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**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)

**2009**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2009 calendar year, or tax year beginning 7/1/2009, and ending 6/30/2010

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

Please use IRS label or print or type. See Specific Instructions.

**C** Name of organization WINDSOR ACADEMY, INC.  
 Doing Business As \_\_\_\_\_  
 Number and street (or P O box if mail is not delivered to street address) Room/suite  
4150 JONES ROAD  
 City or town, state or country, and ZIP + 4  
MACON GA 31216

**D** Employer identification number 58-1088998

**E** Telephone number (478) 781-1621

**G** Gross receipts \$ 1,492,281

**F** Name and address of principal officer:  
J.C. CRANFORD 4150 JONES ROAD, MACON, GA 31216

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** Are all affiliates included?  Yes  No  
 If "No," attach a list (see instructions)

**I** Tax-exempt status  501(c) ( 3 ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ WWW.WINDSORACADEMYKNIGHTS.COM **H(c)** Group exemption number ▶ \_\_\_\_\_

**K** Form of organization  Corporation  Trust  Association  Other ▶ \_\_\_\_\_

**L** Year of formation 2007 **M** State of legal domicile GA

**Part I Summary**

1 Briefly describe the organization's mission or most significant activities: EDUCATIONAL SERVICES

2 Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	11
4	Number of independent voting members of the governing body (Part VI, line 1b)	11
5	Total number of employees (Part V, line 2a)	42
6	Total number of volunteers (estimate if necessary)	10
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	3,720
7b	Net unrelated business taxable income from Form 990-T, line 34	-22,827

	Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	3,122
9	Program service revenue (Part VIII, line 2g)	1,351,052
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,795
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,362,969
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0
14	Benefits paid to or for members (Part IX, column (A), line 4)	110,970
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,018,131
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0
16b	Total fundraising expenses (Part IX, column (D), line 25)	0
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	431,900
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,450,031
19	Revenue less expenses. Subtract line 18 from line 12	-87,062
	Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	900,849
21	Total liabilities (Part X, line 26)	943,577
22	Net assets or fund balances. Subtract line 21 from line 20	-42,728
		51,921

**Part II Signature Block**

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

Signature of officer: J.C. Cranford Date: 5/9/2011  
 Type or print name and title: J.C. CRANFORD HEADMASTER

**Paid Preparer's Use Only**

Preparer's signature: Tommy J. Thompson, C.P.A. Date: 5/9/2011 Check if self-employed:   
 Firm's name (or yours if self-employed), address, and ZIP + 4: TOMMY J. THOMPSON, P.C. 328 LOKCHAPEE DRIVE, MACON, GA 31210 Preparer's identifying number (see instructions): P00128049  
 EIN: 58-1376365 Phone no: (478) 474-4551

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

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

SCANNED JUN 15 2011

**Part III Statement of Program Service Accomplishments**

1 Briefly describe the organization's mission:

EDUCATIONAL SERVICES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 1,249,050 including grants of \$ 0 ) (Revenue \$ 1,429,281 )

PROVIDE EDUCATIONAL SERVICES TO APPROXIMATELY 231 STUDENTS IN GRADES KINDERGARTEN THROUGH TWELFTH GRADES.

4b (Code: ) (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )

4c (Code: ) (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )

4e Total program service expenses ▶ 1,249,050

**Part IV Checklist of Required 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 . . . . .	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? . . . . .		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 . . . . .		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .		X
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III . . . . .		
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 . . . . .		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . . .		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV . . . . .		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . .		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable . . . . .	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 . . . . .	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? 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 . . . . .	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		X
14b	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 . . . . .		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II . . . . .		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III . . . . .		X
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 . . . . .		X
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 . . . . .	X	
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 . . . . .		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .		X

**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? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>		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? <i>If "Yes," complete Schedule I, Parts I and III . . . . .</i>		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? <i>If "Yes," complete Schedule J . . . . .</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 . . . . .</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I . . . . .</i>		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? <i>If "Yes," complete Schedule L, Part I . . . . .</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II . . . . .</i>		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? <i>If "Yes," complete Schedule L, Part III . . . . .</i>		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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		X
c 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? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . . . .</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . . . .</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . . . .</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . . . .</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . . . .</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 . . . . .</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>		X
36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI . . . . .</i>		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 . . . . .	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information>Returns. Enter -0- if not applicable . . . . .	0	
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	X	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .	42	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	X	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	X	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .		X
<b>b</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.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .		X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .		
<b>6a</b>	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? . . . . .		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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? . . . . .		X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7d	
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		X
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .		
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .		X
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966? . . . . .		X
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .		X
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders . . . . .	11a	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12a	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	12b	

**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.

**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body . . . . .		
1b	Enter the number of voting members that are independent . . . . .		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . .		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . . . .		X
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .		X
6	Does the organization have members or stockholders? . . . . .		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	X	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.		
8a	a The governing body? . . . . .	X	
8b	b Each committee with authority to act on behalf of the governing body? . . . . .	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates? . . . . .		X
10b	b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 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 form? . . . . .		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990. . . . .		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .		X
12b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .		
12c	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .		
13	Does the organization have a written whistleblower policy? . . . . .		X
14	Does the organization have a written document retention and destruction policy? . . . . .		X
15	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?		
15a	a The organization's CEO, Executive Director, or top management official. . . . .		X
15b	b Other officers or key employees of the organization . . . . .		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .		X
16b	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 the organization's exempt status with respect to such arrangements? . . . . .		

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed ► GA
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 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 organization: ► WANDA GRUBBS (478) 781-1621  
 4150 JONES ROAD, MACON, GA 31216

**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."
- 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.

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
WALT SCONYERS CHAIRMAN	3	X						0	0	0
CHUCK BROOKS DIRECTOR	3	X						0	0	0
TOMMY BUSBEE DIRECTOR	3	X						0	0	0
RICKY COLEMAN DIRECTOR	3	X						0	0	0
JOHN FILLMORE DIRECTOR	3	X						0	0	0
GARY GILES DIRECTOR	3	X						0	0	0
ANGELA HARDY DIRECTOR	3	X						0	0	0
JOHN MORSE DIRECTOR	3	X						0	0	0
CRAIG O'QUINN DIRECTOR	3	X						0	0	0
DONNIE WEICHE DIRECTOR	3	X						0	0	0
J.C. CRANFORD HEADMASTER	50			X	X	X		75,803	0	0



**Part VIII Statement of Revenue**

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a 0				
	b Membership dues	1b 0				
	c Fundraising events	1c 0				
	d Related organizations	1d 0				
	e Government grants (contributions)	1e 0				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 3,687				
	g Noncash contributions included in lines 1a-1f: \$	0				
	h Total. Add lines 1a-1f	▶ 3,687				
Program Service Revenue	Business Code					
	2a TUITION INCOME	611600	1,282,118	1,282,118		
	b OTHER FEES	611600	88,118	88,118		
	c ATHLETIC INCOME	611600	31,323	31,323		
	d YEARBOOK PUBLICATION	611600	18,562	14,842	3,720	
	e		0			
	f All other program service revenue		0			
	g Total. Add lines 2a-2f	▶ 1,420,121				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶ 0				
	4 Income from investment of tax-exempt bond proceeds	▶ 0				
	5 Royalties	▶ 0				
	6a Gross Rents	(i) Real				
		(ii) Personal				
	b Less rental expenses					
	c Rental income or (loss)	0	0			
	d Net rental income or (loss)	▶ 0				
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
	b Less: cost or other basis and sales expenses	0	0			
	c Gain or (loss)	0	0			
	d Net gain or (loss)	▶ 0				
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a	55,593				
	b Less: direct expenses	b 9,010				
	c Net income or (loss) from fundraising events	▶ 46,583			46,583	
9a Gross income from gaming activities. See Part IV, line 19	a	0				
	b Less: direct expenses	b 0				
	c Net income or (loss) from gaming activities	▶ 0				
10a Gross sales of inventory, less returns and allowances	a	0				
	b Less cost of goods sold	b 0				
	c Net income or (loss) from sales of inventory	▶ 0				
Miscellaneous Revenue		Business Code				
11a SCHOOL BUS RECEIPTS	611600	10,165	10,165			
b		0				
c		0				
d All other revenue		2,715	2,715			
e Total. Add lines 11a-11d	▶ 12,880					
12 Total revenue. See instructions	▶ 1,483,271	1,429,281	3,720	46,583		

**Part IX Statement of Functional Expenses**

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>		(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 . . . . .	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . .	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . .	0			
4	Benefits paid to or for members . . . . .	110,970	110,970		
5	Compensation of current officers, directors, trustees, and key employees . . . . .	75,803		75,803	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0			
7	Other salaries and wages . . . . .	689,432	588,282	101,150	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	0			
9	Other employee benefits . . . . .	50,217	48,944	1,273	
10	Payroll taxes . . . . .	60,849	47,312	13,537	
11	Fees for services (non-employees):				
a	Management . . . . .	0			
b	Legal . . . . .	0			
c	Accounting . . . . .	4,099		4,099	
d	Lobbying . . . . .	0			
e	Professional fundraising services See Part IV, line 17 . . . . .	0			
f	Investment management fees . . . . .	0			
g	Other . . . . .	23,979	23,979		
12	Advertising and promotion . . . . .	23,722		23,722	
13	Office expenses . . . . .	7,258		7,258	
14	Information technology . . . . .	0			
15	Royalties . . . . .	0			
16	Occupancy . . . . .	173,563	173,563		
17	Travel . . . . .	0			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
19	Conferences, conventions, and meetings . . . . .	0			
20	Interest . . . . .	31,852	31,852		
21	Payments to affiliates . . . . .	0			
22	Depreciation, depletion, and amortization . . . . .	76,663	76,663	0	0
23	Insurance . . . . .	29,043	29,043		
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.)				
a	DUES AND SUBSCRIPTIONS . . . . .	7,291		7,291	
b	ATHLETIC EXPENSES . . . . .	58,178	58,178		
c	ACADEMIC EXPENSES . . . . .	29,174	29,174		
d	PUBLICATIONS . . . . .	25,547	25,547		
e	. . . . .				
f	All other expenses . . . . .	6,148	5,543	605	
25	<b>Total functional expenses.</b> Add lines 1 through 24f	1,483,788	1,249,050	234,738	0
26	<b>Joint costs.</b> Check here <input type="checkbox"/> 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 . . . . .				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	1	Cash—non-interest-bearing . . . . .	1,980	1	40,401
	2	Savings and temporary cash investments . . . . .	1,195	2	333
	3	Pledges and grants receivable, net . . . . .	0	3	0
	4	Accounts receivable, net . . . . .	63,512	4	66,722
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .		6	
	7	Notes and loans receivable, net . . . . .	0	7	0
	8	Inventories for sale or use . . . . .		8	
	9	Prepaid expenses and deferred charges . . . . .		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	2,234,946		
	b	Less: accumulated depreciation . . . . .	1,331,166	10c	903,780
	11	Investments—publicly traded securities . . . . .	0	11	0
	12	Investments—other securities. See Part IV, line 11 . . . . .	0	12	0
	13	Investments—program-related. See Part IV, line 11 . . . . .	0	13	0
	14	Intangible assets . . . . .	0	14	0
	15	Other assets. See Part IV, line 11 . . . . .	0	15	0
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	900,849	16	1,011,236	
<b>Liabilities</b>	17	Accounts payable and accrued expenses . . . . .	171,018	17	171,763
	18	Grants payable . . . . .		18	
	19	Deferred revenue . . . . .	140,295	19	221,750
	20	Tax-exempt bond liabilities . . . . .		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		22	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .	548,931	23	565,802
	24	Unsecured notes and loans payable to unrelated third parties . . . . .	83,333	24	0
	25	Other liabilities. Complete Part X of Schedule D . . . . .	0	25	0
26	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .	943,577	26	959,315	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
	27	Unrestricted net assets . . . . .	-42,728	27	51,921
	28	Temporarily restricted net assets . . . . .		28	
	29	Permanently restricted net assets . . . . .		29	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
	30	Capital stock or trust principal, or current funds . . . . .		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund . . . . .		31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .		32	
	33	<b>Total net assets or fund balances . . . . .</b>	-42,728	33	51,921
34	<b>Total liabilities and net assets/fund balances . . . . .</b>	900,849	34	1,011,236	

**Part XI Financial Statements and Reporting**

**1** Accounting method used to prepare the Form 990:  Cash  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? . . . . .

**b** Were the organization's financial statements audited by an independent accountant? . . . . .

**c** 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? . . . . .  
 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 consolidated basis, separate basis, or both. . . . .  
 Separate basis  Consolidated basis  Both consolidated and separate basis

**3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .

**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.

	Yes	No
<b>2a</b>	X	
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

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

**Public Charity Status and Public Support**

OMB No 1545-0047

**2009**

**Open to Public Inspection**

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.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**WINDSOR ACADEMY, INC.**

Employer identification number  
**58-1088998**

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

	Yes	No
<b>11g(i)</b>		
<b>11g(ii)</b>		
<b>11g(iii)</b>		
  - (ii) A family member of a person described in (i) above? .....
  - (iii) A 35% controlled entity of a person described in (i) or (ii) above? .....

**h Provide the following information about the supported organization(s).**

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
									0
									0
									0
									0
									0
									0
									0
<b>Total</b>									<b>0</b>

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar 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") . . . . .						0
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						0
4 <b>Total.</b> Add lines 1 through 3 . . . . .	0	0	0	0	0	0
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 <b>Public support.</b> Subtract line 5 from line 4. . . . .						0

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4 . . . . .	0	0	0	0	0	0
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						0
9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .						0
11 <b>Total support.</b> Add lines 7 through 10 . . . . .						0
12 Gross receipts from related activities, etc. (see instructions) . . . . .					12	
13 <b>First five years.</b> 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 <b>stop here</b> . . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	0.00%
15 Public support percentage from 2008 Schedule A, Part II, line 14 . . . . .	15	0.00%
16a <b>33 1/3% support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
b <b>33 1/3% support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
17a <b>10%-facts-and-circumstances test—2009.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. . . . . ▶ <input type="checkbox"/>		
b <b>10%-facts-and-circumstances test—2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ <input type="checkbox"/>		

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

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

**Section A. Public Support**

Calendar 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.")						0
2 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						0
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b 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						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6)						0

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0
13 Total support. (Add lines 9, 10c, 11, and 12)	0	0	0	0	0	0

14 **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**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	0.00%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	0.00%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	0.00%

19a **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

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions



**SCHEDULE D  
(Form 990)**

**Supplemental Financial Statements**

OMB No 1545-0047

**2009**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

▶ 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.

Name of the organization

WINDSOR ACADEMY, INC.

Employer identification number

58-1088998

**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
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 assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 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? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 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

2 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
b Total acreage restricted by conservation easements . . . . .	2b
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2c
d Number of conservation easements included in (c) acquired after 8/17/06 . . . . .	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ . . . . .

4 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 violations, and enforcement of the conservation easements it holds? . . . . .  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ . . . . .

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ . . . . .

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . . .  Yes  No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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 . . . . . ▶ \$ . . . . .

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 . . . . . ▶ \$ . . . . .

b Assets included in Form 990, Part X . . . . . ▶ \$ . . . . .

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIV and complete the following table:
c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21?
b If "Yes," explain the arrangement in Part XIV.

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

- 2 Provide the estimated percentage of the year end balance held as:
a Board designated or quasi-endowment %
b Permanent endowment %
c Term endowment %

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

Table with 2 columns: Yes, No. Rows: 3a(i) unrelated organizations, 3a(ii) related organizations, 3b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

- (i) unrelated organizations
(ii) related organizations
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 5 columns: Description of investment, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other.

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



<b>Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements</b>		
1	Total revenue (Form 990, Part VIII, column (A), line 12) . . . . .	1,483,271
2	Total expenses (Form 990, Part IX, column (A), line 25) . . . . .	1,483,788
3	Excess or (deficit) for the year. Subtract line 2 from line 1 . . . . .	-517
4	Net unrealized gains (losses) on investments . . . . .	
5	Donated services and use of facilities . . . . .	
6	Investment expenses . . . . .	
7	Prior period adjustments . . . . .	95,166
8	Other (Describe in Part XIV.) . . . . .	
9	Total adjustments (net). Add lines 4 through 8 . . . . .	95,166
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 . . . . .	94,649

<b>Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return</b>		
1	Total revenue, gains, and other support per audited financial statements . . . . .	1,492,281
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains on investments . . . . .	2a
b	Donated services and use of facilities . . . . .	2b
c	Recoveries of prior year grants . . . . .	2c
d	Other (Describe in Part XIV.) . . . . .	2d 9,010
e	Add lines 2a through 2d . . . . .	2e 9,010
3	Subtract line 2e from line 1 . . . . .	3 1,483,271
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a
b	Other (Describe in Part XIV.) . . . . .	4b
c	Add lines 4a and 4b . . . . .	4c 0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . .	5 1,483,271

<b>Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b>		
1	Total expenses and losses per audited financial statements . . . . .	1,492,798
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities . . . . .	2a
b	Prior year adjustments . . . . .	2b
c	Other losses . . . . .	2c
d	Other (Describe in Part XIV.) . . . . .	2d 9,010
e	Add lines 2a through 2d . . . . .	2e 9,010
3	Subtract line 2e from line 1 . . . . .	3 1,483,788
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a
b	Other (Describe in Part XIV.) . . . . .	4b
c	Add lines 4a and 4b . . . . .	4c 0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . .	5 1,483,788

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part XII Line 2d FUNDRAISER DIRECT EXPENSES \$ 9,010

Part XIII Line 2d FUNDRAISING DIRECT EXPENSES \$ 9,010

**Part XIV** Supplemental Information *(continued)*

Area with horizontal dashed lines for supplemental information.

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

**Schools**

OMB No 1545-0047

**2009**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **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.**

Name of the organization

WINDSOR ACADEMY, INC.

Employer identification number

58-1088998

- 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? . . . . .
- 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? . . . . .
- 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Schedule O (Form 990) . . . . .

RAN ADVERTISEMENT IN LOCAL NEWSPAPER STATING THE SCHOOL DOES NOT DISCRIMINATE  
BECAUSE OF RACE, CREED, COLOR OR NATIONAL ORIGIN

- 4 Does the organization maintain the following?
  - a Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .
  - b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .
  - c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .
  - d Copies of all material used by the organization or on its behalf to solicit contributions? . . . . .  
If you answered "No" to any of the above, please explain. If you need more space, use Schedule O (Form 990).

- 5 Does the organization discriminate by race in any way with respect to:
  - a Students' rights or privileges? . . . . .
  - b Admissions policies? . . . . .
  - c Employment of faculty or administrative staff? . . . . .
  - d Scholarships or other financial assistance? . . . . .
  - e Educational policies? . . . . .
  - f Use of facilities? . . . . .
  - g Athletic programs? . . . . .
  - h Other extracurricular activities? . . . . .  
If you answered "Yes" to any of the above, please explain. If you need more space, use Schedule O (Form 990).

- 6a Does the organization receive any financial aid or assistance from a governmental agency? . . . . .
- 6b Has the organization's right to such aid ever been revoked or suspended? . . . . .  
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) . . . . .

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



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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		<b>BOOSTERS</b> (event type)	(event type)	<b>NONE</b> (total number)	(add col (a) through col (c))	
Revenue	1	Gross receipts . . . . .	55,593	0	0	55,593
	2	Less: Charitable contributions . . . . .	0	0	0	0
	3	Gross income (line 1 minus line 2) . . . . .	55,593	0	0	55,593
Direct Expenses	4	Cash prizes . . . . .	0	0	0	0
	5	Noncash prizes . . . . .	0	0	0	0
	6	Rent/facility costs . . . . .	0	0	0	0
	7	Food and beverages . . . . .	9,010	0	0	9,010
	8	Entertainment . . . . .	0	0	0	0
	9	Other direct expenses . . . . .	0	0	0	0
	10	Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				( 9,010)
	11	Net income summary. Combine line 3, column (d), and line 10 . . . . . ▶				46,583

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))	
Revenue	1	Gross revenue . . . . .			0	
Direct Expenses	2	Cash prizes . . . . .			0	
	3	Noncash prizes . . . . .			0	
	4	Rent/facility costs . . . . .			0	
	5	Other direct expenses . . . . .			0	
	6	Volunteer labor . . . . .	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				( 0)
	8	Net gaming income summary. Combine line 1, column d, and line 7 . . . . . ▶				0

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? . . . . .

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain: \_\_\_\_\_

11 Does the organization operate gaming activities with nonmembers? . . . . .

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? . . . . .

	Yes	No
9a		
10a		
11		
12		



**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

**2009**

**Open to Public Inspection**

Name of the organization

WINDSOR ACADEMY, INC.

Employer identification number

58-1088998

**Part I Questions Regarding Compensation**

**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.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**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.

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**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.

- |  |   |
|--|---|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study                               |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- 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 contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- 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:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

**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.

**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.

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		



**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Area with horizontal dashed lines for supplemental information.



**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

WINDSOR ACADEMY, INC.

**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**

Employer identification number

58-1088998

Form 990 Part 1 Section 1 Line 22 NET ASSETS HAD TO BE INCREASED BY \$95,166 WHEN AN

INDEPENDENT CERTIFIED UNQUALIFIED AUDIT WAS ISSUED.

# Depreciation and Amortization

(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return **WINDSOR ACADEMY, INC.** Identifying number **58-1088998**

Business or activity to which this form relates  
**All Business Activities**

**Part I Election To Expense Certain Property Under Section 179**

**Note:** If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount See the instructions for a higher limit for certain businesses	1	250,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	
<b>(a) Description of property (b) Cost (business use only) (c) Elected cost</b>		
6		
7 Listed property Enter the amount from line 29	7	
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12	13	

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions.)**

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	3,987

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**

**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2009	17	61,200
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

**Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		3,500	5.0	HY	150DB	525
c 7-year property		7,105	7.0	HY	200DB	1,015
d 10-year property						
e 15-year property		8,247	15.0	HY	150DB	412
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

**Section C-Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

**Part IV Summary (see instructions)**

21 Listed property. Enter amount from line 28	21	9,524
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instructions	22	76,663
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

**Section A-Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles )**

24a Do you have evidence to support the business/investment use claimed?				Yes	No	24b If "Yes," is the evidence written?			Yes	No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost		
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)										25	
26 Property used more than 50% in a qualified business use:											
2008 Ford E350 Van	8/28/08	100.00%	19,042	19,042	5.0	150DBHY		4,856			
See Schedule		%	18,567	18,567				4,668			
27 Property used 50% or less in a qualified business use											
		%				S/L-					
		%				S/L-					
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1								28	9,524		
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1									29		

**Section B-Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

**Section C-Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2009 tax year (see instructions)					
43 Amortization of costs that began before your 2009 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

**Form 4562 Subschedules  
All Business Activities**

Part V: Depreciation of Automobiles and Other Listed Property

Asset	(a) Property Description	(b) Date In Service	(c) Bus Pct	(d) Tax Cost	(e) Tax - Basis for Depr	(f) Tax Period	(g) Tax-Meth Conv	(h) Tax Depr Deduction	(i) Tax Sec 179 Exp
<u>Property Used More than 50%</u>									
257	2008 Ford E350 Van	8/28/08	100.00	17,342	17,342	5.0	150DBHY	4,423	0
258	2003 Dodge Stratus SE	6/21/10	100.00	1,225	1,225	5.0	200DBHY	245	0
				<u>18,567</u>	<u>18,567</u>			<u>4,668</u>	<u>0</u>

Section 168(k) Class Elections

Election not to apply first-year bonus depreciation:

- MACRS 3-yr
- MACRS 5-yr
- MACRS 7-yr
- MACRS 10-yr
- MACRS 15-yr
- MACRS 20-yr
- MACRS 25-yr
- MACRS 27-yr
- MACRS 39-yr
- Computer Software (167)

Asset Id	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period	
<b>Group: BOOKS</b>												
1	Library Books	3/14/95	682	0	0	682	0	682	0	150DB	10 0000	
2	Library Books	9/20/96	1,578	0	0	1,578	0	1,578	0	150DB	10 0000	
3	Library Books	2/20/97	721	0	0	721	0	721	0	150DB	10 0000	
4	Complete Advantage Mark Read Sc	8/25/97	707	0	0	707	0	707	0	150DB	10 0000	
5	Library Books	9/11/97	598	0	0	598	0	598	0	150DB	10 0000	
6	Georgia Studies Textbooks	9/16/97	513	0	0	513	0	513	0	150DB	10 0000	
7	Library Books	9/16/97	876	0	0	876	0	876	0	150DB	10 0000	
8	Library Books	6/22/98	841	0	0	841	0	841	0	150DB	10 0000	
9	Library Books	11/19/98	864	0	0	864	0	864	0	150DB	10 0000	
10	Library Books	1/11/99	957	0	0	957	0	957	0	150DB	7.0	
11	Library Books	7/30/99	665	0	0	665	0	665	0	150DB	7.0	
12	Library Books	10/11/99	579	0	0	579	0	579	0	150DB	7.0	
13	Library Books	1/19/00	520	0	0	520	0	520	0	150DB	7.0	
14	Library Books	12/04/00	1,103	0	0	1,103	0	1,103	0	150DB	7.0	
15	Library Books	6/30/01	2,244	0	0	2,244	0	2,244	0	150DB	7.0	
16	40 Harcourt Textbooks	7/17/01	2,076	0	0	2,076	0	2,076	0	150DB	7.0	
17	Books	6/30/02	4,937	0	0	4,937	0	4,937	0	150DB	7.0	
18	Audio Books	8/28/02	1,333	0	0	1,333	82	1,333	0	150DB	7.0	
19	Reference Package	8/28/02	1,347	0	0	1,265	82	1,347	0	150DB	7.0	
20	Books	6/30/03	1,762	0	0	1,654	108	1,762	0	150DB	7.0	
21	Elementary Textbooks	9/17/08	1,184	0	0	1,27	226	353	831	150DB	7.0	
22	ABC Testing Materials	5/14/09	2,900	0	0	311	555	866	2,034	150DB	7.0	
56	McGraw Hill Economics Textbooks	8/04/94	624	0	0	624	0	624	0	150DB	10 0000	
57	Latin & French Textbooks	6/23/95	1,977	0	0	1,977	0	1,977	0	150DB	10 0000	
58	Earth & Life Science Text Books	10/09/95	5,887	0	0	5,887	0	5,887	0	150DB	10 0000	
59	Physics Textbooks	10/26/95	762	0	0	762	0	762	0	150DB	10 0000	
60	30 Sociology Textbooks	12/15/97	1,338	0	0	1,338	0	1,338	0	150DB	10 0000	
61	25 Sociology Books	10/07/98	730	0	0	730	0	730	0	150DB	7.0	
62	Pre Algebra Textbooks	8/25/00	2,644	0	0	2,644	0	2,644	0	150DB	7.0	
63	Algebra 2 Textbooks	9/20/00	2,293	0	0	2,293	0	2,293	0	150DB	7.0	
64	25 PE AIL Athena Ed 96 Textbook	10/01/00	1,279	0	0	1,279	0	1,279	0	150DB	7.0	
65	25 GIE Health Textbooks	11/17/00	1,251	0	0	1,251	0	1,251	0	150DB	7.0	
66	Algebra 2 Books	12/26/00	1,635	0	0	1,635	0	1,635	0	150DB	7.0	
67	History Text	8/28/02	7,472	0	0	7,014	458	7,472	0	150DB	7.0	
68	World Geography	8/28/02	981	0	0	921	60	981	0	150DB	7.0	
69	Elements of Literature	6/06/03	5,682	0	0	5,334	348	5,682	0	150DB	7.0	
70	33 Textbooks by author Beers	7/22/03	1,978	0	0	1,615	242	1,857	121	150DB	7.0	
71	Physics Textbooks	7/31/04	1,171	0	0	812	144	956	215	150DB	7.0	
72	Algebra 1 Textbooks	9/30/05	875	0	0	500	107	607	268	150DB	7.0	
73	Geometry Textbooks	8/22/06	684	0	0	307	84	391	293	150DB	7.0	
74	20 Economics Textbooks	7/10/08	950	0	0	102	182	284	666	150DB	7.0	
75	Textbooks	12/10/08	2,063	0	0	221	395	616	1,447	150DB	7.0	
76	Business & Personal Finance Textb	12/10/08	1,315	0	0	141	251	392	923	150DB	7.0	
137	25 Chemistry Books	8/22/06	1,633	0	0	733	200	933	700	150DB	7.0	
									74,211			
									63,189			
									3,524			
									66,713			
									7,498			

Asset #	d	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
<b>Group: BUILDINGS &amp; IMPROVEMENTS</b>												
23		Elementary School	9/14/70	83,250	0	0	82,098	1,152	83,250	0	S/L	40.0
24		6 Toilets & 3 Sinks	8/04/83	4,150	0	0	4,150	0	4,150	0	S/L	15.0000
25		Architectural Services	12/18/00	4,500	0	0	986	115	1,101	3,399	S/L	39.0
26		Classroom Grid & Ceiling Tile	7/19/01	10,500	0	0	2,143	269	2,412	8,088	S/L	39.0
27		Building #1 Renovation	10/31/01	516,824	0	0	102,150	13,252	115,402	401,422	S/L	39.0
28		Handicapped Accessible Bathroom	4/11/02	6,800	0	0	1,257	174	1,431	5,369	S/L	39.0
77		50 % Bldg #2 After 1985 Fire	12/01/73	55,000	0	0	48,927	1,375	50,302	4,698	S/L	40.0
78		Walkway Awnings	6/26/75	4,900	0	0	4,900	0	4,900	0	S/L	40.0
79		50% 6 Classroom Complex 1985 F	6/17/76	48,250	0	0	39,806	1,207	41,013	7,237	S/L	40.0
80		Lunchroom Tile	6/17/76	1,950	0	0	1,609	49	1,658	292	S/L	40.0
81		Gym, Lunchroom & 6 Classroom C	7/25/86	199,726	0	0	199,726	0	199,726	0	PRE	19.0
82		Main Electrical Cable	3/24/87	8,100	0	0	4,514	203	4,717	3,383	S/L	40.0000
83		Cafeteria Enlarged & Walkway Cov	5/16/94	37,000	0	0	13,991	925	14,916	22,084	S/L	40.0000
84		Kitchen Ceiling Tile	7/07/00	2,300	0	0	528	59	587	1,713	S/L	39.0
85		Weight & Dressing Rooms Renovat	7/15/00	21,000	0	0	4,824	538	5,362	15,638	S/L	39.0
86		Coaches' Offices, Locker Rooms, S	8/04/00	13,600	0	0	3,695	349	3,444	10,156	S/L	39.0
87		Tile Locker Rooms, Office, Kitchen	9/01/00	25,185	0	0	5,677	646	6,323	18,862	S/L	39.0
88		Gym Air Conditioning	9/28/00	11,106	0	0	2,504	284	2,788	8,318	S/L	39.0
89		Building #2 Plumbing	10/16/00	3,016	0	0	673	78	751	2,265	S/L	39.0
90		Flooring	10/25/00	42,000	0	0	9,378	1,077	10,455	31,545	S/L	39.0
91		Hall Ceiling Tile Next To Gym	3/06/01	2,450	0	0	521	63	584	1,866	S/L	39.0
92		Hall Lights	3/06/01	1,250	0	0	266	32	298	952	S/L	39.0
93		Carpet High School Hall	4/03/01	1,210	0	0	1,210	0	1,210	0	150DB	7.0
94		Tile High School Hall	4/26/01	3,475	0	0	731	89	820	2,655	S/L	39.0
95		Weight Room Designs	9/04/06	500	0	0	36	13	49	451	S/L	39.0
138		Practice Gym & Science Lab	2/15/93	200,000	0	0	81,875	5,000	86,875	113,125	S/L	40.0000
139		Stage	6/05/08	1,513	0	0	40	39	79	1,434	S/L	39.0
153		Paving	1/15/79	19,500	0	0	19,500	0	19,500	0	S/L	20.0
154		Field Archway	4/03/81	2,500	0	0	2,500	0	2,500	0	S/L	15.0000
155		Track	6/30/89	15,200	0	0	15,200	0	15,200	0	150DB	20.0000
156		Field House	10/15/90	40,000	0	0	18,708	1,000	19,708	20,292	S/L	40.0000
157		Field Poles and Lights	5/11/92	24,000	0	0	21,323	1,071	22,394	1,606	150DB	20.0000
158		Concession Stand Roof	6/08/95	850	0	0	641	38	679	171	150DB	20.0000
159		Announcer's Booth Roof	7/24/95	850	0	0	574	42	616	234	S/L	20.0000
160		Football Field Bleachers	9/29/95	11,600	0	0	10,573	685	11,258	342	150DB	15.0000
161		Outfield Fencing	1/29/96	1,777	0	0	1,262	79	1,341	436	150DB	20.0000
162		Sealcoat & Stripe Side Parking Lot	8/09/96	3,284	0	0	2,185	147	2,332	952	150DB	20.0000
163		Septic Tank System	9/02/99	14,640	0	0	9,885	865	10,750	3,890	150DB	15.0
164		Football Field Concrete Sidewalks	8/17/00	4,650	0	0	2,865	275	3,140	1,510	150DB	15.0
165		Football Field Fence	8/17/00	12,212	0	0	7,525	721	8,246	3,966	150DB	15.0
166		PVC Water Drainage Pipe	8/30/00	1,862	0	0	1,147	110	1,257	605	150DB	15.0
167		Chain Link & Vinyl Fence	8/30/00	1,600	0	0	986	94	1,080	520	150DB	15.0
168		Baseball Fence	9/25/00	6,898	0	0	4,250	408	4,658	2,240	150DB	15.0
169		Landscapeing	10/09/00	758	0	0	467	45	512	246	150DB	15.0
170		Gate & Fencing	2/23/01	2,800	0	0	1,725	166	1,891	909	150DB	15.0
171		Football Field Retention Pond	5/01/01	1,470	0	0	906	87	993	477	150DB	15.0
172		Steel Lighting Platforms	6/06/01	5,000	0	0	1,031	128	1,159	3,841	S/L	39.0
173		Athletic Field Light Posts	8/09/01	1,425	0	0	794	84	878	547	150DB	15.0
174		Sprinkler System Front of School	11/15/01	1,865	0	0	1,039	110	1,149	716	150DB	15.0

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<b>Group: BUILDINGS &amp; IMPROVEMENTS (continued)</b>												
175	Landscaping	5/08/02	3,088	0	0	1,720	183	1,903	1,185	150DB	15.0	
176	Memorial	5/17/02	9,675	0	0	5,390	572	5,962	3,713	150DB	15.0	
177	Irrigation Heads	5/23/02	4,425	0	0	2,465	262	2,727	1,698	150DB	15.0	
178	65 Foot Backstop	8/02/02	3,000	0	0	1,494	177	1,671	1,329	150DB	15.0	
179	Dugout Fence & 150' Field Fence	8/02/02	1,800	0	0	897	106	1,003	797	150DB	15.0	
180	Well Pump	6/12/03	2,350	0	0	1,171	138	1,309	1,041	150DB	15.0	
181	Baseball Backstop Poles	2/12/04	728	0	0	100	19	609	609	S/L	39.0	
182	Softball Dugout	2/13/04	4,612	0	0	2,025	272	2,297	2,315	150DB	15.0	
183	Field Sign	6/30/04	969	0	0	791	119	910	59	150DB	7.0	
184	Break-Away Sign	11/08/04	825	0	0	572	101	673	152	150DB	7.0	
185	Fence	1/14/05	2,495	0	0	940	155	1,095	1,400	150DB	15.0	
186	Building Front Sign	2/28/05	897	0	0	622	110	732	165	150DB	7.0	
187	8' X 8' White Awnings	11/11/05	2,120	0	0	1,211	260	1,471	649	150DB	7.0	
188	Dug-out Bricks & Mortar	12/12/05	12,518	0	0	3,849	867	4,716	7,802	150DB	15.0	
189	Football Field Irrigation System	3/24/06	750	0	0	231	52	283	467	150DB	15.0	
190	Practice Field Irrigation System	3/24/06	3,675	0	0	1,130	254	1,384	2,291	150DB	15.0	
191	Softball Backstop & Dugout	6/05/06	18,788	0	0	5,776	1,302	7,078	11,710	150DB	15.0	
192	Sewer Tie	11/06/06	5,000	0	0	1,153	384	1,537	3,463	150DB	15.0	
193	Softball/Baseball Bleachers	11/06/06	10,000	0	0	2,305	770	3,075	6,925	150DB	15.0	
194	Softball/Baseball Dugouts	11/06/06	15,000	0	0	3,458	1,154	4,612	10,388	150DB	15.0	
195	ADT Fire Alarm System	2/20/07	16,072	0	0	7,213	1,969	9,182	6,890	150DB	7.0	
196	Fencing for Girls' Softball Field	6/04/07	5,500	0	0	1,268	423	1,691	3,809	150DB	15.0	
197	Track	6/05/08	3,000	0	0	435	257	692	2,308	150DB	15.0	
198	Girls' Softball Dugout	8/31/08	2,670	0	0	134	253	387	2,283	150DB	15.0	
199	Parking Lot	7/28/09	5,566	0c	0	0	278	278	5,288	150DB	15.0	
200	Softball Field Fencing	7/31/09	2,681	0c	0	0	134	134	2,547	150DB	15.0	
201	Coca-Cola Sign	10/01/09	3,500	0c	0	0	525	525	2,975	150DB	5.0	
			1,626,000	0c	0	789,051	44,239	833,290	792,710			
<b>BUILDINGS &amp; IMPROVEMENTS</b>												
<b>Group: EQUIPMENT</b>												
29	Copier	10/15/90	7,000	0	0	7,000	0	7,000	0	150DB	10.0000	
30	Timer Master Clock	4/15/96	731	0	0	731	0	731	0	150DB	10.0000	
31	Jayder Line Printer	8/20/97	2,007	0	0	2,007	0	2,007	0	150DB	5.00000	
32	Playground Boundaries	1/11/99	518	0	0	518	0	518	0	150DB	7.0	
33	Metal Partitions for Girl's Restroom	1/10/00	2,435	0	0	2,435	0	2,435	0	150DB	7.0	
34	4 Marker Boards	4/13/00	2,100	0	0	2,100	0	2,100	0	150DB	7.0	
35	Camera	3/15/01	898	0	0	898	0	898	0	150DB	7.0	
36	64 Lights	3/29/01	12,160	0	0	12,160	0	12,160	0	150DB	7.0	
37	Camelot Room Furnishings	7/19/01	10,000	0	0	10,000	0	10,000	0	150DB	7.0	
38	Hon Mahogany Desk, Side Table, 1	8/07/01	5,691	0	0	5,691	0	5,691	0	150DB	7.0	
39	4 Blue Side Chairs	8/21/01	675	0	0	675	0	675	0	150DB	7.0	
40	Cork Strip Map Readers	1/23/02	895	0	0	895	0	895	0	150DB	7.0	
41	Media Center	6/20/02	7,610	0	0	7,610	0	7,610	0	150DB	5.0	
42	Intercom System	8/22/02	12,001	0	0	11,266	735	12,001	0	150DB	7.0	
43	2 Library Computers	11/19/03	1,152	0	0	1,152	0	1,152	0	150DB	5.0	
44	Air Conditioner	4/05/06	2,770	0	0	1,582	340	1,922	848	150DB	7.0	
45	Master Clock	3/07/08	876	0	0	261	132	393	483	150DB	7.0	

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<b>Group: EQUIPMENT (continued)</b>											
46	50 Two Piece Desks	9/08/08	4,396	0	0	471	841	1,312	3,084	150DB	7.0
47	Korg Piano	10/22/08	1,300	0	0	139	249	388	912	150DB	7.0
48	Desk	7/08/09	1,234	0c	0	0	176	176	1,058	200DB	7.0
96	2 Georgia Power Freezers	4/03/75	600	0	0	600	0	600	0	S/L	3.0
97	Lockers	8/12/76	4,000	0	0	4,000	0	4,000	0	S/L	5.0
98	Desks	1/28/86	14,007	0	0	14,007	0	14,007	0	S/L	8.0000
99	Air Conditioner	1/29/86	773	0	0	773	0	773	0	S/L	8.0000
100	Lunchroom Tables	4/08/86	8,254	0	0	8,254	0	8,254	0	S/L	5.0
101	Oven	4/16/86	1,609	0	0	1,609	0	1,609	0	S/L	8.0000
102	Gibson Chest Freezer	4/16/86	1,136	0	0	1,136	0	1,136	0	S/L	8.0000
103	Boy's Locker Room Air Conditioner	6/18/89	1,100	0	0	1,100	0	1,100	0	150DB	10.0000
104	14 Folding Tables	9/19/94	934	0	0	934	0	934	0	150DB	10.0000
105	18 Computers & Magnavox 15" Mo	5/09/97	34,448	0	0	34,448	0	34,448	0	150DB	5.0000
106	Computer Lab Electrical System	8/04/97	2,195	0	0	652	55	707	1,488	S/L	40.0000
107	Air Conditioner	8/13/98	527	0	0	527	0	527	0	150DB	10.0000
108	Kitchen Floor	9/20/99	3,500	0	0	3,500	0	3,500	0	150DB	7.0
109	2 Air Conditioning Units (Weight &	12/09/99	6,755	0	0	6,755	0	6,755	0	150DB	7.0
110	Gym Handrails	1/26/00	4,648	0	0	4,648	0	4,648	0	150DB	7.0
111	Weight Equipment	6/29/00	9,168	0	0	9,168	0	9,168	0	150DB	7.0
112	2 Tables	8/04/00	3,065	0	0	3,065	0	3,065	0	150DB	7.0
113	Weight Equipment	8/28/00	2,168	0	0	2,168	0	2,168	0	150DB	7.0
114	Weights	9/14/00	6,999	0	0	6,999	0	6,999	0	150DB	7.0
115	Warming Cabinet	9/05/01	1,070	0	0	1,070	0	1,070	0	150DB	7.0
116	3 Water Coolers	10/31/01	671	0	0	671	0	671	0	150DB	7.0
117	25' Frigidaire Chest Freezer	11/08/01	535	0	0	535	0	535	0	150DB	7.0
118	Lockers	1/23/02	1,995	0	0	1,995	0	1,995	0	150DB	7.0
119	Water Heater	4/15/02	1,324	0	0	1,324	0	1,324	0	150DB	7.0
120	Unit, Coil & Filter Drier	4/26/02	1,960	0	0	1,960	0	1,960	0	150DB	7.0
121	5 Marker Boards	8/22/02	2,450	0	0	2,300	150	2,450	0	150DB	7.0
122	25 Desks	8/22/02	1,861	0	0	1,747	114	1,861	0	150DB	7.0
123	3 Gateway Computers & Monitors	8/22/02	1,947	0	0	1,947	0	1,947	0	150DB	5.0
124	Compressor	9/10/02	1,677	0	0	1,574	103	1,677	0	150DB	7.0
125	20 Sport Totes	11/06/02	593	0	0	557	36	593	0	150DB	7.0
126	Portable Scale & Carrying Case	11/19/02	841	0	0	789	52	841	0	150DB	7.0
127	Air Conditioning Window Unit	6/09/03	790	0	0	742	48	790	0	150DB	7.0
128	Art Room Kiln	5/04/05	1,427	0	0	990	175	1,427	262	150DB	7.0
129	AED Defibrillator	7/11/05	1,400	0	0	800	171	971	429	150DB	7.0
130	Ice-O-Matic	8/29/05	1,557	0	0	890	190	1,080	477	150DB	7.0
131	3 Dell Computers	11/09/06	644	0	0	376	107	483	161	150DB	5.0
132	Sound System, Speakers & Micropt	5/22/07	1,337	0	0	600	164	764	573	150DB	7.0
133	Art Room Mural	8/07/08	1,100	0	0	118	210	328	772	150DB	7.0
134	Basketball Chairs	3/02/09	3,200	0	0	343	612	955	2,245	150DB	7.0
135	145 High School Desks	4/24/09	14,500	0	0	1,554	2,774	4,328	10,172	150DB	7.0
136	Weight Room Stereo System	8/07/09	5,249	0c	0	0	750	750	4,499	200DB	7.0
140	Chemical Lab Hood	12/03/98	668	0	0	668	0	668	0	150DB	10.0000
141	Wrestling Mat	10/21/99	3,450	0	0	3,450	0	3,450	0	150DB	7.0
142	Chemical Lab Hood	1/10/00	668	0	0	668	0	668	0	150DB	7.0
143	Science Lab Equipment	11/27/00	4,184	0	0	4,184	0	4,184	0	150DB	7.0
144	Projector & Screen for Science Lab	3/19/03	1,435	0	0	1,347	88	1,435	0	150DB	7.0

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<b>Group: EQUIPMENT (continued)</b>												
145	Digital Microscope	2/09/04	850	0	0	694	104	798	52	150DB	7.0	
146	Wrestling Singlets	2/06/06	675	0	0	386	82	468	207	150DB	7.0	
147	Snap & Shoot Wrestling Equipment	9/04/06	1,300	0	0	583	160	743	557	150DB	7.0	
148	Snap & Shoot Wrestling Equipment	9/12/06	1,400	0	0	628	172	800	600	150DB	7.0	
149	Weights	6/06/07	7,300	0	0	3,276	894	4,170	3,130	150DB	7.0	
150	Wrestling Gym Wall	11/05/08	968	0	0	104	185	289	679	150DB	7.0	
151	Wrestling Mat & Training Dummy	12/10/08	1,200	0	0	129	229	358	842	150DB	7.0	
152	Weights	3/02/09	1,500	0	0	161	287	448	1,052	150DB	7.0	
202	Tractor	2/11/76	2,500	0	0	2,500	0	2,500	0	S/L	7.0	
203	Batting Cage	7/18/89	651	0	0	651	0	651	0	150DB	10.0000	
204	Baseball Backstop	2/08/90	978	0	0	978	0	978	0	150DB	15.0000	
205	25 Helmets	8/05/94	1,929	0	0	1,929	0	1,929	0	150DB	10.0000	
206	Shoulder Pads & Helmets	9/18/95	1,086	0	0	1,086	0	1,086	0	150DB	10.0000	
207	Lawnmower	5/20/96	7,975	0	0	7,975	0	7,975	0	150DB	10.0000	
208	50 Student Desks	11/11/96	3,003	0	0	3,003	0	3,003	0	150DB	10.0000	
209	Field House Carpet	5/20/99	4,044	0	0	4,044	0	4,044	0	150DB	7.0	
210	Shoulder Pads	12/10/99	579	0	0	579	0	579	0	150DB	7.0	
211	Lighting Outside Building #3	1/17/00	1,250	0	0	1,250	0	1,250	0	150DB	7.0	
212	Gym Equipment	5/12/00	7,000	0	0	7,000	0	7,000	0	150DB	7.0	
213	Compressor	5/26/00	1,750	0	0	1,750	0	1,750	0	150DB	7.0	
214	Football Helmets	8/28/00	1,275	0	0	1,275	0	1,275	0	150DB	7.0	
215	Lawn Mower	9/28/00	2,800	0	0	2,800	0	2,800	0	150DB	7.0	
216	Baseball Pitching Machine	10/26/00	1,993	0	0	1,993	0	1,993	0	150DB	7.0	
217	Kawasaki Mule	11/17/00	5,067	0	0	5,067	0	5,067	0	150DB	7.0	
218	Lights & Cages (Equinox Contribut	1/15/01	25,000	0	0	25,000	0	25,000	0	150DB	7.0	
219	Black Baseball Fence Slats	3/20/01	500	0	0	500	0	500	0	150DB	7.0	
220	4 Lighting Cages	3/29/01	4,748	0	0	4,748	0	4,748	0	150DB	7.0	
221	Football Field Lamps & Lights	4/27/01	12,160	0	0	12,160	0	12,160	0	150DB	7.0	
222	Football Lighting	8/03/01	2,205	0	0	2,205	0	2,205	0	150DB	7.0	
223	Two Man Service Football Sled	10/01/01	1,570	0	0	1,570	0	1,570	0	150DB	7.0	
224	20 X 12 Metal Building	4/11/02	1,200	0	0	1,200	0	1,200	0	150DB	7.0	
225	Kawasaki Mower	5/02/02	7,785	0	0	7,785	0	7,785	0	150DB	7.0	
226	Shoulder Pads	8/26/02	608	0	0	571	37	608	0	150DB	7.0	
227	2003 Bob Cat	8/27/03	10,937	0	0	8,928	1,339	10,267	670	150DB	7.0	
228	Security System	9/16/03	16,368	0	0	13,361	2,005	15,366	1,002	150DB	7.0	
229	Football Blasters	10/06/03	3,015	0	0	2,461	369	2,830	185	150DB	7.0	
230	Field House Condenser	8/10/04	1,300	0	0	902	159	1,061	239	150DB	7.0	
231	Porta Phones	11/05/04	1,377	0	0	955	169	1,124	253	150DB	7.0	
232	Storage Bin	8/29/05	621	0	0	355	76	431	190	150DB	7.0	
233	Bats	11/11/05	884	0	0	505	108	613	271	150DB	7.0	
234	Backstop Net	1/11/06	1,486	0	0	849	182	1,031	455	150DB	7.0	
235	5 Bats	6/05/06	940	0	0	537	115	652	288	150DB	7.0	
236	Two 40 Gallon Water Heaters	6/07/06	859	0	0	491	105	596	263	150DB	7.0	
237	20 H - BOL Backstop	6/13/06	649	0	0	371	79	450	199	150DB	7.0	
238	Softball Helmets	8/23/06	1,023	0	0	597	170	767	256	150DB	5.0	
239	Football Helmets	9/01/06	3,486	0	0	1,565	427	1,992	1,494	150DB	7.0	
240	C-Team Helmets	9/04/06	816	0	0	366	100	466	350	150DB	7.0	
241	Baseball/Softball Batting Cage	10/01/06	10,100	0	0	4,533	1,237	5,770	4,330	150DB	7.0	
242	Softball Backstop	10/02/06	649	0	0	291	80	371	278	150DB	7.0	

Asset Id	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period	
<b>Group: EQUIPMENT (continued)</b>												
243	Field House Television	10/02/06	700	0	0	314	86	400	300	150DB	7.0	
244	Baseball Helmets	10/02/06	918	0	0	412	112	524	394	150DB	7.0	
245	Baseball Cage Nets	12/01/06	1,975	0	0	886	242	1,128	847	150DB	7.0	
246	Softball Pitching Machine	1/08/07	1,500	0	0	673	184	857	643	150DB	7.0	
247	Baseball/Softball Fields Dragger	6/04/07	1,400	0	0	628	172	800	600	150DB	7.0	
248	10' X 14' Football Storage Unit	1/28/09	1,850	0	0	198	354	552	1,298	150DB	7.0	
249	Field Lights	5/29/09	905	0	0	97	173	270	635	150DB	7.0	
250	40 Two Piece Desks	6/10/09	3,234	0	0	347	618	965	2,269	150DB	7.0	
251	Baseball/Softball Sound System	3/01/10	622	0c	0	0	89	89	533	200DB	7.0	
										<b>EQUIPMENT</b>		
			423,331	0c	0	351,335	19,172	370,507	52,824			
<b>Group: INTANGIBLE</b>												
49	Accelerated Reader Software	8/28/02	522	0	0	522	0	522	0	Amort	3.0	
50	Paintshop Software	6/30/03	566	0	0	566	0	566	0	Amort	3.0	
51	Microsoft Office	6/30/03	968	0	0	968	0	968	0	Amort	3.0	
52	Vision for Windows	6/30/04	592	0	0	592	0	592	0	Amort	3.0	
53	Microsoft XP	10/01/06	1,215	0	0	1,114	101	1,215	0	Amort	3.0	
54	Report Card & Transcripts Software	11/02/06	931	0	0	828	103	931	0	Amort	3.0	
55	Web Page	11/09/07	3,113	0	0	3,113	0	3,113	0	Amort	3.0	
										<b>INTANGIBLE</b>		
			7,907	0c	0	7,703	204	7,907	0			
<b>Group: LAND</b>												
252	28 12 Acres 4150 Jones Road	5/11/70	28,120	0	0	0	0	0	28,120	Land	0.0	
										<b>LAND</b>		
			28,120	0c	0	0	0	0	28,120			
<b>Group: VEHICLES</b>												
253	94 Gray Ford Club Wagon Van	8/24/95	11,500	0	0	11,500	0	11,500	0	150DB	5.0000	
254	1976 MCI Crusader MC8 Bus	8/02/00	12,000	0	0	12,000	0	12,000	0	150DB	5.0	
255	2000 Blue Chevrolet Express Van	8/24/00	22,175	0	0	22,175	0	22,175	0	150DB	5.0	
256	2008 Ford E350 Van	8/28/08	19,042	0	0	2,856	4,856	7,712	11,330	150DB	5.0	
257	2008 Ford E350 Van	8/28/08	17,342	0	0	2,601	4,423	7,024	10,318	150DB	5.0	
258	2003 Dodge Stratus SE	6/21/10	1,225	0c	0	0	245	245	980	200DB	5.0	
										<b>VEHICLES</b>		
			83,284	0c	0	51,132	9,524	60,656	22,628			
<b>Grand Total</b>												
			2,242,853	0c	0	1,262,410	76,663	1,339,073	903,780			

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box  **X**
  - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

**Part I Automatic 3-Month Extension of Time.** Only submit original (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](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

<b>Type or print</b>	Name of Exempt Organization <b>WINDSOR ACADEMY, INC.</b>	Employer Identification number <b>58-1088998</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>4150 JONES ROAD</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>MACON GA 31216</b>	

**Check type of return to be filed** (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

● The books are in the care of ▶ J.C. CRANFORD 4150 JONES ROAD MACON GA 31216

Telephone No. ▶ (478) 781-1621 FAX No. ▶ \_\_\_\_\_

- 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  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 2/15/2011 to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning 7/1/2009 , and ending 6/30/2010 .

**2** If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

<b>3 a</b> 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>3a</b>	\$
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$
<b>c Balance Due.</b> 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.	<b>3c</b>	\$ <span style="float: right;">0</span>

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box  **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

<b>Type or print</b> File by the extended due date for filing the return See instructions	Name of Exempt Organization WINDSOR ACADEMY, INC.	Employer identification number 58-1088998
	Number, street, and room or suite no. If a P.O. box, see instructions 4150 JONES ROAD	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions MACON GA 31216	

**Check type of return to be filed (File a separate application for each return):**

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of  J.C. CRANFORD 4150 JONES ROAD MACON GA 31216  
Telephone No.  (478) 781-1621 FAX No.
- 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 . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 5/15/2011

5 For calendar year \_\_\_\_\_, or other tax year beginning 7/1/2009, and ending 6/30/2010

6 If this tax year is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

7 State in detail why you need the extension More time is requested to finish an audit and acquire all information needed to complete and file an accurate return.

<b>8 a</b> 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>8a</b>	\$	
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	<b>8b</b>	\$	
<b>c Balance Due.</b> Subtract line 8b from line 8a. 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.	<b>8c</b>	\$	0

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature *J.C. Cranford* Title C.P.A. Date 1/21/2011

Form 8868 (Rev 4-2009)