

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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)

Inspection

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

Open to Public

A F	or th	e 2009 calendar year, or tax year beginning JUL 1, 2009	and e	ending J	UN 30, 2	2010	
B	heck if	C Name of organization			D Employer i	dentific	ation number
a	pplicab	use IRS Gainesville Independent School,	Inc		. •		
_	Addre	ess label or l					
	Name	type			-	8-10	077096
	_ chan∉ Initial	Co. N b and attack (ov. D. O. bey, if small as not delivered to obsert add	trocol	Room/suite			
<u> </u>	return □Termi	n Specific 706 I alternious Desires	11622)	nooiii/Suite	E Telephone	770)	
-	Jated }Amer	4-4					
<u> </u>	returrا العαAا	City or town, state or country, and ZIP + 4			G Gross receipts		9,183,942
	⊒t≀òn pend:			_	H(a) Is this a g		
		F Name and address of principal officer.Dr. John P. Ken	meay	Z .	for affiliat		Yes X No
		same as C above	H(b) Are all affil				
		empt status X 501(c) (3) ◀ (insert no) 4947(a)(1) or	527				ist (see instructions)
		te: www.lakeviewacademy.com		1	H(c) Group ex		
		forganization; X Corporation Trust Association Other	•	L Year	of formation: 15	<u>69 м</u>	State of legal domicile: G
Pa	ırt I	Summary					
Φ	1	Briefly describe the organization's mission or most significant activities $\ \underline{\mathbf{G}}$					
n c		Inc., a.k.a. Lakeview Academy, is com	<u>mitt</u>	<u>ted to</u>	excelle	ence	in the
2011 overnance	2	Check this box If the organization discontinued its operations or	r dispos	sed of more	than 25% of its	s net așs	sets
28	3	Number of voting members of the governing body (Part VI, line 1a)				3	18
ூர	4	Number of independent voting members of the governing body (Part VI, lin	ne 1b)			4	1'
چ چ	5	Total number of employees (Part V, line 2a)				5	130
'IVIAR € Activities	6	Total number of volunteers (estimate if necessary)				6	10
evenue Activitie		Total gross unrelated business revenue from Part VIII, column (C), line 12				7a	0
a A		Net unrelated business taxable income from Form 990-T, line 34				7b	0
<u> </u>		The difficience business taxable from the month of the section of			Prior Year	1,5	Current Year
- -		Contributions and grants (Part VIII, line 1h)			659,6	25	197,189
Revenue	8			—	9,589,2		8,805,280
Š Ę	9	Program service revenue (Part VIII, line 2g)					
, ę	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			72,7		45,616
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4.01	-	54,9		105,839
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line	e 12)		<u>10,376,5</u>		9,153,924
	13	Grants and similar amounts paid (Part IX, Column (A)-lines=13)	1		761,2	169.	820,707
	14	Benefits paid to or for members (Part IX, column (A) line 4).	ပါ		F F4.6		4 075 540
es	15	Salaries, other compensation, employee penelits (Part IX, column (A), lines	(5110)	<u> </u>	5,516,4	158.	4,975,510
Expenses		Professional fundraising fees (Part IX, column (A), Fine (1e) 8 2011	XI .				•
Š			约 ,1!	54.			
ш	17	Other expenses (Part IX, column (A), lines 11a 11d, 11f,24f)2			3,646,5		3,356,235
	18	Total expenses Add lines 13-17 (must equal Part-X-column (A) line 25)_	ليي		9,924,2	237.	9,152,452
	19	Revenue less expenses Subtract line 18 from line 12			452,3	342.	1,472
s or				Be	ginning of Curren	t Year	End of Year
Assets or designation of designation of the designa	20	Total assets (Part X, line 16)			<u> 18,888,7</u>	744.	17,991,261
\$	21	Total liabilities (Part X, line 26)			<u>10,157,2</u>	275.	9,201,458
Net Fund	22	Net assets or fund balances Subtract line 21 from line 20			8,731,4	169.	8,789,803
Pa	ırt II	Signature Block					
		Under penalties of perjury, I declare that I have examined the return, including accompanying sch and complete Declaration of preparer (other than officer) is based on all information of which preparer	edules an	d statements, a	nd to the best of my	knowledge	e and belief, it is true, correct,
		and complete becaused to be para (office man office) is a support of which prepare	a a 11a3 a	ny knomouge	7/	. ,	
Sig	n	I all that			17	((/ h	(
Her		Signature of officer			Date		
	_	Dr. John P. Kennedy, Head of Schoo	1				
		Type or print name and title					
		Preparer's Attl7.	Date		ck if	Preparer	's identifying number
Paid	l	Preparer's Signature Authority	2/10/	ソ self em	oloyed >	(see inst	tructions)
•	arer's	Furm's name (or Metcalf Davi's CPAs	' '	1 4111	EIN ►	1	
Use	Only	yours if self-employed), 3340 Peachtree Road, NE, Sui	te '	2600			
		address and ZIP+4 Atlanta, Georgia 30326-1089			Phone no	> 11	104) 264-170
		RS discuss this return with the preparer shown above? (see instructions)			Ti none no	· · · · · ·	TO 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

4d	Other program serv	ices (Describe in Schedule O)
	(Expenses \$	898,756. including grants of \$

820,707.) (Revenue \$ __192,459.)

6,274,473. 4e Total program service expenses ▶\$

Form 990 (2009)

			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	X	
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 candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and		1	
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	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," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		٦,
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide	_		х
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	40	X	
11	If "Yes," complete Schedule D, Part V Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X	10	Λ	
11	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 of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more 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 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			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	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	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	37
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
D	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	445		v
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		<u> </u>
13	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		
.0	located outside the United States? If "Yes," complete Schedule F, Part III	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	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	Х	
19	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		X
20_	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
		Form	9 <mark>90</mark> (2009)

58-107<u>7096</u> Page 4

Form 990 (2009)

a.k.a: Lakeview Academy

Part 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	<u> </u>
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			İ
	Schedule K If "No", go to line 25	24a	X	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
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		<u>X</u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X_
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			٠,,
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			7.7
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			х
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		
27	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			ŀ
	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		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38_	X aan	L 2009)
		LOIII	JJU (ZUU9)

a.k.a: Lakeview Academv Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 52 US Information Returns Enter -0- if not applicable 1a b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1h c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 136 filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2b 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? Х За 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 X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** 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 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х 5a Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to 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 Х any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a X b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с Х d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h 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 organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a 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 Section 501(c)(7) organizations. Enter: 10 a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against

Form **990** (2009)

12a

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

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

amounts due or received from them)

11b

Form 990 (2009)

a.k.a: Lakeview Academy

Part VI 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

sec	tion A. Governing Body and Management						
			1	اء ۽		Yes	No
	Enter the number of voting members of the governing body	1a		18			
b	Enter the number of voting members that are independent	<u>1b</u>	<u> </u>	17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other				
	officer, director, trustee, or key employee?			ļ	2_		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision				
	of officers, directors or trustees, or key employees to a management company or other person?			-	3		<u> X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 99	0 was filed?	-	4		_X_
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts?		-	5		X
6	Does the organization have members or stockholders?				6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the				
	governing body?]_	7a		<u> X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	sons'	>		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	durin	g the year				
	by the following						
а	The governing body?			-	8a	X	
b	Each committee with authority to act on behalf of the governing body?			Ļ	8b	<u>X</u>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched	at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenu	e Code)				
				_		Yes	No
	Does the organization have local chapters, branches, or affiliates?			-	10a		<u> </u>
þ	If "Yes," does the organization have written policies and procedures governing the activities of such	chap	ers, affiliates,				
	and branches to ensure their operations are consistent with those of the organization?			ļ	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	ling th	ne form?	-	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990				İ		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			L	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ıld gıv	e rise	- [
	to conflicts?			Ļ	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,'	describe				
	ın Schedule O how this is done				12c	Х	
13	Does the organization have a written whistleblower policy?			-	13	Х	
14	Does the organization have a written document retention and destruction policy?			-	14	Х	
15	Did the process for determining compensation of the following persons include a review and approva	al by ı	ndependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official			L	15a	X	
b	Other officers or key employees of the organization				15b	_X	
	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 arranger	nent	vith a				
	taxable entity during the year?			F	16a		<u> </u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva				l		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization	anızat	ion's			i	
	exempt status with respect to such arrangements?				16b	,	
	tion C. Disclosure				_		
17	List the states with which a copy of this Form 990 is required to be filed GA	- /504				-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(501	c)(ප)s only) avai	iable f	or		
	public inspection. Indicate how you make these available. Check all that apply.						
40	Own website Another's website X Upon request	~	Last make the				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, c	ontlic	or interest poli	cy, and	וז נ	ncial	
^^	statements available to the public						
20	State the name, physical address, and telephone number of the person who possesses the books are	na rec	oras of the orga	anızatı	on. 🕨	·	
	Allen Tucker - (770) 531-2650						
	796 Lakeview Drive, Gainesville, GA 30501-2022				Core	000	0000
					r OI M	ップ し (2009)

932006 02-04-10

Page 7

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."

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) Average	,		(C	>)		,010	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	neck		hat	арр		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization
		Individual tre	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	,		and related organizations
Wade Beavers	1 00	,						0		
Chairman	1.00	<u> </u>	-			\vdash		0.	0.	0.
Amy Burleson	1 00	v					İ	0.	0.	0
<u>Secretary</u> Travis Rogers	1.00	<u> </u>	-			-		U •		0.
Trustee	1.00	l .	l					0.	0.	0
Stephen Starke	1.00	^						0.		0.
Trustee	1.00	Ţ						0.	0.	0
Greg Bostwick	1.00					\vdash		U •		0.
Trustee	1.00	$ \mathbf{v} $						0.	0.	0.
Regina Cochran	1.00	^							<u>U •</u>	<u> </u>
Trustee	1.00	$ \mathbf{v} $						ο.	0.	0.
Jay Jacobs	1.00	A				\vdash		0.		
Trustee	1.00	$ \mathbf{x} $						0.	0.	0.
Peerless Price	1.00	*				-			0.	
Trustee	1.00	$ \mathbf{x} $						0.	о.	0.
Trey Paris										
Trustee	1.00	$ \mathbf{x} $						0.	0.	0.
Bill Rezak										
Trustee	1.00	$ \mathbf{x} $						0.	0.	0.
Darrell Rochester										
Trustee	1.00	$ \mathbf{x} $						0.	0.	0.
Swati Gaur										
Trustee	1.00	$ \mathbf{x} $						0.	0.	0.
Frank Booth										
Trustee	1.00	x						0.	0.	0.
Jim Coyle									-	
Trustee	1.00	X						0.	0.	0.
Bert Williams										
Trustee	1.00	Х						0.	0.	0.
Rob Robinson										
Trustee	1.00	X						0.	0.	0.
Barry Davison										
Trustee	1.00	X						0.	0.	0.
932007 02-04-10										Form 990 (2009)

932007 02-04-10

Form **990** (2009)

Page 8

a.k.a: Lakeview Academy

Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)		
(A)	(B)		(C)					(D)	(E)	(F)	
Name and title	Average		Position)		Reportable	Reportable	Estimated	
	hours	(check all that			t apply)		compensation	compensation	amount of		
	per	ctor						from	from related organizations (W-2/1099-MISC)	other	
	week	dire			ľ	pa:		the organization		compensation from the	
		stee 0	ustee			eusa		(W-2/1099-MISC)	(***2/1099*****130)	organization	
1		al tru	onal t		oloyee	COM		(** 27 1000 7/1100)		and related	
		Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Рог тег			organizations	
James C. Robison	<u> </u>	_	<u> </u>	_	_	_	_				
Head of School	40.00			X	x			173,327.	0.	11,061.	
Allen Tucker											
Business Director	40.00			X				114,030.	0.	8,817.	
	-										
						_	_				
					_				_		
					\vdash						
1b Total		1	l		ı			287,357.	0.	19,878.	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
Blue Cross Blue Shield Of Georgia	Description of services	
PO Box 100376, Atlanta, GA 30384-0376	Health insurance	414,507
SLA Management, LLC		
3217 Corrine Drive, Orlando, FL 32803	Food service	265,008
Virtucom, 6610 Bay Circle, Suite E,		
Norcross, GA 30071	Technology/Computers	<u>247,684</u> .

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Form 990 (2009)

3

X

Form 990 (2009)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants 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	820,707.	820,707.		
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,		40.540	222 555	25 255
	trustees, and key employees	293,575.	43,743.	223,557.	26,275.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	4 066 000	2 ((7 202	1 201 042	05.545
7	Other salaries and wages	4,066,892.	2,667,203.	1,301,942.	97,747.
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions) Other employee benefits	615,043.	150,926.	449,355.	14,762.
9	• • •	015,043.	150,920.	449,333.	14,/02.
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management	6,746.		6,746.	
b	Legal	24,201.		24,201.	
c d	Lobbying	24,201.		24,201.	
e	Professional fundraising services. See Part IV, line 17				,
f	Investment management fees	7,008.		7,008.	
g	Other	7,7000		7,000.	
12	Advertising and promotion	39,328.	1,357.	36,540.	1,431.
13	Office expenses	385,528.	245,822.	134,108.	5,598.
14	Information technology			200,2000	<u> </u>
15	Royalties				
16	Occupancy	188,367.	182,412.	5,955.	
17	Travel	45,673.	45,673.		
18	Payments of travel or entertainment expenses		•		
	for any federal, state, or local public officials	13,575.	4,761.		8,814.
19	Conferences, conventions, and meetings				
20	Interest	178,594.	170,210.	8,384.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	581,328.	552,262.	29,066.	· —
23	Insurance	50,895.		50,895.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)			;	
а	Tuition Discounts	562,949.	562,949.		
b	Food Service	259,647.	259,647.		
C	Athletics	216,587.	216,587.		
ď	Books	160,625.	160,625.		
e	Restricted Expense	150,661.		150,661.	
f	All other expenses	484,523.	189,589.	292,407.	2,527.
25	Total functional expenses. Add lines 1 through 24f	9,152,452.	6,274,473.	2,720,825.	157,154.
26	Joint costs. Check here If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Form **990** (2009)

	990 (2 t X	2009) <u>a.k.a: Lakevie</u> Balance Sheet	W AC	cacemy		<u> 58-</u>	10//096 Page II
rai	ι Λ	Data lice Street			(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			5,149,024.		5,126,844.
	3	Pledges and grants receivable, net			2,080,053.	1	1,602,943.
	4	Accounts receivable, net	633,398.		621,560.		
	5	Receivables from current and former officers, di	033,330.	_	02173001		
	3	employees, and highest compensated employee					
		of Schedule L	00/11	pioto i art ii		5	
	6	Receivables from other disqualified persons (as	under section	·····	-	-	
	Ŭ	4958(f)(1)) and persons described in section 495					
		Part II of Schedule L	30(0)(0)(b, complete		6	
G	7	Notes and loans receivable, net			2,879.		2,129.
Assets	8	Inventories for sale or use			86,012.	_	1,500.
As	9	Prepaid expenses and deferred charges			63,384.		62,021.
	_	Land, buildings, and equipment cost or other	1 1				<u> </u>
	,04	basis Complete Part VI of Schedule D	10a	15,854,037.			
	h	Less, accumulated depreciation	10b	5,868,131.	10,349,615.	10c	9,985,906.
	11	Investments - publicly traded securities		5/000/2021		11	3,300,300
	12	Investments - other securities See Part IV, line 1	11		524,379.	_	588,358.
	13	Investments - program-related See Part IV, line				13	
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa	18,888,744.	_	17,991,261.		
	17	Accounts payable and accrued expenses	1,028,441.	17	762,077.		
	18	Grants payable				18	
	19	Deferred revenue			3,974,773.	19	3,636,774.
	20	Tax-exempt bond liabilities			4,154,061.	20	4,002,607.
တ္က	21	Escrow or custodial account liability Complete I	Part IV o	of Schedule D		21	
Liabilities	22	Payables to current and former officers, director	rs, truste	ees, key employees,			
api		highest compensated employees, and disqualifi	ed pers	ons Complete Part II			
		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated thir	d parties		23	
	24	Unsecured notes and loans payable to unrelated	d third p	parties		24	
	25	Other liabilities Complete Part X of Schedule D			1,000,000.	25	800,000.
	26	Total liabilities. Add lines 17 through 25		_ <u></u>	10,157,275.	26	9,201,458.
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
es		lines 27 through 29, and lines 33 and 34.			i		
Ě	27	Unrestricted net assets			6,353,943.		6,562,168.
3ala	28	Temporarily restricted net assets			1,924,538.		1,769,826.
β	29	Permanently restricted net assets			452,988.	29	457,809.
Ξ		Organizations that do not follow SFAS 117, c	heck he	ere 🕨 🔛 and			
ō		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
ASS	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	icome, c	or other funds		32	
Z	33	Total net assets or fund balances			8,731,469.		8,789,803.
	34	Total liabilities and net assets/fund balances			18,888,744.	34	17,991,261.

Pa	rt XI Financial Statements and Reporting			
Ī			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		х
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	l
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			}
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			l
	consolidated basis, separate basis, or both			l
	X Separate basis Consolidated basis Both consolidated and separate basis			l
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			l
	Act and OMB Circular A-133?	3a		х
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	3b		
		Form	990 (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization **Employer identification number** Gainesville Independent School, Inc. a.k.a: Lakeview Academy 58-1077096 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the supported organization(s) (iii) Type of (vi) Is the (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organization organization in col. in col. (i) listed in your organization in col. organization support (i) organized in the U.S.? (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Schedule A (Form 990 or 990-EZ) 2009

932021 02-08-10

Form 990 or 990-EZ.

	edule A (Form 990 or 990-EZ) 2009			<u> </u>	0/1 1/4 1/4 1/2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	14700 1/41/41/	Page 2
Pa	rt II Support Schedule for	-		Sections 170	U(b)(1)(A)(iv) an	id 170(b)(1)(A)(vi)
<u></u>	(Complete only if you checke	d the box on line 5	o, 7, or 8 of Part I.)	_	-		
	ction A. Public Support	<u> </u>		· · · · · · ·			
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")				-	-	
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
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)						
	Public support. Subtract line 5 from line 4						
Sec	ction B. Total Support						·
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
_	and income from similar sources				 		
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income Do not include gain			•			
	or loss from the sale of capital						
	assets (Explain in Part IV)						
	Total support. Add lines 7 through 10	ata (asa mata ata				10	
	Gross receipts from related activities,			d fourth or fifth i	tay yaar aa a aastu	12	
13	First five years. If the Form 990 is for organization, check this box and stop	-	s inst, second, tim	d, louitii, or maii	iax year as a seciil)	_
Sec	ction C. Computation of Publ		rcentage	·			
	Public support percentage for 2009 (-		column (f))		14	%
15	Public support percentage from 2008		•	.,,		15	%
16a	33 1/3% support test - 2009. If the o	rganization did not	t check the box or	line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	1			▶□
b	33 1/3% support test - 2008. If the o	rganization did not	t check a box on li	ne 13 or 16a, and	d line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiz	ation			▶□
17a	10% -facts-and-circumstances tes	t - 2009. If the orga	anization did not c	heck a box on lin	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check tl	nis box and stop	here. Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supporte	ed organization		
b	10% -facts-and-circumstances tes	-					
	more, and if the organization meets the				- · · · · ·		·
	organization meets the "facts-and-circ		•	•	, ,,		-
<u>18</u>	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17			
					Sch	edule A (Form 990	or 990-EZ) 2009

Pa	rt III Support Schedule for C	Organizations	Described in	Section 509(a	(Complete onl	y ıf you	checked the b	ox on line 9 of Part I.)
Se	ction A. Public Support							
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008		(e) 2009	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Gross receipts from admissions,							
	merchandise sold or services per- formed, or facilities furnished in							
	any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that	"						İ
	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
	ızatıon's benefit and either paid to							
	or expended on its behalf					ļ		
5	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
6	Total. Add lines 1 through 5							
7 a	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
k	Amounts included on lines 2 and 3 received							
	from other than disqualified persons that exceed 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 line 6)							
	ction B. Total Support	,	· · ·	·	 -	, .		r
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	<u> </u>	(e) 2009	(f) Total
	Amounts from line 6					-		
10a	Gross income from interest, dividends, payments received on							
	securities loans, rents, royalties	:						
	and income from similar sources					_		
Ł	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975					4		
	Add lines 10a and 10b							
11	Net income from unrelated business activities not included in line 10b.							
	whether or not the business is							
40	regularly carried on				_	-		
12	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, and 12)				<u> </u>			<u> </u>
14	First five years. If the Form 990 is for	the organization's	s first, second, thii	d, fourth, or fifth t	ax year as a secti	ion 50°	1(c)(3) organiz	ration,
<u></u>	check this box and stop here	o Support Do	roomtogo					
	ction C. Computation of Publ					Т	<u> </u>	
	Public support percentage for 2009 (. ,,		column (f))		15		<u>%</u>
16	Public support percentage from 2008			_		16	l	<u>%</u>
	ction D. Computation of Inves			- 40! (0)		T	i ,	
	Investment income percentage for 20			ne 13, column (t))		17	<u></u>	
18	investment income percentage from			am luna 4.4!	- 45	18	100	<u>%</u>
198	a 33 1/3% support tests - 2009. If the	-					o‰, and line ¹	i / is not
	more than 33 1/3%, check this box a			-			an 20 4 /00/	اسما 🗨
t	33 1/3% support tests - 2008. If the	-						and
20	line 18 is not more than 33 1/3%, che Private foundation. If the organization		-				_	
<u> 20</u>	rivate loundation. If the organization	ar did not check a	DOX OIT HITE 14, 19	a, or 130, check ti				0 or 990-EZ) 2009

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.

2009 Open to Public Inspection

OMB No 1545-0047

Name of the organization Gainesville Independent School, Inc.

Employer identification number

a.k.a: Lakeview Academy 58-1<u>077096</u> Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 2 3 Aggregate grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure □ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 year > Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes l No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

Gainesville Independent School, Inc.

		<u>Lakeview A</u>						-1077		
Par	t III Organizations Maintaining C	Collections of A	<u>rt, Hist</u>	torical Tr	easures,	or Othe	r Similar <i>I</i>	Assets	<u>(continue</u>	:d)
3	Using the organization's acquisition, access	on, and other record	ds, check	any of the	following tha	at are a si	gnificant use	of its coll	ection ite	ms
	(check all that apply):									
а	Public exhibition	d	י וַבַי	Loan or exc	hange progr	ams				
b	Scholarly research	е	. 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	n how th	ey further tl	he organızat	ıon's exer	npt purpose	ın Part XI	J.	
5	During the year, did the organization solicit of	r receive donations	of art, his	storical trea	sures, or oth	er sımılar	assets	_	_	
	to be sold to raise funds rather than to be m								es _	No
Par	t IV Escrow and Custodial Arran		ete ıf org	anızatıon ar	nswered "Ye	s" to Forr	m 990, Part I\	/, line 9, o	r	
	reported an amount on Form 990, Pa	rt X, line 21				—. —				
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for o	contribution	s or other as	ssets not	ıncluded		_	<u>_</u>
	on Form 990, Part X?							Y	es L	No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing t	able						
								An	nount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21?					Y	es L	No
	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete	f the organization ar	swered	"Yes" to Fo	rm 990, Part	IV, line 1	0			
		(a) Current year		rıor year	(c) Two yea	rs back	(d) Three years	back (e) Four yea	rs back
1a	Beginning of year balance	1,058,450.		<u>9,999.</u>						
b	Contributions	40,282.		<u>3,362.</u>						
C	Net investment earnings, gains, and losses	63,978.	-12	<u>8,827.</u>						
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	30,987.		<u>6,084.</u>						
f	Administrative expenses									
g	End of year balance	1,131,723.	1,05	<u>8,450.</u>			<u></u>			
2	Provide the estimated percentage of the year		as							
а	Board designated or quasi-endowment	53.00	%							
b	Permanent endowment ► 40.50	%								
С	Term endowment ► 6.50	%								
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	it are held a	nd administe	ered for th	ne organizatio	n	_	
	by.							_	Yes	
	(i) unrelated organizations							<u> 3</u>	Ba(i)	X
	(ii) related organizations							3	a(ii)	X
b	If "Yes" to 3a(II), are the related organization	s listed as required o	on Sched	lule R?				L	3b	
4	Describe in Part XIV the intended uses of the									
Pai	t VI Investments - Land, Building	gs, and Equipm	ent. Se	e Form 990	, Part X, line	10.				
	Description of investment	(a) Cost or o		• •	or other	, , ,	cumulated	(d)	Book va	lue
		basis (investr	ment)		(other)	dep	reciation			
	Land				<u>0,893.</u>				280,	
b	Buildings			12,08	<u>8,261.</u>	5,8	<u>337,671</u>	. 6,	250,	<u>590.</u>
С	Leasehold improvements							<u> </u>		
d	Equipment				7,249.				427,	
е	Other			5	<u>7,634.</u>		30,460			<u> 174.</u>
Tota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colun	<u>nn (B), lin</u> e 1	0(c))		<u></u>	9,	985,	<u>906.</u>

Schedule D (Form 990) 2009

932053 02-01-10

uncertain tax positions under FIN 48

Sche	dule D (Form 990) 2009 a.k.a: Lakeview Academy	11001	, inc.	58-	1077096 Page 4
_	t XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ted Financial Sta	atemen	ts
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		9,153,924.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		9,152,452.
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		1,472.
4	Net unrealized gains (losses) on investments		4	_	56,862.
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		56,862.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 an	d 9	10		58,334.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Revenue per	r Returr	
1	Total revenue, gains, and other support per audited financial statements			1	8,420,097.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a	56,862	2.	
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d	30,018	B.	
е	Add lines 2a through 2d			2e	86,880.
3	Subtract line 2e from line 1			3	8,333,217.
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	820,70	7.	
С	Add lines 4a and 4b			4c	820,707.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	9,153,924.
Pai	t XIII Reconciliation of Expenses per Audited Financial Statem	ents V	Vith Expenses p	er Retu	irn
1	Total expenses and losses per audited financial statements			_ 1	8,361,763.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIV)	2d	30,018	<u>8.</u>	
е	Add lines 2a through 2d			2e	30,018.
3	Subtract line 2e from line 1			3	8,331,745.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		•		
а	investment expenses not included on Form 990, Part VIII, line 7b	4a		_	
b	Other (Describe in Part XIV)	4b	820,70	7.	
C	Add lines 4a and 4b			4c	<u>820,707.</u>
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	9,152,452.
Pai	t XIV Supplemental Information			_	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part II				
X, line	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also comp	lete this	s part to provide any	addıtıonal	Information.
<u>Par</u>	ct V, line 4: The Academy's endowment cons	<u>ists</u>	of nine		
_			_		
<u>dor</u>	or-restricted funds established for schola	<u>arsh</u>	<u>ips, facult</u>	ty de	<u>velopment</u>
and	l building maintenance.				
				_	
_		_	_		
<u>Par</u>	ct X: The Academy has adopted the provision	n of	Accounting	1	
for	Uncertainty in Income Taxes set forth in	ASC	Topic 740	, Inc	ome Taxes.
	s standard clarifies the accounting for u				
	cognized in an entity's financial statement				
		us d	nu prescrii		lule D (Form 990) 2009
932054) 10				

SCHEDULE E

Department of the Treasury

(Form 990 or 990-EZ)

Schools

► Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

▶ Attach to Form 990 or Form 990-EZ.

2009
Open to Public

Internal Revenue Service

Name of the organization

Gainesville Independent School, Inc. a.k.a: Lakeview Academy

Employer identification number 58-1077096

Inspection

	d.R.d. Baneview Househay		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			$\overline{}$
	other governing instrument, or in a resolution of its governing body?	_1_	X	Ĺ
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			l
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			
	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes			ł
	the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain			l
	If you need more space, use Schedule O (Form 990)	3_	X	
	Policy is printed on student application and is published on			
	school website.			l
				l
				l
4	Does the organization maintain the following?		l	l
а	· · · · · · · · · · · · · · · · · · ·	<u>4a</u>	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)	4d	Х	 -
5	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a		X
	Admissions policies?	5b		X
	Employment of faculty or administrative staff?	5c		X
	Scholarships or other financial assistance?	5d		X
е	Educational policies?	5e		X
f		5f		X
9	· ·	<u>5g</u>		X
h	Other extracurricular activities?	<u>5h</u>		_X_
	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a		х
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990)			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of			
	Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 990)	7	X	

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

Schedule E (Form 990 or 990-EZ) 2009

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

► Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

Open To Public Inspection

Name of the organization

Gainesville Independent School, Inc.

a.k.a: Lakeview Academy

Employer identification number

58-1077096 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not

required to complete this part	<u></u>					
1 Indicate whether the organization rais	ed funds through any of the followir	ng activ	rities	Check all that apply		
a Mail solicitations		-		overnment grants		
b Internet and email solicitations				nment grants		
c Phone solicitations	g X Special					
d In-person solicitations	g <u> </u>					
2 a Did the organization have a written o	r oral agreement with any individual	(includ	lına o	fficers directors tru	etage or	
key employees listed in Form 990, Pa			-			□ No
b If "Yes," list the ten highest paid indi				_		
		uant to	ayre	ements under which	the fundraiser is to	be
compensated at least \$5,000 by the	organization					
		l (iii)	Did	_	(v) Amount paid	(ci) Amount nord
(i) Name of individual	(ii) Activity	(iii) fundra have cu	aiser istody	(iv) Gross receipts	to (or retained by)	(vi) Amount paid to (or retained by)
or entity (fundraiser)	``	or cont	trol of	from activity	fundraiser listed in col (i)	organization '
		Yes	No			
		\vdash				
		 				
		i i				
	·					
		\vdash				
		\vdash				
					!	
					-	
				ł		
						-
		LI		_		
Total						
Total 3 List all states in which the organization	n in registered or lineared to exhaut f			haan natified it is as		
3 List all states in which the organization	it is registered of licensed to solicit i	unos c	ппаъ	been nouned it is ex	tempt from registrati	on or licensing
					-	
						
				_		
				<u> </u>		
					 	
LHA For Privacy Act and Paperwork Re	duction Act Notice, see the Instru	ctions	for F	orm 990 or 990-EZ.	Schedule G (Forr	n 990 or 990-EZ) 2009

Gainesville Independent School, Inc. a.k.a: Lakeview Academy 58-1077096 Page 2 Schedule G (Form 990 or 990-EZ) 2009 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000 (c) Other events (a) Event #1 (b) Event #2 (d) Total events GolfNone (add col (a) through Auction tournament col (c)) (total number) (event type) (event type) Gross receipts 186,560 22,095 208,655. 59,855 12,943 72,798. Less Charitable contributions 126,705 9,152 135,857. Gross income (line 1 minus line 2) Cash prizes 5 Noncash prizes Direct Expenses 14,904 6 Rent/facility costs 7.805 22,709. Food and beverages Entertainment 7,309. 1,222 6,087 Other direct expenses 30,018 10 Direct expense summary Add lines 4 through 9 in column (d) 105.839 11 Net income summary. Combine line 3, column (d), and line 10 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses Yes % Yes % Yes Volunteer labor Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Combine line 1, column (d), and line 7 No Yes 9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities in each of these states? 9a b If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," explain:

932082 02-03-10

Schedule G (Form 990 or 990-EZ) 2009

11

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to

administer charitable gaming?

11 Does the organization operate gaming activities with nonmembers?

Gainesville Independent School, Inc.

Schedule G (Form 990 or 990-EZ) 2009 a.k.a: Lakeview Academy	58-1077	096 P	age 3
		Yes	
13 Indicate the percentage of gaming activity operated in			
a The organization's facility	%		
b An outside facility	%		
14 Enter the name and address of the person who prepares the organization's gaming/special events books and rec	ords		
Name			
Address >			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	1	5a	
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the an	nount		
of gaming revenue retained by the third party > \$			
c If "Yes," enter name and address of the third party			
Name			
Address >			
16 Gaming manager information			
Name			
Gaming manager compensation \$			
Description of services provided ▶			
Director/officer Employee Independent contractor			
17 Mandatory distributions			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		7-	
retain the state gaming license?	 	7a	\vdash
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sper organization's own exempt activities during the tax year ► \$	it in the		

Schedule G (Form 990 or 990-EZ) 2009

≗ □ Schedule I (Form 990) 2009 **Employer identification number** 58-1077096 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant or assistance X Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. (d) Amount of cash grant School, Inc. LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) IRC section if applicable Enter total number of section 501(c)(3) and government organizations Gainesville Independent a.k.a: Lakeview Academy General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part I Part

₹..

Gainesville Independent School, Inc.

•

Page 2

58-1077096

Schedule I (Form 990) 2009

a.k.a.: Lakeview Academy

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Financial assistance	249	0	820,707,	WA	Tuition reduction,
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the information	n required in Part I,	line 2, and any other	additional information.	
Schedule I, Part I, Line 2: The financi	al	assistance	assistance is provided on a	ed on a need	
based selection.					

932102 02-02-10

Schedule I (Form 990) 2009

SCHEDULE J (Form 990)

. . 5

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions.

Gainesville Independent School, Inc.

a.k.a: Lakeview Academy

58-1077096

Employer identification number

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990),		
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal	use		
	Travel for companions Payments for business use of personal residence.	ence		
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef	n l		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, direct	ors,		
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation com	ımıttee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization	•		
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		ĺ	
	contingent on the revenues of			
а	The organization?	5a		X
b	Any related organization?	_5b_		X
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а	The organization?	<u>6</u> a_	ļ	X
b	Any related organization?	6b	ļ	X
	If "Yes" to line 6a or 6b, describe in Part III	1		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	ļ	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		<u> </u>
LH/	A For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule J (Forn	n 990)	2009

Schedule J (Form 990) 2009

a.k.a: Lakeview Academy

58-1077096

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	Г	(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	ε	173,327.	0	0	5,167.	5,894.	184,388.	0
James C. Robison	€ €	0	0	0	0	0	0	0
	€ €							
	Ξ							
	1							
-	€ €							
	ε							
	(11)							
] (i)							
	Ξ							
	ε							
	Ξ							
	ε							
	(1)							
	Ξ							
	(ii)							
	Ξ							
	⊞							
	Ξ							
	▣							
	Ξ							
	▣							
	ε							
	▣							
	Ξ							
	3							
	ε							
	⊞							
	ε							
	(ii)							

Schedule J (Form 990) 2009

SCHEDULEK (Form 990)

Part I

8

ပ

۵

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).

2009 Open to Public

ز' کوری

OMB No 1545-0047

(h) On behalf **Employer identification number** Š × of issuer ŝ Yes 58-1077096 (g) Defeased Yes ŝ × Yes ŝ (f) Description of purpose ۵ debt Yes 4,326,173.Refinance ŝ O Continuations Yes (e) Issue price Attach to Form 990. See separate instructions. ŝ 8 04/17/08 (d) Date issued See Schedule O for Column (f) Yes Independent School, Inc. .173 65,838 4,260,335 ŝ 2008 × × (c) CUSIP # 326, None 4 Yes Lakeview Academy (b) Issuer EIN Were the bonds issued as part of a current refunding issue? Were the bonds issued as part of an advance refunding Gainesville County Development Autho Proceeds in refunding or defeasance escrows Working capital expenditures from proceeds Gainesville and Hall a.k.a: Capital expenditures from proceeds Gross proceeds in reserve funds Year of substantial completion Issuance costs from proceeds (a) Issuer name Other unspent proceeds Total proceeds of Issue Name of the organization Bond Issues Proceeds

Part II

9

8

O 9

Ŋ

က 4 932121 02-03-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Folid 990.

Are there any lease arrangements with respect to the financed

property which may result in private business use?

Schedule K (Form 990) 2009

ŝ

Yes

ŝ

Yes

ŝ

Yes

ů

Yes

٩

Yes

Was the organization a partner in a partnership, or a member

of an LLC, which owned property financed by tax-exempt

bonds

Does the organization maintain adequate books and records

to support the final allocation of proceeds?

Part III Private Business Use

Has the final allocation of proceeds been made?

Ξ

2

X

×

8

۵

Gainesville Independent School, Inc.

*با*لمر 'ن

Page 2

٥ N

Yes Yes % % % ŝ ŝ ۵ Yes Yes 58-1077096 % % % ŝ ŝ ပ Yes Yes % % % ŝ ŝ ω 8 Yes Yes 8 % % ŝ ŝ a.k.a: Lakeview Academy Yes Yes business use as a result of unrelated trade or business activity d Was the regulatory safe harbor for establishing the fair market to the financed property which may result in private business 3a Are there any management or service contracts with respect financed property which may result in private business use? other outside counsel to review any management or service Enter the percentage of financed property used in a private Enter the percentage of financed property used in a private 1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect contracts or research agreements relating to the financed Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its 3a Has the organization or the governmental issuer identified carried on by your organization, another section 501(c)(3) a hedge with respect to the bond issue on its books and c Does the organization routinely engage bond counsel or 5 Were any gross proceeds invested beyond an available b Are there any research agreements with respect to the business use by entities other than a section 501(c)(3) 6 Did the bond issue qualify for an exception to rebate? 832122 02-03-10 organization, or a state or local government organization or a state or local government 4a Were gross proceeds invested in a GIC? Part III Private Business Use (Continued) 2 Is the bond issue a variable rate issue? tax-exempt bond liabilities? value of the GIC satisfied? Schedule K (Form 990) 2009 Total of lines 4 and 5 to the bond issue? temporary period? **b** Name of provider b Name of provider Part IV Arbitrage c Term of hedge c Term of GIC records? use? 9 4 2

%

%

ŝ

%

Schedule K (Form 990) 2009

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

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 Open to Public Inspection

Gaineguille Independent School

	a.k.a: Lakeview Academy	58-1077096				
Form 990, Part	I, Line 1, Description of Organization Mi	ssion:				
personal growth and academic development of the college-bound student						
through a parts	nership of school, family, and community.					
Form 990, Part	III, Line 4a, Program Service Accomplishm	ments:				
also a member o	of the Atlanta Area Association of Indeper	ndent Schools,				
Georgia Indeper	ndent School Association, the Georgia High	School				
Association, th	ne Southern Association of Independent Sch	nools, and the				
National Associ	iation of Independent Schools.					
Form 990, Part	III, Line 4b, Program Service Accomplishm	nents:				
they live. Con	mmunity service instills civic pride and k	nowledge in				
Lakeview studer	nts paving the way for leadership roles in	their future				
communities. St	tudents must complete 60 hours of communit	y service in				
grades 9 to 12	to graduate from Lakeview Academy.					
Form 990, Part	III, Line 4d, Other Program Services:					
Student activit	tes - Lakeview is committed to providing o	pportunities				
for appreciation	on of and participation in the fine arts t	hrough visual				
and performing	arts. Lakeview believes that involvement	in the arts				
develops the wh	nole person, making each a better citizen	of the world.				
Our curricular	and extra-curricular programs are support	ed by our				
Lakeview Arts (Guild, a volunteer group of parents and fr	riends. A				
central tenet of	of Lakeview Academy is the schoolOs commit	ment to				
community servi	ice. Through active involvement with other	s in our				
community stud	dents learn the value of service and the r	and to take				

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

Schedule O (Form 990) 2009

SCHEDULE O

(Form 990)

£ + A .

Department of the Treasury Internal Revenue Service

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

Name of the organization

Gainesville Independent School, Inc. a.k.a: Lakeview Academy

Employer identification number 58-1077096___

responsibility for the community in which they live. Community service
instills civic pride and knowledge in Lakeview students paving the way
for leadership roles in their future communities. Students must
complete 60 hours of community service in grades 9 0 12 to graduate
from Lakeview Academy.
Expenses \$ 898756. including grants of \$ 820707. Revenue \$ 192459.
Financial aid
Form 990, Part VI, Section B, line 11: The Form 990 are reviewed by the
Finance Committee and the full Board before it is filed.
Form 990, Part VI, Section B, Line 12c: The Academy monitors the annual
conflict of interest disclosures required by the officers and key employees
of the school.
Form 990, Part VI, Section B, Line 15: The Committee On Trustees (COT) is
charged with an annual evaluation of the Head of School and recently has
opted to hire an outside consultant to assist with this evaluation along
with a select group of COT members and the Board Chair. When the evaluation
is complete, the COT (or the group tasked with the evaluation) has made an
recommendation to the Board to either renew or decline the renewal of a new
2 year contract.

1023 are available upon request.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02-03-10

Schedule O (Form 990) 2009

Form 990, Part VI, Section C, Line 18: The Academy's Form 990 and Form

الدائم والم

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

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.

2009
Open to Public Inspection

Name of the organization	Gainesville Independent School a.k.a: Lakeview Academy	., Inc.	Employer identification number 58-1077096
Form 990, Part	VI, Section C, Line 19: The Aca	idemy makes	its governing
documents avail	Lable upon request.		
	rt I, Bond Issues:		
	e: Gainesville and Hall County I	<u>Development</u>	Authority
(b) Description	n of Purpose: Refinance debt	<u> </u>	
		 	
			
			
		 -	

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

Form 8868 (Rev. 4-2009)

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously file. 		▶ 🗓
Part: 17 Automatic 3-Month Extension of Time. Only submit onginal (no copies needed)		
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only		
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns		
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Chanties & Nonprofits		
Type or Name of Exempt Organization print Gainesville Independent School, Inc.	Empl	oyer identification number
AKA: Lakeview Academy	5	8-1077096
due date for Number, street, and room or suite no. If a P.O. box, see instructions. Metcalf Davis.3340 Peachtree Road. NE		
City, town or post office, state, and ZIP code. For a foreign address, see instructions. Atlanta, GA 30326-1089		
Check type of return to be filed (file a separate application for each return)		
Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870		
Allen Tucker • The books are in the care of ▶ 796 Lakeview Drive - Gainesville, GA 30501-2022 Telephone No. ▶ (770) 531-2650 • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ and attach a list with the names and EINs of all members the extension will cover.		
I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until February 15, 2011, to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year or X tax year beginning JUL 1, 2009, and ending JUN 30, 2010		
2 If this tax year is for less than 12 months, check reason.		Change in accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
nonrefundable credits See instructions b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	3a	<u> </u>
tax payments made_include any pnor year overpayment allowed as a credit.	3ь	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c	s N/A
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form		

923831 05-26-09

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.