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Return of Organization Exempt From Income Tax**2009**Department of the Treasury
Internal Revenue ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

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

Open to Public Inspection**For the 2009 calendar year, or tax year beginning** 8/01, **2009, and ending** 7/31, **2010**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		C Please use IRS label or print or type. See specific instructions. PAGE PRIVATE SCHOOL, INC. 657 VICTORIA STREET COSTA MESA, CA 92627	D Employer Identification Number 95-1831061
		E Telephone number 949- 515-1700	G Gross receipts \$ 8,546,054.
F Name and address of principal officer SAME AS C ABOVE		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list (see instructions)	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ WWW.PAGESCHOOL.COM			
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of Formation 1908	M State of legal domicile CA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities <u>PROVIDING QUALITY EDUCATION AT THE PRE-SCHOOL AND ELEMENTARY SCHOOL LEVEL FOR CHILDREN- RANGING FROM TWO YEARS OLD THROUGH GRADE EIGHT.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3 5	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 0	
	5 Total number of employees (Part V, line 2a)	5 238	
	6 Total number of volunteers (estimate if necessary)	6 0	
Revenue	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a 0.	
	b Net unrelated business taxable income from Form 990-T, line 34	7b 0.	
	8 Contributions and grants (Part VIII, line 1h)	Prior Year Current Year	
	9 Program service revenue (Part VIII, line 2g)	9,203,985. 7,649,739.	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	411,716. 649,712.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,419. 127,022.	
	12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,624,120. 8,426,473.	
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
		14 Benefits paid to or for members (Part IX, column (A), line 4)	
		15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	6,153,112. 5,119,868.
16a Professional fundraising fees (Part IX, column (A), line 11e)			
b Total fundraising expenses (Part IX, column (D), line 25) ▶			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24)		2,801,856. 2,595,285.	
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		8,954,968. 7,715,153.	
19 Revenue less expenses Subtract line 18 from line 12	669,152. 711,320.		
Net Assets or Fund Balance	20 Total assets (Part X, line 16)	Beginning of Year End of Year	
	21 Total liabilities (Part X, line 26)	22,680,642. 23,523,474.	
	22 Net assets or fund balances Subtract line 21 from line 20	1,671,965. 1,803,477.	
		21,008,677. 21,719,997.	

Part II Signature Block

Sign Here	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 <u>Charles J. Vaughan</u> CHARLES J. VAUGHAN Type or print name and title	Date <u>11.30.10</u> PRESIDENT
Paid Preparer's Use Only	Preparer's signature <u>[Signature]</u> Firm's name (or yours if self-employed), address, and ZIP + 4 WERTZ & COMPANY LLP 5450 TRABUCO ROAD IRVINE, CA 92620	Date <u>11-8-10</u> Check if self-employed <input type="checkbox"/> Preparer's identifying number (see instructions) P00026489 EIN ▶ 02-0639624 Phone no ▶ (949) 756-5000

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No**BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.**

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

SEE SCHEDULE O

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 \$ 6,138,618. including grants of \$) (Revenue \$)

THE ORGANIZATION PROVIDED QUALITY EDUCATION AT THE PRE-SCHOOL AND ELEMENTARY SCHOOL LEVEL FOR 1,300 STUDENTS ON A DAILY BASIS DURING THE CURRENT FISCAL YEAR

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

4d Other program services (Describe in Schedule O)

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

4e Total program service expenses ▶ 6,138,618.

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 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and 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 statement 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 statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional		
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
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, and 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
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I</i>		X
25b 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)		
28a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
28c 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 Section 501(c)(3) organizations. 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? Note. All Form 990 filers are required to complete Schedule O	X	

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Form 990 (2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	0	
1b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	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	238	
2b	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	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If 'Yes,' enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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
7b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If 'Yes,' indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make any distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from other members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		

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Form 990 (2009)

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
1 a Enter the number of voting members of the governing body		
1 b 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
7 a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7 b 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:		
a The governing body?		X
b Each committee with authority to act on behalf of the governing body?		X
9 Is there any officer, director or 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
10 a Does the organization have local chapters, branches, or affiliates?		X
10 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	
11 A Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O		
12 a Does the organization have a written conflict of interest policy? If 'No,' go to line 13		X
12 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12 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?		
a The organization's CEO, Executive Director, or top management official		X
b Other officers of key employees of the organization		X
If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.)		
16 a 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
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. Disclosures

17 List the states with which a copy of this Form 990 is required to be filed CA

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 SEE SCHEDULE O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
CHARLES J. VAUGHAN 657 VICTORIA STREET COSTA MESA CA 92627 949-515-1700

Part VII	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees <i>(cont.)</i>
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(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			
- - - - -										
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1 b Total								711,564.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶ 2

- 3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual*
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If 'Yes' complete Schedule J for such individual*
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If 'Yes,' complete Schedule J for such person*

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of Services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization > 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	1 a Federated campaigns	1 a				
	b Membership dues	1 b				
	c Fundraising events	1 c				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f				
	g Noncash contribns included in lns 1a-1f.	\$				
h Total. Add lines 1a-1f						
PROGRAM SERVICE REVENUE	2 a TUITION CHARGED	Business Code	7,649,739.	7,649,739.		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		7,649,739.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		621,619.			621,619.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real (ii) Personal				
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less cost or other basis and sales expenses		57,812.			
	c Gain or (loss)		29,719.			
	d Net gain or (loss)		28,093.	28,093.		
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a	216,884.			
	b Less direct expenses	b	89,862.			
	c Net income or (loss) from fundraising events		127,022.	127,022.		
	9 a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions			8,426,473.	7,804,854.	0.	621,619.

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				
2 Grants and other assistance to individuals in the U S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	409,445.	0.	409,445.	0.
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.	0.	0.	0.
7 Other salaries and wages	4,228,896.	3,793,588.	435,308.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	481,527.	392,587.	88,940.	
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	36,847.		36,847.	
d Lobbying				
e Prof fundraising svcs See Part IV, ln 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	560,816.	560,816.		
23 Insurance	328,459.	268,679.	59,780.	
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 SUPPLIES	321,534.	179,127.	142,407.	
b REPAIRS & MAINT	292,589.	280,222.	12,367.	
c UTILITIES	284,514.	273,380.	11,134.	
d ADVERTISING	215,821.		215,821.	
e FOOD SERVICES	197,828.	193,809.	4,019.	
f All other expenses	356,877.	196,410.	160,467.	
25 Total functional expenses Add lines 1 through 24f	7,715,153.	6,138,618.	1,576,535.	0.
26 Joint costs. 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				

BAA

Form 990 (2009)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash — non-interest-bearing	382,883.	1	694,301.
	2 Savings and temporary cash investments	3,118,806.	2	1,995,573.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	70,971.	4	81,288.
	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		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	43,733.	9	37,952.
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 22,397,271.		
	b Less accumulated depreciation	10b 9,713,623.	12,961,813.	10c 12,683,648.
	11 Investments — publicly-traded securities	5,986,854.	11	7,893,970.
	12 Investments — other securities See Part IV, line 11		12	
	13 Investments — program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	115,582.	15	136,742.
16 Total assets. Add lines 1 through 15 (must equal line 34)	22,680,642.	16	23,523,474.	
LIABILITIES	17 Accounts payable and accrued expenses	399,790.	17	287,571.
	18 Grants payable		18	
	19 Deferred revenue	97,087.	19	193,370.
	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		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities Complete Part X of Schedule D	1,175,088.	25	1,322,536.
	26 Total liabilities. Add lines 17 through 25	1,671,965.	26	1,803,477.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets	21,008,677.	27	21,719,997.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, and equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	21,008,677.	33	21,719,997.
	34 Total liabilities and net assets/fund balances	22,680,642.	34	23,523,474.

BAA

Form 990 (2009)

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
2a		X
2b		X
2c		
3a		X
3b		

BAA

Form 990 (2009)

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 'unusual grants'.)						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

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						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	

13 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

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%

16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b 33-1/3 support test – 2008. 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 **stop here.** The organization qualifies as a publicly supported organization ☐

17a 10%-facts-and-circumstances test – 2009 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 **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ☐

b 10%-facts-and-circumstances test – 2008. 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 **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ☐

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

BAA

Schedule A (Form 990 or 990-EZ) 2009

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 yr 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 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

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

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	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

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

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 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. ☐

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

[illegible]

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service

Name of the organization

PAGE PRIVATE SCHOOL, INC.

Supplemental Financial Statements

- ▶ Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions

OMB No 1545-0047

2009**Open to Public
Inspection**

Employer identification number

95-1831061

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 may 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)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> 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 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 easement 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 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

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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?

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements Complete if 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?

☐ Yes

☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

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?

☐ Yes

☐ No

b If 'Yes,' explain the arrangement in Part XIV

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
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

(i) unrelated organizations

(ii) related organizations

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

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.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value
1a Land		4,052,337.		4,052,337.
b Buildings		14,377,324.	6,440,155.	7,937,169.
c Leasehold improvements		942,153.	651,427.	290,726.
d Equipment		240,617.	112,766.	127,851.
e Other		2,784,840.	2,509,275.	275,565.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				12,683,648.

BAA

Schedule D (Form 990) 2009

Part VII Investments—Other Securities See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.)		

Part VIII Investments—Program Related (See Form 990, Part X, line 13) N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets (See Form 990, Part X, line 15) N/A

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col. (B), line 15)	

Part X Other Liabilities (See Form 990, Part X, line 25)

(a) Description of Liability	(b) Amount
Federal Income Taxes	
DEFERRED COMPENSATION	1,264,709.
DEFERRED INSURANCE EXPENSE	57,827.
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)	1,322,536.

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Part XI	Reconciliation of Change in Net Assets from Form 990 to Financial Statements
----------------	---

N/A

- 1 Total revenue (Form 990, Part VIII, column (A), line 12)
- 2 Total expenses (Form 990, Part IX, column (A), line 25)
- 3 Excess or (deficit) for the year Subtract line 2 from line 1
- 4 Net unrealized gains (losses) on investments
- 5 Donated services and use of facilities
- 6 Investment expenses
- 7 Prior period adjustments
- 8 Other (Describe in Part XIV)
- 9 Total adjustments (net) Add lines 4 through 8
- 10 Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9

Part XII	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return
-----------------	---

N/A

- 1** Total revenue, gains, and other support per audited financial statements
- 2** Amounts included on line 1 but not on Form 990, Part VIII, line 12
 - a** Net unrealized gains on investments
 - b** Donated services and use of facilities
 - c** Recoveries of prior year grants
 - d** Other (Describe in Part XIV)
- e** Add lines **2a** through **2d**
- 3** Subtract line **2e** from line **1**
- 4** Amounts included on Form 990, Part VIII, line 12, but not on line **1**
 - a** Investments expenses not included on Form 990, Part VIII, line 7b
 - b** Other (Describe in Part XIV)
- c** Add lines **4a** and **4b**
- 5** Total revenue. Add lines **3** and **4c**. (This must equal Form 990, Part I, line 12.)

2a
2b
2c
2d

1
2
3
4
5

Part XIII	Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	N/A
------------------	---	------------

N/A

- 1** Total expenses and losses per audited financial statements
- 2** Amounts included on line 1 but not on Form 990, Part IX, line 25
 - a** Donated services and use of facilities
 - b** Prior year adjustments
 - c** Other losses
 - d** Other (Describe in Part XIV)
 - e** Add lines **2a** through **2d**
- 3** Subtract line **2e** from line **1**
- 4** Amounts included on Form 990, Part IX, line 25, but not on line **1**:
 - a** Investments expenses not included on Form 990, Part VIII, line 7b
 - b** Other (Describe in Part XIV)
 - c** Add lines **4a** and **4b**
- 5** Total expenses Add lines **3** and **4c** (This must equal Form 990, Part I, line 18)

2a
2b
2c
2d

1
2
3
4
5

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.

[illegible]

Part XIV	Supplemental Information <i>(continued)</i>
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SCHEDULE E
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Schools**

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

OMB No 1545 0047

2009**Open to Public
Inspection**

Name of the organization

PAGE PRIVATE SCHOOL, INC.

Employer identification number

95-1831061

	YES	NO
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?	X	
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?	X	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it had 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) <u>POLICY WAS PUBLISHED IN THE ORANGE COUNTY REGISTER (NEWSPAPER)</u>	X	
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered 'No,' to any of the above, please explain. If you need more space, use Schedule O (Form 990)	X	
5 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
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)		X
6a Does the organization receive any financial aid or assistance from a governmental agency?		X
b Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes,' to either line 6a or line 6b, please explain on Schedule O (Form 990)		X
7 Does the organization certify that it has complied with the applicable requirements of sections 401 through 405 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' explain on Schedule O (Form 990)	X	

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

Schedule E (Form 990 or 990-EZ) 2009

Department of the Treasury
Internal Revenue Service

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

PAGE PRIVATE SCHOOL, INC.

Employer identification number

95-1831061

Part I

Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17
Form 990EZ filers are not required to complete this part

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

- | | |
|---|--|
| <input type="checkbox"/> Mail solicitations | <input type="checkbox"/> Solicitation of non-government grants |
| <input type="checkbox"/> Internet and email solicitations | <input type="checkbox"/> Solicitation of government grants |
| <input type="checkbox"/> Phone solicitations | <input type="checkbox"/> Special fundraising events |
| <input type="checkbox"/> In-person solicitations | |

- 2a** Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes ☒ No

- b** If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						0

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

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

REVENUE		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		STUDENT FUNDRA (event type)	(event type)	(total number)	(Add col (a) through col (c))
	1 Gross receipts	216,884.			216,884.
	2 Less Charitable contributions				
	3 Gross income (line 1 minus line 2)	216,884.			216,884.
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	89,862.			89,862.
	10 Direct expense summary Add lines 4- through 9 in column (d)				89,862.
	11 Net income summary Combine lines 3, column (d) and line 10				127,022.

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.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
	1 Gross revenue				
DIRECT EXPENSES	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	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)				
	8 Net gaming income summary Combine lines 1, column (d) and line 7				

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		

13 Indicate the percentage of gaming activity operated in**a** The organization's facility**13a** %**b** An outside facility**13b** %**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ _____

Address ▶ _____

15a Does the organization have a contact with a third party from whom the organization receives gaming revenue?**15a****b** If 'Yes,' enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____**c** If 'Yes,' enter name and address of the third party

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?**17a****b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

PAGE PRIVATE SCHOOL, INC.

Employer identification number

95-1831061

Part I Questions Regarding Compensation

- 1 a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

- ☐ First-class or charter travel
☐ Travel for companions
☐ Tax indemnification and gross-up payments
☐ Discretionary spending account

- ☐ Housing allowance or residence for personal use
☐ Payments for business use of personal residence
☐ Health or social club dues or initiation fees
☐ 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.

- ☐ Compensation committee
☐ Independent compensation consultant
☐ Form 990 of other organizations

- ☐ Written employment contract
☐ Compensation survey or study
☐ 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 person 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**1 b****2****4 a****4 b****4 c****5 a****5 b****6 a****6 b****7****8****9**

X

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2009

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.

[illegible]

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545 0047

2009

**Open to Public
Inspection**

Name of the organization

PAGE PRIVATE SCHOOL, INC.

Employer identification number

95-1831061

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

PROVIDING QUALITY EDUCATION AT THE

PRE-SCHOOL AND ELEMENTARY SCHOOL LEVEL

FOR CHILDREN- RANGING FROM TWO YEARS OLD

THROUGH GRADE EIGHT.

FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS

FORM 990 WAS REVIEWED BY BOARD OF DIRECTORS BEFORE BEING FILED.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

PAGE PRIVATE SCHOOL MAKES ALL GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND

FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC AT THE REQUEST OF THE RESPECTED PARTY.

Name of the organization

PAGE PRIVATE SCHOOL, INC.

Employer identification number

95-1831061

PAGE PRIVATE SCHOOL, INC.

95-1831061

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAGE /BASIS REDUCT.	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
FORM 990/990-PF																
AUTO / TRANSPORT EQUIPMENT																
1	AUTOMOBILES	VARIOUS		33,919							33,919	33,919	S/L	5		0
23	2006 TOYOTA SEQUOIA	9/06/05		33,680							33,680	26,383	S/L	5		6,736
37	07 LEXUS 460 NET OF GAIN	4/02/07	9/30/09	59,439							59,439	27,739	S/L	5		1,981
93	2008 LEXUS RX 440H	8/26/08		48,972							48,972	8,978	S/L	5		9,794
94	2009 FORD E350 TRUCK	12/01/08		28,098							28,098	3,746	S/L	5		5,620
113	2008 FORD F250	8/28/09		21,029							21,029		S/L	5		3,855
114	2009 LEXUS LS460	9/15/09		74,919							74,919		S/L	5		13,735
141	AUTOMOBILES	VARIOUS	8/28/09	19,228							19,228	19,228	S/L	5		0
TOTAL AUTO / TRANSPORT EQUIP				319,284	0	0	0	0	0	0	319,284	119,993				41,721
BUILDINGS																
2	BUILDINGS & IMPROVEMENTS	VARIOUS		12,941,041							12,941,041	5,782,792	S/L	35		369,744
6	BUILDINGS & IMPROVEMENTS	1/01/04		210,221							210,221	33,534	S/L	35		6,006
9	BUILDINGS & IMPROV - HP	1/01/05		47,342							47,342	6,201	S/L	35		1,353
10	BUILDINGS & IMPROV - BH	1/01/05		5,895							5,895	770	S/L	35		168
11	BUILDINGS & IMPROV - GG	1/01/05		5,081							5,081	665	S/L	35		145
12	BUILDINGS & IMPROV - NM	1/01/05		85,048							85,048	11,137	S/L	35		2,430
13	BUILDINGS & IMPROV - HP	1/01/05		2,323							2,323	303	S/L	35		66
14	BUILDINGS & IMPROV - TC	1/01/05		23,177							23,177	3,034	S/L	35		662
24	BUILDING IMPROV - TC	2/01/06		85,989							85,989	20,065	S/L	15		5,733
25	BUILDING IMPROV - BH	2/01/06		7,460							7,460	5,222	S/L	5		1,492
26	BUILDING IMPROV - BH	11/01/05		5,400							5,400	1,350	S/L	15		360
27	CARPET - BH	6/16/06		2,671							2,671	1,647	S/L	5		534

PAGE PRIVATE SCHOOL, INC.

95-1831061

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAGE /BASIS REDUCT.	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
28	ROOFING - BH	6/30/06		23,680							23,680	4,869	S/L	15		1,579
29	ROOFING - GG	2/01/06		21,160							21,160	4,938	S/L	15		1,411
30	BUILDING IMPROV - HP	2/01/06		141,598							141,598	16,520	S/L	30		4,720
31	CARPET - NM	8/26/05		8,255							8,255	6,466	S/L	5		1,651
32	BUILDING IMPROV - NM	2/01/06		26,946							26,946	6,286	S/L	15		1,796
38	BUILDING IMPROV - NM	7/30/07		14,830							14,830	1,978	S/L	15		989
39	BUILDING IMPROV - NM	8/16/06		2,490							2,490	484	S/L	15		166
40	BUILDING IMPROV - HP	2/01/07		345,943							345,943	57,657	S/L	15		23,063
41	BUILDING IMPROV - TC	2/01/07		10,042							10,042	1,673	S/L	15		669
42	BUILDING IMPROV. - UP	2/01/07		3,838							3,838	1,920	S/L	5		768
43	CARPET - UP	8/22/06		3,987							3,987	2,325	S/L	5		797
44	CARPET - UP	7/26/07		22,242							22,242	8,896	S/L	5		4,448
45	BUILDING IMPROV - UP	11/20/06		3,500							3,500	622	S/L	15		233
54	BUILDING IMPROV - GG	8/28/06		3,878							3,878	755	S/L	15		259
55	BUILDING & IMPROV - HP	8/08/07		2,927							2,927	390	S/L	15		195
56	BUILDING & IMPROV - BH	8/15/07		300							300	40	S/L	15		20
57	BUILDING & IMPROV - HP	8/24/07		1,425							1,425	182	S/L	15		95
58	BUILDING & IMPROV - HP	8/24/07		5,780							5,780	738	S/L	15		385
59	BUILDING & IMPROV - HP	8/29/07		346							346	44	S/L	15		23
60	BUILDING & IMPROV - GG	9/07/07		2,250							2,250	288	S/L	15		150
61	BUILDING & IMPROV - NM	10/04/07		456							456	55	S/L	15		30
62	BUILDING & IMPROV - HP	11/14/07		11,569							11,569	1,349	S/L	15		771
63	BUILDING & IMPROV - TC	11/16/07		1,839							1,839	205	S/L	15		123
64	BUILDING & IMPROV - TC	11/16/07		1,839							1,839	205	S/L	15		123
65	BUILDING & IMPROV - HP	12/04/07		11,285							11,285	1,254	S/L	15		752
66	BUILDING & IMPROV - NM	12/18/07		1,000							1,000	106	S/L	15		67
67	BUILDING & IMPROV - NM	2/08/08		28							28	3	S/L	15		2

PAGE PRIVATE SCHOOL, INC.

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NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAGE /BASIS REDUCT.	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
68	BUILDING & IMPROV - GG	2/19/08		1,250							1,250	118	S/L	15		83
70	BUILDING & IMPROV - GG	4/02/08		1,288							1,288	115	S/L	15		86
71	BUILDING & IMPROV - NM	4/04/08		6,512							6,512	579	S/L	15		434
72	BUILDING & IMPROV - NM	4/28/08		260							260	21	S/L	15		17
73	BUILDING & IMPROV - NM	5/01/08		9,080							9,080	756	S/L	15		605
74	BUILDING & IMPROV - NM	5/13/08		10,000							10,000	834	S/L	15		667
75	BUILDING & IMPROV - NM	5/16/08		3,180							3,180	247	S/L	15		212
76	BUILDING & IMPROV - NM	6/02/08		27,928							27,928	2,172	S/L	15		1,862
77	BUILDING & IMPROV - NM	7/01/08		4,487							4,487	324	S/L	15		299
90	B&I - SEMINOLE POOL	8/03/07		3,000							3,000	400	S/L	15		200
91	B&I - STEVE YOUNG'S	2/06/08		4,995							4,995	500	S/L	15		333
92	B&I - STRYKER ENGINEERING	7/15/08		4,881							4,881	351	S/L	15		325
95	B&I - BH - AWNING	4/16/09		1,794							1,794	90	S/L	5		359
96	B&I - BH - PLASTERING	6/23/09		11,375							11,375	63	S/L	15		758
97	B&I - GG - PLASTERING	5/14/09		2,000							2,000	33	S/L	15		133
98	B&I - HP - PLASTERING	6/04/09		2,000							2,000	22	S/L	15		133
105	B&I - NM - AC UNIT	8/12/08		4,874							4,874	325	S/L	15		325
106	B&I - NM	12/11/08		1,750							1,750	78	S/L	15		117
107	B&I - NM - GATE	2/24/09		1,993							1,993	55	S/L	15		133
108	B&I - NM - PLASTERING	5/14/09		2,000							2,000	33	S/L	15		133
109	B&I - NM	7/31/09		4,778							4,778		S/L	15		319
110	B&I - TC - AWNING	6/30/09		1,965							1,965	11	S/L	15		131
111	B&I - TC	5/28/09		11,114							11,114	124	S/L	15		741
112	B&I - UP - NEW BATHROOM	1/27/09		2,600							2,600	87	S/L	15		173
115	B&I - BH HERRERA CONSTRUCT	7/15/10		93,027							93,027		S/L	15		517
116	B&I - BH	5/17/10		1,900							1,900		S/L	15		21
117	B&I - BH	7/09/10		6,005							6,005		S/L	15		33

PAGE PRIVATE SCHOOL, INC.

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NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT.	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.	
118	B&I - BH	7/19/10		1,703							1,703		S/L	15		0	
119	B&I - GG	12/18/09		6,120							6,120		S/L	15		238	
120	B&I - HP	9/29/09		2,524							2,524		S/L	15		140	
121	B&I - NM	9/17/09		26,780							26,780		S/L	15		1,488	
123	B&I - TC	8/20/09		8,750							8,750		S/L	15		535	
124	B&I - UP	8/20/09		2,350							2,350		S/L	15		144	
125	B&I - UP	4/01/10		7,980							7,980		S/L	15		177	
TOTAL BUILDINGS																	445,849
FURNITURE AND FIXTURES																	
3	FURNITURE & FIXTURES	VARIOUS		2,275,124							2,275,124	2,275,124	S/L	15		0	
7	FURNITURE & FIXTURES	1/01/04		113,009							113,009	45,392	S/L	15		7,534	
15	FURNITURE & FIXTURES - HP	1/01/05		4,285							4,285	1,614	150DB	15		267	
16	FURNITURE & FIXTURES - BH	1/01/05		3,545							3,545	1,336	150DB	15		221	
17	FURNITURE & FIXTURES - HP	1/01/05		760							760	287	150DB	15		47	
18	FURNITURE & FIXTURES - NM	1/01/05		40,474							40,474	15,247	150DB	15		2,523	
19	FURNITURE & FIXTURES - UP	1/01/05		7,087							7,087	2,669	150DB	15		442	
20	FURNITURE & FIXTURES - TC	1/01/05		15,161							15,161	5,711	150DB	15		945	
21	FURNITURE & FIXTURES - #9	1/01/05		29,007							29,007	10,927	150DB	15		1,808	
22	FURNITURE & FIXTURES - NM	1/01/05		15,468							15,468	5,827	150DB	15		964	
33	FURNITURE & FIXTURES #9	2/01/06		50,032							50,032	35,021	S/L	5		10,006	
34	FURNITURE & FIXTURES - HP	2/01/06		8,330							8,330	5,831	S/L	5		1,666	
35	FURNITURE & FIXTURES - NM	2/01/06		31,911							31,911	7,445	S/L	15		2,127	
36	FURNITURE & FIXTURES - UP	2/01/06		2,760							2,760	1,932	S/L	5		552	
46	FURNITURE & FIXTURES - #9	2/01/07		8,599							8,599	4,300	S/L	5		1,720	
47	FURNITURE & FIXTURES - BH	2/01/07		2,628							2,628	1,315	S/L	5		526	

7/31/10

2009 FEDERAL BOOK DEPRECIATION SCHEDULE

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PAGE PRIVATE SCHOOL, INC.

95-1831061

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAG /BASIS REDUCT.	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
48	FURNITURE & FIXTURES - GG	4/19/07		2,131							2,131	959	S/L	5		426
49	FURNITURE & FIXTURES - HP	2/01/07		27,422							27,422	13,710	S/L	5		5,484
50	FURNITURE & FIXTURES - NM	9/01/06		6,982							6,982	4,072	S/L	5		1,396
51	FURNITURE & FIXTURES - TC	8/25/06		28,650							28,650	5,571	S/L	15		1,910
52	FURNITURE & FIXTURES - TC	2/01/07		5,235							5,235	2,618	S/L	5		1,047
53	FURNITURE & FIXTURES - UP	2/01/07		3,028							3,028	1,515	S/L	5		606
78	FURNITURE & FIXTURES 2183	8/01/07		9,757							9,757	2,788	S/L	7		1,394
79	FURNITURE & FIXTURES 2363	8/07/07		1,836							1,836	524	S/L	7		262
80	FURNITURE & FIXTURES 2197	8/09/07		280							280	80	S/L	7		40
81	FURNITURE & FIXTURES 2199	8/13/07		2,280							2,280	652	S/L	7		326
82	FURNITURE & FIXTURES 2279	10/10/07		2,061							2,061	539	S/L	7		294
83	FURNITURE & FIXTURES 2281	10/10/07		1,736							1,736	455	S/L	7		248
84	FURNITURE & FIXTURES 2787	11/01/07		2,787							2,787	697	S/L	7		398
85	FURNITURE & FIXTURES 2545	5/13/08		1,391							1,391	249	S/L	7		199
86	FURNITURE & FIXTURES 2570	6/02/08		1,396							1,396	232	S/L	7		199
87	FURNITURE & FIXTURES 2582	6/10/08		1,634							1,634	272	S/L	7		233
88	FURNITURE & FIXTURES 2582	6/10/08		2,195							2,195	366	S/L	7		314
89	FURNITURE & FIXTURES 2583	6/10/08		1,085							1,085	181	S/L	7		155
99	FURNITURE & FIXTURES - #9	10/09/08		2,182							2,182	260	S/L	7		312
100	FURNITURE & FIXTURES - #9	11/13/08		1,515							1,515	162	S/L	7		216
101	FURNITURE & FIXTURES - #9	8/10/08		2,103							2,103	300	S/L	7		300
102	FURNITURE & FIXTURES - GG	9/04/08		1,925							1,925	252	S/L	7		275
103	FURNITURE & FIXTURES - TC	11/11/08		7,766							7,766	832	S/L	7		1,109
126	FURNITURE & FIXTURES #9	10/27/09		8,962							8,962		S/L	7		960
127	FURNITURE & FIXTURES #9	11/10/09		1,266							1,266		S/L	7		136
128	FURNITURE & FIXTURES #9	3/09/10		1,184							1,184		S/L	7		70
129	FURNITURE & FIXTURES #9	5/13/10		2,769							2,769		S/L	7		99

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NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAGE /BASIS REDUCT.	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
130	FURNITURE & FIXTURES BH	6/10/10		18,845							18,845		S/L	7		449
131	FURNITURE & FIXTURES GG	8/13/09		3,950							3,950		S/L	7		564
132	FURNITURE & FIXTURES HP	9/10/09		1,405							1,405		S/L	7		184
133	FURNITURE & FIXTURES HP	2/02/10		2,000							2,000		S/L	7		143
134	FURNITURE & FIXTURES NM	9/29/09		2,129							2,129		S/L	7		253
135	FURNITURE & FIXTURES NM	2/17/10		3,298							3,298		S/L	7		196
136	FURNITURE & FIXTURES TC	1/06/09		1,274							1,274		S/L	7		182
137	FURNITURE & FIXTURES TC	7/31/10		5,087							5,087		S/L	7		0
139	FURNITURE & FIXTURES UP	9/01/09		1,673							1,673		S/L	7		219
140	FURNITURE & FIXTURES UP	6/29/10		5,441							5,441		S/L	7		65
TOTAL FURNITURE AND FIXTURE																
				2,784,840		0	0	0	0	0	2,784,840	2,457,264				52,011
IMPROVEMENTS																
4	IMPROVEMENTS	VARIOUS		623,637							623,637	623,637	S/L	15		0
8	IMPROVEMENTS	1/01/04		7,719							7,719	3,102	S/L	15		515
104	IMPROV - NM - SOCCERFIELD	5/19/09		310,797							310,797	3,453	S/L	15		20,720
TOTAL IMPROVEMENTS																
				942,153		0	0	0	0	0	942,153	630,192				21,235
LAND																
5	LAND	VARIOUS		1,750,914							1,750,914					0
69	BUILDING & IMPROV - NM	3/06/08		2,301,423							2,301,423					0
TOTAL LAND																
				4,052,337		0	0	0	0	0	4,052,337	0				0
TOTAL DEPRECIATION																
				22,475,938		0	0	0	0	0	22,475,938	9,201,755				560,816

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NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR	SALVAGE /BASIS REDUCT	DEPR BASIS	PRIOR DEPR	METHOD	LIFE	RATE	CURRENT DEPR
	GRAND TOTAL DEPRECIATION			22,475,938		0	0	0	0	0	22,475,938	9,201,755				560,816
	DEPRECIATION ASSETS SOLD			78,667		0	0	0	0	0	78,667	46,967				1,981
	DEPR REMAINING ASSETS			22,397,271		0	0	0	0	0	22,397,271	9,154,788				558,835