |
|   | (i) Revenues included in Form 990, Part VIII, line 1  |  | <b>&gt;</b> | \$                              |
|   | (ii) Assets included in Form 990, Part X  |  | <b>&gt;</b> | \$                              |
| 2                                       | If the organization received or held works of art, historical treasures, or ot  | her sımılar assets for financıal gaın, provide   | the         |                                 |
|   | following amounts required to be reported under SFAS 116 relating to the  | se items   |             |                                 |
| а                                       | Revenues included in Form 990, Part VIII, line 1  |  | <b>&gt;</b> | \$                              |
| b                                       | Assets included in Form 990, Part X   |  | •           | \$                              |
|   |   |  |             |                                 |

769,879

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Schedule D (Form 990) 2009

15,692

15,692

754,187

d Equipment

e Other

| Part VII        | Investments-Other Securities. See Fo                                 | rm 990, I        | Part X, line 12                        |   |                 |
|-----------------|--|------------------|--|---|-----------------|
| •               | (a) Description of security or category (including name of security) |                  | (b) Book value                         | (c) Method of valuation<br>Cost or end-of-year market |                 |
| Financial deriv | atives   |                  |  |   |                 |
| Closely-held e  | quity interests  |                  |  |   |                 |
| Other           |  | [                |  |   |                 |
|                 |  |                  |  |   |                 |
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|                 | . <b></b>  | L                |  |   |                 |
|                 | . <b></b>  | L                |  |   |                 |
|                 | . <b></b>  |                  |  |   |                 |
|                 | . <del> </del>   | L                |  |   |                 |
|                 | . <b></b>  |                  |  |   |                 |
|                 |  |                  | ······································ |   | ·····           |
|                 | n (b) must equal Form 990, Part X, col. (B) line 12.)                | <b>•</b>         |  | <u> </u>  |                 |
| Part VIII       | Investments—Program Related. See Fo                                  | orm 990 <u>,</u> |  |   |                 |
|                 | (a) Description of investment type                                   |                  | (b) Book value                         | (c) Method of valuation Cost or end-of-year market    |                 |
|                 |  |                  |  |   |                 |
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|                 |  |                  |  |   |                 |
|                 | n (b) must equal Form 990, Part X, col. (B) line 13.)                | <b>&gt;</b>      |  |   |                 |
| Part IX         | Other Assets. See Form 990, Part X, line                             | e 15             |  |   |                 |
|                 | (a) Descri   | ption            |  | (I  | b) Book value   |
|                 |  | •                |  |   |                 |
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|                 | n (b) must equal Form 990, Part X, col (B) line 15)                  |                  | <del></del>                            | <u> </u>  |                 |
| Part X          | Other Liabilities. See Form 990, Part X,                             | line 25          | <del> </del>                           | <b>,</b>  | <del>-,,,</del> |
| 1               | (a) Description of liability   |                  | (b) Amount                             |   |                 |
| Federal income  | e taxes  |                  |  |   |                 |
|                 | ··· - · · · · · · · · · · · · · · · · ·                              |                  | ·                                      |   |                 |
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|                 |  |                  | · ·                                    | Į.  |                 |
| Total. (Column  | n (b) must equal Form 990, Part X, col. (B) line 25.)                | <b></b>          |  |   |                 |
| 2 FINI 40 Fox   | otnote. In Part XIV provide the text of the footnote to the          | organizati       | n'e financial etatemente               | that reports the                                      |                 |

organization's liability for uncertain tax positions under FIN 48

| Sche   | dule D (Form 990) 2009 IVY LEAF SCHOOL, INC.   |                       | 3-2225232        | Page <b>4</b> |
|--------|--|-----------------------|------------------|---------------|
| Pa     | Reconciliation of Change in Net Assets from Form 990   | to Audited Fina       | ncial Statements |               |
| 1      | Total revenue (Form 990, Part VIII, column (A), line 12)   |                       | 1                |               |
| 2      | Total expenses (Form 990, Part IX, column (A), line 25)  |                       | 2                |               |
| 3      | Excess or (deficit) for the year Subtract line 2 from line 1   |                       | 3                |               |
| 4      | Net unrealized gains (losses) on investments   |                       | 4                |               |
| 5      | Donated services and use of facilities   |                       | 5                |               |
| 6      | Investment expenses  |                       | 6                |               |
| 7      | Prior period adjustments   |                       | 7                |               |
| 8      | Other (Describe in Part XIV)   |                       | 8                |               |
| 9      | Total adjustments (net) Add lines 4 through 8  |                       | 9                |               |
| 10     | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9   | 9                     | 10               |               |
| Pa     | Reconciliation of Revenue per Audited Financial Statem   |                       | nue per Return   |               |
| 1      | Total revenue, gains, and other support per audited financial statements   |                       | 1                |               |
| 2      | Amounts included on line 1 but not on Form 990, Part VIII, line 12   |                       |                  | -             |
| а      | Net unrealized gains on investments  | 2a                    |                  |               |
| b      | Donated services and use of facilities   | 2b                    |                  |               |
| С      | Recoveries of prior year grants  | 2c                    |                  |               |
| d      | Other (Describe in Part XIV )  | 2d                    |                  |               |
| 6      | Add lines 2a through 2d  | L                     | 2e               |               |
| 3      | Subtract line 2e from line 1   |                       | 3                |               |
| 4      | Amounts included on Form 990, Part VIII, line 12, but not on line 1  |                       |                  |               |
| а      | Investment expenses not included on Form 990, Part VIII, line 7b   | 4a                    |                  |               |
| b      | Other (Describe in Part XIV )  | 4b                    |                  |               |
|        | Add lines 4a and 4b  | L                     | 4c               |               |
| 5      | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  |                       | 5                |               |
|        | rt XIII Reconciliation of Expenses per Audited Financial State   | ments With Exp        | enses per Return |               |
| 1      | Total expenses and losses per audited financial statements   |                       | 1                | <del>.</del>  |
| 2      | Amounts included on line 1 but not on Form 990, Part IX, line 25   |                       | <u> </u>         |               |
| a      | Donated services and use of facilities   | 2a                    |                  |               |
| b      | Prior year adjustments   | 2b                    |                  |               |
| c      | Other losses   | 2c                    |                  |               |
| d      | Other (Describe in Part XIV.)  | 2d                    |                  |               |
|        | Add lines 2a through 2d  |                       | 2e               |               |
| 3      | Subtract line 2e from line 1   |                       | 3                |               |
| 4      | Amounts included on Form 990, Part IX, line 25, but not on line 1:   | 1 1                   |                  |               |
| ٠,     | Investment expenses not included on Form 990, Part VIII, line 7b   | 4a                    |                  |               |
| b      | ·  | 4b                    | <del></del>      |               |
|        | Other (Describe in Part XIV ) Add lines 4a and 4b  | [ <del>TM</del> ]     | 4c               |               |
|        | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)   |                       | 5                | <del>,</del>  |
|        | rt XIV Supplemental Information  | *                     |                  |               |
| •      | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines                                       | nos 1a and 4. Part IV | lines 1h         |               |
|        |  |                       |                  |               |
|        | b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines to provide any additional information. | ies zu anu 40 Aiso C  | ompiete          |               |
| ılıs b | art to provide any additional information  |                       |                  |               |
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|---|------|----|-----|------------|-----|------|----|-----|------|-----|------|----|-----|------|----|-----------|----|----|---|---|---|---|---|---|---|---|------|----|-----|----|----|---|---|---|---|---|----|-------------|
| ₽ | art  | Χľ | V   | rm 9<br>Su | pp  | lem  | en | tal | Info | orm | atio | on | (co | ntin | ue | <u>d)</u> |    |    |   |   |   |   |   |   |   |   |      |    |     |    |    |   |   |   |   |   |    |             |
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|   |      |    |     |            |     |      |    |     |      |     |      |    |     |      |    |           |    |    |   |   |   |   |   |   |   |   |      |    |     |    |    |   |   |   |   |   |    |             |
| _ | _    | _  |     | _          | _   | _    | _  | _   | _    | _   | _    | _  | _   | _    |    | _         | _  | _  | _ | _ |   | _ | _ |   | _ | _ | _    |    | _   | _  | _  |   |   | _ | _ |   | _  |             |
|   |      |    |     |            |     |      |    |     |      |     |      |    |     |      |    |           |    |    |   |   |   |   |   |   |   |   |      |    |     |    |    |   |   |   |   |   |    |             |
| _ |      | _  | _   | _          | _   | _    | _  | _   | _    | _   | _    | _  | _   | _    | _  | _         | _  | _  | _ | _ | _ | _ | _ | _ | _ | _ | _    | _  | _   | _  | _  | _ | _ | _ | _ |   | _  | _           |
|   |      |    |     |            |     |      |    |     |      |     |      |    |     |      |    |           |    |    |   |   |   |   |   |   |   |   |      |    |     |    |    |   |   |   |   |   |    |             |
| _ | _    | _  | _   | _          | _   | _    | _  | _   | _    | _   | _    | _  | _   | _    |    | _         | _  | _  | _ | _ | _ | _ | _ |   | _ | _ |      |    |     |    |    |   | _ | _ | _ | _ | _  | _           |
|   |      | -  | _   | _          | _   | _    | _  |     | _    | _   |      | _  |     |      |    | _         | _  |    | _ | _ |   |   |   | _ | _ | _ | _    | _  | _   | _  |    | _ |   |   | _ |   | _  | _           |
| _ |      |    | _   |            | _   | _    | _  |     | _    | _   | _    | _  | _   | _    | _  | _         | _  | _  | _ | _ |   |   |   |   |   |   |      |    |     |    |    |   |   |   |   |   |    | _           |
|   |      | _  | _   | _          | _   | _    | _  | _   | _    | _   | _    | _  |     | _    | _  |           | _  | _  |   | _ | _ | _ | _ | _ | _ | _ | _    | _  | _   | _  | _  | _ | _ | _ | _ | _ | _  | _           |
|   |      |    |     |            |     |      |    |     |      |     |      |    |     |      |    |           |    |    |   |   |   |   |   |   |   |   |      |    |     |    |    |   |   |   |   |   |    |             |
| _ |      | _  | _   | _          | _   | _    | _  | _   | _    | _   | _    | _  | _   | _    | _  | _         | _  | _  | _ | _ | _ | _ | _ | _ | _ | _ | _    | _  | _   | _  | _  | _ |   |   | _ | _ |    | _           |
|   |      |    |     |            |     |      |    |     |      |     |      |    |     |      |    |           |    |    |   |   |   |   |   |   |   |   |      |    |     |    |    |   |   |   |   |   |    |             |
| _ |      | _  | _   | _          | _   | _    | _  |     | _    | _   | _    | _  | _   | _    | _  | _         | _  | _  | _ | _ | _ | _ | _ | _ | _ |   | _    |    |     | _  | _  | _ | _ | _ | _ | _ | _  | _           |

**SCHEDULE 0** 

(Form 990).

#### Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ▶ Attach to Form 990.

OMB No 1545-0047 2009 Open to Public Inspection

Department of the Treasury Internal Revenue Service

IVY LEAF SCHOOL, INC. Employer identification number

Name of the organization C/O LILLER GREEN

23-2225232

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS

WILLIAM GREEN

LILLER GREEN

DIRECTOR

DIRECTOR

SPOUSE

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC

Name(s) shown on return

Department of the Treasury Internal Revenue Service

#### **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No 1545-0172

► See separate instructions.

IVY LEAF SCHOOL, INC.

► Attach to your tax return.

Attachment Sequence No

Identifying number

|         | C/O LII                                      | LER GREEN                                  |   |   |                    |          |                                       | 23-         | -222   | 5232                       |
|---------|--|--|---|---|--------------------|----------|---------------------------------------|-------------|--------|----------------------------|
|         | ess or activity to which this form relates   | -017                                       |   |   |                    |          |                                       |             |        |                            |
|         | NDIRECT DEPRECIATI  Intil  Election To Expen |  | erty Under Sec  | tion 179                                |                    |          |                                       |             |        |                            |
|         | Note: If you have a                          | •  | •   |   | re you             | com      | plete Pa                              | rt I.       |        |                            |
| 1       | Maximum amount See the instruct              |  |   |   |                    |          | · · · · · · · · · · · · · · · · · · · |             | 1      | 250,000                    |
| 2       | Total cost of section 179 property p         | ū  |   |   |                    |          |                                       |             | 2      |                            |
| 3       | Threshold cost of section 179 prope          | •  |   | ructions)                               |                    |          |                                       |             | 3      | 800,000                    |
| 4       | Reduction in limitation Subtract line        | •  | ·   | •                                       |                    |          |                                       |             | 4      |                            |
| 5       | Dollar limitation for tax year Subtract line | e 4 from line 1 If zero oi                 | less, enter -0- If marrie   | ed filing sepa                          | rately, se         | e instru | ctions                                |             | 5      |                            |
| 6       | (a) Description                              |  |   | b) Cost (bus                            |                    |          | 1                                     | Elected cos | t      |                            |
|         |  |  |   |   |                    |          |                                       |             |        |                            |
|         |  |  |   |   |                    |          |                                       |             |        |                            |
| 7       | Listed property Enter the amount fr          | rom line 29                                | ,   |   |                    | 7        |                                       | <u> </u>    |        |                            |
| 8       | Total elected cost of section 179 pr         |  | in column (c), lines 6  | and 7                                   |                    |          |                                       |             | 8      |                            |
| 9       | Tentative deduction Enter the sma            | ller of line 5 or line 8                   |   |   |                    |          |                                       |             | 9      |                            |
| 10      | Carryover of disallowed deduction f          |  | 008 Form 4562   |   |                    |          |                                       |             | 10     |                            |
| 11      | Business income limitation. Enter th         | •  |   | an zero) or                             | line 5 (s          | see ins  | tructions)                            |             | 11     |                            |
| 12      | Section 179 expense deduction Ad             |  | •   | •                                       |                    |          |                                       |             | 12     |                            |
| 13      | Carryover of disallowed deduction t          |  |   |   | •                  | 13       | 1.4.4.                                |             |        |                            |
|         | : Do not use Part II or Part III below f     |  |   | <u> </u>                                |                    | 1        | 1                                     |             |        | <b></b>                    |
| ₽ŧ      | rt II Special Depreciati                     | on Allowance a                             | nd Other Depre  | ciation (                               | Do no              | t incl   | ude liste                             | d prope     | ertv ) | (See instr.)               |
| 14      | Special depreciation allowance for           |  |   |   |                    |          |                                       | - 11-       | T .    |                            |
|         | during the tax year (see instructions        |  |   | ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                    | -        |                                       |             | 14     |                            |
| 15      | Property subject to section 168(f)(1         | •  |   |   |                    |          |                                       |             | 15     |                            |
| 16      | Other depreciation (including ACRS           | •  |   |   |                    |          |                                       |             | 16     | 16,008                     |
| *** *** | rt III MACRS Depreciati                      |  | ide listed proper   | tv)(See                                 | ınstru             | uction   | ıs)                                   |             |        | <del> </del>               |
|         | ···········                                  |  | Section   |   |                    |          |                                       |             | ,      |                            |
| 17      | MACRS deductions for assets place            | ed in service in tax ye                    | ears beginning before   | 2009                                    |                    |          |                                       |             | 17     | C                          |
| 18      | If you are electing to group any assets pla  | •  |   |   | asset acc          | ounts, c | heck here                             | · 🗆         |        |                            |
|         | Section B                                    | Assets Placed in Se                        | rvice During 2009 T   | ax Year U                               | sing the           | Gene     | ral Depre                             | ciation Sy  | /stem  |                            |
|         | (a) Classification of property               | (b) Month and year<br>placed in<br>service | (c) Basis for deprecial (business/investment only-see instruction | tuse ("/                                | Recovery<br>period | (e) (    | Convention                            | (f) Me      | thod   | (g) Depreciation deduction |
| 19a     | 3-year property                              |  |   |   |                    |          |                                       |             |        |                            |
| b       | 5-year property                              |  |   |   |                    |          |                                       |             |        |                            |
| С       | 7-year property                              |  |   |   |                    |          |                                       |             |        |                            |
| d       | 10-year property                             |  |   |   |                    |          |                                       |             |        |                            |
| е       | 15-year property                             |  |   |   |                    |          |                                       |             |        |                            |
| f       | 20-year property                             |  |   |   |                    |          |                                       |             |        |                            |
| g       | 25-year property                             |  |   | 2                                       | 5 yrs              |          |                                       | S/L         | _      |                            |
| h       | Residential rental                           |  |   | 27                                      | 5 yrs              |          | ММ                                    | S/L         |        |                            |
|         | property                                     |  |   | 27                                      | 5 yrs              |          | MM                                    | S/L         |        |                            |
| i       | Nonresidential real                          |  |   | 3                                       | 9 yrs              |          | MM                                    | S/L         |        |                            |
|         | property                                     |  |   |   | _                  |          | MM                                    | S/L         | _      |                            |
|         | Section C—As                                 | ssets Placed in Serv                       | rice During 2009 Tax  | x Year Usi                              | ng the A           | Alterna  | tive Depr                             | eciation S  | System |                            |
| 20a     | Class life                                   | `  |   |   |                    |          |                                       | S/L         |        |                            |
| b       | 12-year                                      | `  |   | 1                                       | 2 yrs              |          |                                       | S/L         |        |                            |
|         | 40-year                                      |  |   |   | 0 yrs              |          | ММ                                    | S/l         | -      |                            |
|         | rt IV Summary (See ins                       | tructions)                                 |   |   |                    | -        |                                       |             |        | <del> </del>               |
| 21      | Listed property Enter amount from            |  |   |   |                    |          |                                       | •           | 21     |                            |
| 22      | Total. Add amounts from line 12, lin         |  | es 19 and 20 in colur   | nn (g), and                             | line 21            | Enter    | here                                  |             |        |                            |
|         | and on the appropriate lines of your         |  |   |   |                    |          |                                       |             | 22     | 16,008                     |
| 23      | For assets shown above and placed            | · · · · · · · · · · · · · · · · · · ·      |   |   |                    |          |                                       |             |        |                            |
|         | portion of the basis attributable to se      | =  | ,   |   |                    | 23       |                                       |             |        |                            |
|         |  |  |   |   |                    |          |                                       |             |        |                            |

\* ILS TVY LEAF SCHOOL, INC. 23-2225232

FYE: 6/30/2010

# Federal Asset Report Indirect Depreciation

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| <u>Asset</u> | Description   | Date<br>In Service   | Cost             | Bus Sec<br>% 179Bonus | Basis<br>for Depr | PerConv Meth           | Prior            | Current       |
|--------------|---|----------------------|------------------|-----------------------|-------------------|------------------------|------------------|---------------|
| Otho-        | Depreciation:   |                      |                  |                       |                   |                        |                  |               |
| <u>Other</u> | LEASEHOLD IMP 2001  | 11/01/00             | 71 610           |                       | 71,610            | 25 MO S/L              | 71,610           | 0             |
| 2            | LEASEHOLD IMP 2002  | 10/01/01             | 13 402           |                       |                   | 25 MO S/L              | 13.402           | 0             |
| 3<br>4       | LEASEHOLD IMP 2002<br>SCHOOL ACQUISITION                      | 1/01/02<br>9/01/00   | 18,194<br>14 471 |                       | 18 194<br>14,471  | 25 MO S/L<br>5 MO S/L  | 18,194<br>14,471 | 0             |
|              | ADJUST TO APPRAISAL   | 9/01/00              | 95,279           |                       | 95,279            | 5 MO S/L               | 95,279           | 0             |
| 6            | FUR, FIX, & EQUIP 2001  | 9/01/00              | 18.426           |                       | 18.426            | 7 MO S/L               | 18,426           | 0             |
|              | FUR, FIX, & EQUIP   | 10/01/01<br>1/01/02  | 2,462            |                       | 2.462             | 7 MO S/L               | 2,462            | 0             |
|              | FUR, FIX, & EQUIP<br>PRINTER/FAX - CHURCH                     | 10/30/02             | 61,067<br>393    |                       | 61,067<br>393     | 7 MO S/L<br>5 MO S/L   | 61,067<br>393    | ŏ             |
|              | DESKS - WASH LANE   | 2/25/03              | 5,910            |                       | 5,910             | 7 MO S/L               | 5,347            | 563           |
|              | ROOF - CHURCH   | 2/01/03              | 3,220            |                       |                   | 25 MO S/L              | 3,220            | 0             |
| 14<br>15     | NEW CLASSROOMS - WASH LANE<br>COMPUTER & PRINTER              | 11/20/02<br>11/30/03 | 162,079<br>2,749 |                       | 2,749             | 25 MO S/L<br>5 MO S/L  | 162,079<br>2,749 | 0             |
|              | FURNITURE & EQUIPMENT   | 11/19/03             | 9,958            |                       | 9,958             | 7 MO S/L               | 7,942            | 1,423         |
| 17           | LEASEHOLD IMPROVEMENTS  | 12/12/03             | 39,093           |                       | 39,093            | 25 MO S/L              | 39,093           | 0             |
|              | OFFICE FURNITURE-MRS GREEN                                    | 8/10/04              | 1.204            |                       | 1,204             | 7 MO S/L               | 846              | 172           |
|              | WORKCENTER-MRS COLE<br>AIR CONDITIONERS                       | 8/11/04<br>10/15/04  | 198<br>1,374     |                       | 198<br>1,374      | 7 MO S/L<br>5 MO S/L   | 139<br>1,305     | 28<br>69      |
|              | DESKS   | 10/19/04             | 603              |                       | 603               | 7 MO S/L               | 402              | 86            |
|              | FURNITURE-MISC  | 11/09/04             | 312              |                       | 312               | 7 MO S/L               | 208              | 45            |
|              | COMPUTERS-DELL  | 11/09/04<br>12/15/04 | 2,615<br>1,590   |                       | 2,615<br>1,590    | 5 MO S/L<br>7 MO S/L   | 2,440<br>1,041   | 175<br>227    |
|              | DESK-MRS FULLER<br>FLOOR POLISHER MACHINE                     | 12/13/04             | 875              |                       | 875               | 5 MO S/L               | 788              | 87            |
| 26           | 45 COMPUTERS  | 1/18/05              | 13,500           |                       | 13 500            | 5 MO S/L               | 11,925           | 1,575         |
|              | IMPROVEMENTS-BATHROOM   | 8/11/04              | 500              |                       |                   | 25 MO S/L              | 500              | 0             |
|              | WINDOW SHADES IMPROVEMENT-MODULAR                             | 10/25/04<br>9/22/04  | 920<br>1.500     |                       |                   | 25 MO S/L<br>25 MO S/L | 920<br>1,500     | 0 0           |
|              | IMPROVEMENTS-CEILING  | 9/23/04              | 550              |                       |                   | 25 MO S/L              | 550              | ŏI            |
| 31           | IMPROVEMENTS-WINDOW COVERING                                  | 11/09/04             | 2,270            |                       | 2,270             | 25 MO S/L              | 2,270            | 0             |
|              | FIRE ALARM SYSTEM   | 4/12/05              | 43,920           |                       |                   | 25 MO S/L              | 43,920           | 0             |
|              | ROOF REPAIR<br>MODULAR PORCH ENCLOSURE                        | 6/23/05<br>3/12/05   | 11,450<br>2 600  |                       |                   | 25 MO S/L<br>25 MO S/L | 11,450<br>2,600  | 0             |
|              | DRYWALL TRAILER ENCLOSURE                                     | 2/01/05              | 2,000            |                       |                   | 25 MO S/L              | 2,000            | ŏ             |
|              | WINDOWS & GUARDS  | 6/30/05              | 2 000            |                       |                   | 25 MO S/L              | 2.000            | 0             |
|              | WINDOWS & DOOR GUARD<br>RUBBER ROOF-BROAD                     | 8/03/05<br>11/02/05  | 4,500<br>5,550   |                       |                   | 25 MO S/L<br>25 MO S/L | 4,500<br>5,550   | 0 0           |
|              | RUBBER ROOF-WASHINGTON  | 4/28/06              | 2.800            |                       |                   | 25 MO S/L              | 2.800            | ŏ             |
|              | PLAYGROUND EQUIPMENT  | 1/25/06              | 19,634           |                       | 19.634            | 5 MO S/L               | 13,417           | 3,926         |
|              | CONCRETE WORK   | 4/11/06              | 5,450            |                       |                   | 25 MO S/L              | 5,450            | 1 100         |
|              | VENDING MACHINE - LUNCHROOM<br>AUDITORIUM ROOF - BROAD ST     | 10/10/06<br>12/20/06 | 5 540<br>11,309  |                       | 5.540             | 5 MO S/L<br>25 MO S/L  | 3.047<br>11,309  | 1,108<br>0    |
|              | PLAYGROUND EQUIP - PORT BASKET                                |                      | 7 350            |                       | 7,350             | 5 MO S/L               | 4,043            | 1,470         |
| 46           | DELL COMPUTERS  | 9/11/06              | 3.205            |                       | 3 205             | 5 MO S/L               | 1,816            | 641           |
| 47           | CARPET - WASH LANE<br>IMPROVEMENTS - PARKING LOT              | 5/18/07              | 1.450            |                       | 1.450             | 7 MO S/L<br>25 MO S/L  | 432              | 207           |
| 48<br>49     | SCIENCE CLASSROOM   | 7/27/06<br>6/30/07   | 4,666<br>25,250  |                       |                   | 25 MO S/L              | 4,666<br>25,250  | 0             |
| 50           | SCIENCE LAB BLINDS  | 9/07/07              | 1,426            |                       | 1 426             | 7 MO S/L               | 373              | 204           |
| 51           | READING TABLE   | 11/20/07             | 1.100            |                       | 1 100             | 7 MO S/L               | 249              | 157           |
| 52<br>53     | EQUIPMENT<br>SCIENCE CLASSROOM                                | 12/31/06<br>8/24/07  | 19.226<br>43,129 |                       | 19,226            | 5 MO S/L<br>25 MO S/L  | 9,613<br>43,129  | 3,845         |
| 23           |   | 0/24/07              |                  | -                     |                   | 23 WO 3/L              |                  | <del></del> : |
|              | Total Other Depreciation                                      | -                    | 769,879          | _                     | 769,879           |                        | 738,182          | 16,008        |
|              | Total ACRS and Other Deprec                                   | iation _             | 769,879          | =                     | 769.879           |                        | 738,182          | 16,008        |
|              |   |                      | <b>8</b> 46.0=5  |                       | <b>7</b> /0 0==   |                        | <b>#30 :00</b>   | 16.000        |
|              | Grand Totals Less: Dispositions and Transfe                   | re                   | 769,879<br>0     |                       | 769.879           |                        | 738,182          | 16,008        |
|              | Less: Dispositions and Transfer<br>Less: Start-up/Org Expense | 13                   | 0                |                       | 0                 |                        | 0                | ŏ             |
|              | Net Grand Totals  | _                    | 769,879          | _                     | 769,879           | •                      | 738,182          | 16,008        |
|              | not Grand I otals   | =                    | , , , , , ,      | 120                   | , 0, 0, 1         | :                      | 755,102          | 10,000        |

\* ILS IVY LEAF SCHOOL, INC. 23-2225232

FYE: 6/30/2010

# **State Asset Report** Indirect Depreciation

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|                                      | Date<br>Service   | Cost             | Basis<br>for Depr | State<br>Prior   | State<br>Current | Federal<br>Current | Difference<br>Fed - State |
|--------------------------------------|-------------------|------------------|-------------------|------------------|------------------|--------------------|---------------------------|
| D 's MAGDO                           |                   |                  |                   |                  |                  |                    |                           |
| Prior MACRS: 52 EQUIPMENT 12/        | /31/06            | 19,226           | 19,226            | 13,689           | 2,215            | 3,845              | 1,630                     |
| •                                    | _                 | 19,226           | 19,226            | 13,689           | 2,215            | 3,845              | 1,630                     |
|                                      | =                 |                  |                   |                  |                  | <del></del>        |                           |
| Other Depreciation:                  |                   |                  |                   |                  |                  |                    |                           |
| 1 LEASEHOLD IMP 2001 11/             | /01/00            | 71.610           | 71,610            | 71 610           | 0                | 0                  | 0                         |
|                                      | /01/01<br>/01/02  | 13,402<br>18,194 | 13,402<br>18,194  | 13,402<br>18,194 | 0                | 0                  | 0<br>0                    |
| 4 SCHOOL ACQUISITION 9/              | /01/00            | 14.471           | 14,471            | 14,471           | 0                | 0                  | 0                         |
|                                      | /01/00<br>/01/00  | 95.279<br>18,426 | 95.279<br>18,426  | 95.279<br>18,426 | 0                | 0                  | 0                         |
|                                      | /01/01            | 2.462            | 2,462             | 2,462            | 0                | 0                  | ő                         |
| 10 FUR, FIX, & EQUIP 1/              | /01/02            | 61.067           | 61.067            | 61.067           | 0                | 0                  | 0                         |
|                                      | /30/02<br>:/25/03 | 393<br>5,910     | 393<br>5,910      | 393<br>5,347     | 0<br>563         | 0<br>563           | 0<br>0                    |
| 13 ROOF - CHURCH 2/                  | /01/03            | 3,220            | 3,220             | 3,220            | 0                | 0                  | 0                         |
|                                      | /20/02<br>/30/03  | 162.079<br>2.749 | 162 079<br>2,749  | 162.079<br>2,749 | 0                | 0                  | 0                         |
| 16 FURNITURE & EQUIPMENT 11/         | /19/03            | 9.958            | 9 958             | 7.942            | 1,423            | 1,423              | 0                         |
|                                      | /12/03            | 39,093           | 39.093            | 39,093           | 0                | 0                  | 0                         |
|                                      | /10/04<br>/11/04  | 1,204<br>198     | 1,204<br>198      | 846<br>139       | 172<br>28        | 172<br>28          | 0                         |
| 20 AIR CONDITIONERS 10/              | /15/04            | 1,374            | 1,374             | 1,305            | 69               | 69                 | 0                         |
|                                      | /29/04<br>/09/04  | 603<br>312       | 603<br>312        | 402<br>208       | 86<br>45         | 86<br>45           | 0                         |
|                                      | /09/04            | 2.615            | 2,615             | 2,440            | 175              | 175                | 0                         |
|                                      | /15/04            | 1.590            | 1.590             | 1.041            | 227              | 227                | 0                         |
|                                      | /23/04<br>/18/05  | 875<br>13,500    | 875<br>13,500     | 788<br>11,925    | 87<br>1,575      | 87<br>1,575        | 0                         |
| 27 IMPROVEMENTS-BATHROOM 8/          | /11/04            | 500              | 500               | 500              | 0                | 0                  | 0                         |
|                                      | /25/04<br>/22/04  | 920<br>1,500     | 920<br>1,500      | 920<br>1,500     | 0                | 0                  | 0                         |
| 30 IMPROVEMENTS-CEILING 9/           | /23/04            | 550              | 550               | 550              | 0                | 0                  | ŏ                         |
| 31 IMPROVEMENTS-WINDOW COVERING 11/  |                   | 2,270            | 2,270             | 2,270            | 0                | 0                  | 0                         |
|                                      | /12/05<br>/23/05  | 43,920<br>11,450 | 43,920<br>11.450  | 43,920<br>11,450 | 0                | 0                  | 0                         |
| 34 MODULAR PORCH ENCLOSURE 3/        | /12/05            | 2,600            | 2.600             | 2,600            | 0                | 0                  | 0                         |
|                                      | /01/05<br>/30/05  | 2.000<br>2.000   | 2,000<br>2,000    | 2.000<br>2.000   | 0                | 0                  | 0                         |
|                                      | /03/05            | 4.500            | 4,500             | 4,500            | 0                | 0                  | ŏ                         |
|                                      | /02/05            | 5,550            | 5.550             | 5,550<br>2,800   | 0                | 0                  | 0                         |
|                                      | /28/06<br>/25/06  | 2 800<br>19,634  | 2,800<br>19,634   | 13,417           | 3,926            | 3,926              | 0                         |
| 42 CONCRETE WORK 4/                  | /11/06            | 5.450            | 5 450             | 5.450            | 0                | 0                  | 0                         |
|                                      | /10/06<br>/20/06  | 5 540<br>11,309  | 5,540<br>11,309   | 3.047<br>11,309  | 1,108<br>0       | 1,108              | 0                         |
| 45 PLAYGROUND EQUIP - PORT BASKET 9/ | /20/06            | 7,350            | 7.350             | 4.043            | 1,470            | 1,470              | 0                         |
|                                      | /11/06<br>/18/07  | 3 205<br>1 450   | 3 205<br>1,450    | 1,816<br>432     | 641<br>207       | 641<br>207         | 0                         |
|                                      | /18/07            | 4.666            | 4,666             | 4.666            | 0                | 0                  | 0                         |
| 49 SCIENCE CLASSROOM 6/              | /30/07            | 25,250           | 25,250            | 25,250           | 0                | 204                | 0                         |
|                                      | /07/07<br>/20/07  | 1,426<br>1,100   | 1,426<br>1,100    | 373<br>249       | 204<br>157       | 204<br>157         | 0                         |
|                                      | /24/07            | 43,129           | 43,129            | 43,129           | 0                | 0                  | 0                         |
| Total Other Depreciation             | _                 | 750,653          | 750,653           | 728,569          | 12,163           | 12,163             | 0                         |
|                                      |                   |                  |                   |                  |                  |                    | _                         |
| Total ACRS and Other Depreciation    | ion =             | 750,653          | 750,653           | 728.569          | 12.163           | 12,163             | 0                         |
| Grand Totals                         |                   | 769,879          | 769,879           | 742,258          | 14,378           | 16,008             | 1,630                     |
| Less: Dispositions                   |                   | 0                | 0                 | 0                | 0                | 0                  | 0                         |
| Less: Start-up/Org Expense           | _                 | 0                | 0                 | 0                | 0                | 0                  | 0                         |
| Net Grand Totals                     | =                 | 769,879          | 769,879           | 742,258          | 14,378           | 16,008             | 1,630                     |

'IES IVY LEAF SCHOOL, INC. 23-2225232

FYE: 6/30/2010

## **AMT Asset Report** Indirect Depreciation

12<sup>.</sup>00 PM Page 1

| Asset   | Description  | Date<br>In Service  | Cost  | Bus Sec<br>% 179Bonus | Basis<br>for Depr   | PerConv Meth   | Prior_  | Current   |
|---|--|---|---|-----------------------|---|--|---|---|
| Prior MACI<br>52 EQUI   | RS:<br>PMENT   | 12/31/06  | 19,226<br>19,226  | -                     | 19,226<br>19,226  | 5 HY 150DB   | 11,218  | 3,203<br>3,203  |
| 2 LEAS 3 LEAS 4 SCHO 5 ADJIL 6 FUR, 7 FUR, 10 FUR, 11 PRIN 12 DESK 13 ROOI 14 NEW 15 COM 16 FURN 17 LEAS 18 OFFII 19 WOR 20 AIR O 21 DESK 22 FURN 23 COM 24 DESK 25 FURN 29 IMPR 30 IMPR 30 IMPR 31 IMPR 32 FIRE 33 ROOI 34 MOD 35 DRY 36 WINI 38 WINI 39 RUBI 40 RUBI 41 PLON 42 CARI 44 AUD 45 PLAN 46 DELI 47 CARI 48 SCIE 50 SCIE 51 REAI | SEHOLD IMP 2001 SEHOLD IMP 2002 SEHOLD IMP 2002 SEHOLD IMP 2002 DOL ACQUISITION JST TO APPRAISAL FIX, & EQUIP 2001 FIX, & EQUIP FIX, & EQUIP TER/FAX - CHURCH (S - WASH LANE F - CHURCH CLASSROOMS - WASH LANE PUTER & PRINTER NITURE & EQUIPMENT SEHOLD IMPROVEMENTS CE FURNITURE-MRS GREEN KCENTER-MRS COLE CONDITIONERS | 4/12/05<br>6/23/05<br>3/12/05<br>2/01/05<br>6/30/05<br>8/03/05<br>11/02/05<br>4/28/06<br>1/25/06<br>4/11/06<br>10/10/06<br>12/20/06 | 71,610 13.402 18.194 14,471 95,279 18,426 2 462 61,067 393 5,910 3,220 162,079 2,749 9,958 39,093 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |                       | 71,610 13,402 18,194 14,471 95,279 18,426 2,462 61,067 393 5,910 3,220 162,079 2,749 9,958 39,093 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 25 MO S/L<br>25 MO S/L<br>5 MO S/L<br>7 MO S/L<br>7 MO S/L<br>7 MO S/L<br>7 MO S/L<br>5 MO S/L<br>7 MO S/L<br>7 MO S/L<br>7 MO S/L | 71,610 13,402 18,194 14,471 95,279 18,426 2,462 61,067 393 5,347 3,220 162,079 2,749 7,942 39.093 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>1.423<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0 |
|   | Total ACRS and Other Depre   | ciation =   | 518.313   | :                     | 518.313   |  | 515,734   | 1,986   |
|   | Grand Totals<br>Less: Dispositions and Transfo<br>Net Grand Totals   | ers _<br>=  | 537,539<br>0<br>537,539   |                       | 537,539<br>0<br>537,539   |  | 526,952<br>0<br>526,952   | 5,189<br>0<br>5,189   |

ILS IVY LEAF SCHOOL, INC. 12:00 PM **Depreciation Adjustment Report** 23-2225232 Page 1 **All Business Activities** FYE: 6/30/2010 AMT Adjustments/ Preferences Form Unit Asset Description Tax AMT There are no assets that meet the criteria of this report

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|       |            |           |          |  | IVY          | IVY LEAF SCHOOL, INC.             | JL, INC.   | 23-2225232       |                       |          |       |
|-------|------------|-----------|----------|--|--------------|-----------------------------------|------------|------------------|-----------------------|----------|-------|
|       |            |           | 1        | LIST OF BOARD OF DIRECTORS AND OTHER KEY EMPLOYEES | D OF DIRECT  | ORS AND O                         | THER KEY E | MPLOYEES         |                       |          |       |
|       |            |           |          |  | For the fisc | For the fiscal year ended 6/30/10 | 6/30/10    |                  |                       |          | -     |
|       |            |           |          | Hours per  |              |                                   | Expense    |                  |                       |          |       |
| Title | First Name | Last Name | Title    | Week   | Salaries     | Benefits                          | Accounts   | Street Address   | City                  | State    | Zip   |
| Mr    | William    | Green     | Director | 0.5  | \$0          | <b>%</b>                          | \$0        | 5902 Devon Place | Philadelphia          | PA 19138 | 19138 |
| Mrs   | Liller     | Green     | Director | 0.5  | \$0          | \$                                | <b>%</b>   | 5902 Devon Place | Philadelphia PA 19138 | PA       | 19138 |