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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)

OMB No 1545-0047

2010

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 2010 calendar year, or tax year beginning 07/01, 2010, and ending 06/30, 2011

Form 990 header section containing organization name (THE NORA SCHOOL, INC.), EIN (52-1036230), address (955 SLIGO AVENUE, SILVER SPRING, MD 20910), and other identifying information.

Part I Summary

Table with 22 rows detailing financial and operational data. Rows include: 1. Mission statement; 2-7. Governance and membership; 8-12. Revenue; 13-19. Expenses; 20-22. Net assets or fund balances. Includes a 'RECEIVED' stamp from the IRS dated AUG 27 2012.

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 block section with handwritten signatures and dates. Includes signature of officer (Mara Y. Nicastro, Assistant Head) dated 10/18/2011, and preparer (Edward S. Regan) dated 10/14/11.

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2010)

SCANNED OCT 12 2012

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**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III

**1 Briefly describe the organization's mission**

THE NORA SCHOOL IS A SMALL, COLLEGE PREPARATORY LEARNING COMMUNITY THAT WORKS TO BRING OUT THE BEST IN STUDENTS WITH DIFFERENT LEARNING STYLES.

**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 \$ 1,162,523 including grants of \$ \_\_\_\_\_) (Revenue \$ 1,251,797.)  
THE NORA SCHOOL IS A COLLEGE PREPARATORY HIGH SCHOOL FOR AT-RISK STUDENTS.

**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** ▶ 1,162,523.

Part IV Checklist of Required Schedules

Table with 3 columns: Question, Yes, No. Rows 1-20b detailing various organizational requirements and reporting obligations.

Part IV Checklist of Required Schedules (continued)

|   | Yes | No |
|---|-----|----|
| 21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II. . . . .  |     | X  |
| 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III. . . . .   |     | X  |
| 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. . . . .                            |     | X  |
| 24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25. . . . . |     | 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? . . . . .   |     |    |
| 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II. . . . .  |     | X  |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III. . . . .                  |     | 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? If "Yes," complete Schedule L, Part IV. . . . .  |     | X  |
| b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. . . . .   |     | X  |
| c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. . . . .   |     | X  |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. . . . .  |     | X  |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. . . . .  |     | X  |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. . . . .  |     | X  |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. . . . .  |     | 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? If "Yes," complete Schedule R, Part I. . . . .  |     | X  |
| 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1. . . . .   |     | X  |
| 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? . . . . .  |     | X  |
| a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  |     |    |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2. . . . .  |     | 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? If "Yes," complete Schedule R, Part VI. . . . .   |     | 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   |    |

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V.

Table with columns for question number, response box, Yes, and No. Contains questions 1a through 14b regarding IRS filings and tax compliance.

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.

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members included... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets... 6 Does the organization have members or stockholders... 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body... 7b Are any decisions of the governing body subject to approval... 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates? 10b 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? 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c 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? 14 Does the organization have a written document retention and destruction policy? 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 The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b 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 NONE
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 [X] 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. MARA NICASTRO 955 SLIGO AVENUE SILVER SPRING, MD 20910 301-495-6672

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

Check if Schedule O contains a response to any question in this Part VII.

**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

- 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, if any. 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 neither the organization nor any related organization compensated any current officer, director, or trustee

| (A)<br>Name and Title                      | (B)<br>Average hours per week (describe hours for related organizations in Schedule O) | (C)<br>Position (check all that apply) |                       |         |              |                              |          | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|--|--|-----------------------|---------|--------------|------------------------------|----------|--|---|---|
|  |  | Individual trustee or director         | Institutional trustee | Officer | Key employee | Highest compensated employee | Former   |  |   |   |
| (1) GERARD WIDDICOMBE<br>CHAIR EMERITUS    | 1.00   | X                                      |                       | X       |              |                              | 0.       | 0.   | 0.  |   |
| (2) DAVE MULLEN<br>HEAD OF SCHOOL          | 40.00  | X                                      |                       | X       |              |                              | 120,875. | 0.   | 3,620.  |   |
| (3) ELAINE MACK<br>TREASURER               | 1.00   | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| (4) JIMMY KRAFT<br>VICE CHAIR              | 1.00   | X                                      |                       | X       |              |                              | 0.       | 0.   | 0.  |   |
| (5) BEAU KAPLAN<br>CHAIR EMERITUS          | 1.00   | X                                      |                       | X       |              |                              | 0.       | 0.   | 0.  |   |
| (6) MARA NICASTRO<br>ASSISTANT HEAD        | 40.00  | X                                      |                       | X       |              |                              | 92,859.  | 0.   | 2,786.  |   |
| (7) ROBERT HERMAN<br>CHAIR                 | 1.00   | X                                      |                       | X       |              |                              | 0.       | 0.   | 0.  |   |
| (8) HEDY SZANZER<br>FACULTY REPRESENTATIVE | 1.00   | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| (9) MATT HARRE<br>MEMBER                   | 1.00   | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| (10) VAL WISE<br>MEMBER                    | 1.00   | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| (11) ANDREW SCHOENBACH<br>MEMBER           | 1.00   | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| (12)                                       |  |  |                       |         |              |                              |          |  |   |   |
| (13)                                       |  |  |                       |         |              |                              |          |  |   |   |
| (14)                                       |  |  |                       |         |              |                              |          |  |   |   |
| (15)                                       |  |  |                       |         |              |                              |          |  |   |   |
| (16)                                       |  |  |                       |         |              |                              |          |  |   |   |

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

| (A)<br>Name and title  | (B)<br>Average hours per week (describe hours for related organizations in Schedule O) | (C)<br>Position (check all that apply) |                       |         |              |                              |          | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|--|--|-----------------------|---------|--------------|------------------------------|----------|--|---|---|
|  |  | Individual trustee or director         | Institutional trustee | Officer | Key employee | Highest compensated employee | Former   |  |   |   |
| (17) -----   |  |  |                       |         |              |                              |          |  |   |   |
| (18) -----   |  |  |                       |         |              |                              |          |  |   |   |
| (19) -----   |  |  |                       |         |              |                              |          |  |   |   |
| (20) -----   |  |  |                       |         |              |                              |          |  |   |   |
| (21) -----   |  |  |                       |         |              |                              |          |  |   |   |
| (22) -----   |  |  |                       |         |              |                              |          |  |   |   |
| (23) -----   |  |  |                       |         |              |                              |          |  |   |   |
| (24) -----   |  |  |                       |         |              |                              |          |  |   |   |
| (25) -----   |  |  |                       |         |              |                              |          |  |   |   |
| (26) -----   |  |  |                       |         |              |                              |          |  |   |   |
| (27) -----   |  |  |                       |         |              |                              |          |  |   |   |
| (28) -----   |  |  |                       |         |              |                              |          |  |   |   |
| <b>1b Sub-total</b> .....  |  |  |                       |         |              |                              | 213,734. | 0.   | 6,406.  |   |
| <b>c Total from continuation sheets to Part VII, Section A</b> ..... |  |  |                       |         |              |                              |          |  |   |   |
| <b>d Total (add lines 1b and 1c)</b> .....                           |  |  |                       |         |              |                              | 213,734. | 0  | 6,406.  |   |

**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 **▶ 1**

|   | Yes | No |
|---|-----|----|
| <b>3</b> 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 .....   |     | X  |
| <b>4</b> 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 ..... |     | X  |
| <b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person .....                       |     | 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)<br>Name and business address | (B)<br>Description of services | (C)<br>Compensation |
|----------------------------------|--------------------------------|---------------------|
| NONE                             | NONE                           |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |

**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)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from tax<br>under sections<br>512, 513, or 514 |
|--|---|----------------------|----------------------|--|---|---|
| <b>Contributions, gifts, grants and other similar amounts</b>                | <b>1a</b> Federated campaigns . . . . .   | <b>1a</b>            |                      |  |   |   |
|  | <b>b</b> Membership dues . . . . .  | <b>1b</b>            |                      |  |   |   |
|  | <b>c</b> Fundraising events . . . . .   | <b>1c</b>            |                      |  |   |   |
|  | <b>d</b> Related organizations . . . . .  | <b>1d</b>            |                      |  |   |   |
|  | <b>e</b> Government grants (contributions) . . . . .  | <b>1e</b>            |                      |  |   |   |
|  | <b>f</b> All other contributions, gifts, grants, and similar amounts not included above . . . . .   | <b>1f</b>            | 75,667.              |  |   |   |
|  | <b>g</b> Noncash contributions included in lines 1a-1f \$ . . . . .   |                      |                      |  |   |   |
|  | <b>h Total.</b> Add lines 1a-1f . . . . .   |                      | 75,667.              |  |   |   |
| <b>Program Service Revenue</b>   |   | <b>Business Code</b> |                      |  |   |   |
|  | <b>2a</b> EDUCATION SERVICES . . . . .  | 611710               | 1,251,797.           | 1,251,797  |   |   |
|  | <b>b</b> . . . . .  |                      |                      |  |   |   |
|  | <b>c</b> . . . . .  |                      |                      |  |   |   |
|  | <b>d</b> . . . . .  |                      |                      |  |   |   |
|  | <b>e</b> . . . . .  |                      |                      |  |   |   |
|  | <b>g Total.</b> Add lines 2a-2f . . . . .   |                      | 1,251,797.           |  |   |   |
| <b>Other Revenue</b>   | <b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .   | ATTACHMENT 1         | 20,226.              |  |   | 20,226.   |
|  | <b>4</b> Income from investment of tax-exempt bond proceeds . . . . .   |                      | 0.                   |  |   |   |
|  | <b>5</b> Royalties . . . . .  |                      | 0.                   |  |   |   |
|  |   | (i) Real             | (ii) Personal        |  |   |   |
|  | <b>6a</b> Gross Rents . . . . .   |                      |                      |  |   |   |
|  | <b>b</b> Less rental expenses . . . . .   |                      |                      |  |   |   |
|  | <b>c</b> Rental income or (loss) . . . . .  |                      |                      |  |   |   |
|  | <b>d</b> Net rental income or (loss) . . . . .  |                      |                      | 0.   |   |   |
|  |   | (i) Securities       | (ii) Other           |  |   |   |
|  | <b>7a</b> Gross amount from sales of assets other than inventory . . . . .  |                      |                      |  |   |   |
|  | <b>b</b> Less cost or other basis and sales expenses . . . . .  |                      |                      |  |   |   |
|  | <b>c</b> Gain or (loss) . . . . .   |                      |                      |  |   |   |
|  | <b>d</b> Net gain or (loss) . . . . .   |                      |                      | 0.   |   |   |
|  | <b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . . | a                    |                      |  |   |   |
|  | <b>b</b> Less direct expenses . . . . .   | b                    |                      |  |   |   |
| <b>c</b> Net income or (loss) from fundraising events . . . . .              |   |                      | 0.                   |  |   |   |
| <b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . . | a   |                      |                      |  |   |   |
| <b>b</b> Less direct expenses . . . . .                                      | b   |                      |                      |  |   |   |
| <b>c</b> Net income or (loss) from gaming activities . . . . .               |   |                      | 0.                   |  |   |   |
| <b>10a</b> Gross sales of inventory, less returns and allowances . . . . .   | a   |                      |                      |  |   |   |
| <b>b</b> Less cost of goods sold . . . . .                                   | b   |                      |                      |  |   |   |
| <b>c</b> Net income or (loss) from sales of inventory . . . . .              |   |                      | 0.                   |  |   |   |
| <b>Miscellaneous Revenue</b>   |   | <b>Business Code</b> |                      |  |   |   |
| <b>11a</b> . . . . .   |   |                      |                      |  |   |   |
| <b>b</b> . . . . .   |   |                      |                      |  |   |   |
| <b>c</b> . . . . .   |   |                      |                      |  |   |   |
| <b>d</b> All other revenue . . . . .   |   |                      |                      |  |   |   |
| <b>e Total.</b> Add lines 11a-11d . . . . .                                  |   |                      | 0.                   |  |   |   |
| <b>12 Total revenue.</b> See instructions . . . . .                          |   |                      | 1,347,690            | 1,251,797.   |   | 20,226  |

**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)

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.   | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>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 . . . . .  | 0.                    |                                 |  |                             |
| 5 Compensation of current officers, directors, trustees, and key employees . . . . .   | 213,734.              | 160,300.                        | 49,159.                                | 4,275.                      |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .  | 0.                    |                                 |  |                             |
| 7 Other salaries and wages . . . . .   | 578,500.              | 553,755.                        |  | 24,745.                     |
| 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .  | 19,227.               | 17,625.                         | 1,602.                                 |                             |
| 9 Other employee benefits . . . . .  | 48,140.               | 43,407.                         | 3,011.                                 | 1,722.                      |
| 10 Payroll taxes . . . . .   | 62,458.               | 56,317.                         | 3,907.                                 | 2,234.                      |
| 11 Fees for services (non-employees)   |                       |                                 |  |                             |
| a Management . . . . .   | 0.                    |                                 |  |                             |
| b Legal . . . . .  | 0.                    |                                 |  |                             |
| c Accounting . . . . .   | 7,890.                |                                 | 7,890.                                 |                             |
| d Lobbying . . . . .   | 0.                    |                                 |  |                             |
| e Professional fundraising services See Part IV, line 17   | 0.                    |                                 |  |                             |
| f Investment management fees . . . . .   | 0.                    |                                 |  |                             |
| g Other . . . . .  | 0.                    |                                 |  |                             |
| 12 Advertising and promotion . . . . .   | 0.                    |                                 |  |                             |
| 13 Office expenses . . . . .   | 2,622.                | 2,364.                          | 164.                                   | 94.                         |
| 14 Information technology . . . . .  | 10,615.               | 9,926.                          | 689.                                   |                             |
| 15 Royalties . . . . .   | 0.                    |                                 |  |                             |
| 16 Occupancy . . . . .   | 0.                    |                                 |  |                             |
| 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 . . . . .  | 39,317.               | 39,317.                         |  |                             |
| 21 Payments to affiliates . . . . .  | 0.                    |                                 |  |                             |
| 22 Depreciation, depletion, and amortization . . . . .   | 58,059.               | 58,059.                         |  |                             |
| 23 Insurance . . . . .   | 19,745.               | 19,745.                         |  |                             |
| 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)   |                       |                                 |  |                             |
| a TEXTS/TEACHING AIDS  | 12,022.               | 11,242.                         | 780.                                   |                             |
| b ACTIVITIES AND BOOKS   | 16,864.               | 16,864.                         |  |                             |
| c SENIOR RETREATS  | 4,085.                | 4,085.                          |  |                             |
| d BANK FEES  | 783.                  |                                 | 783.                                   |                             |
| e RECRUITING   | 45,805.               | 42,597.                         | 3,208.                                 |                             |
| f All other expenses   | 136,044.              | 126,920.                        | 3,692.                                 | 5,432.                      |
| 25 Total functional expenses. Add lines 1 through 24f  | 1,275,910.            | 1,162,523.                      | 74,885.                                | 38,502.                     |
| 26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) 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)<br>Beginning of year |            | (B)<br>End of year |            |
|--|--|--------------------------|------------|--------------------|------------|
| <b>Assets</b>  | <b>1</b> Cash - non-interest-bearing . . . . .   |                          | <b>1</b>   |                    |            |
|  | <b>2</b> Savings and temporary cash investments . . . . .  | 1,669,082.               | <b>2</b>   | 1,737,308.         |            |
|  | <b>3</b> Pledges and grants receivable, net . . . . .  |                          | <b>3</b>   |                    |            |
|  | <b>4</b> Accounts receivable, net . . . . .  | 14,175.                  | <b>4</b>   | 11,305.            |            |
|  | <b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .  |                          | <b>5</b>   |                    |            |
|  | <b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) . . . . . |                          | <b>6</b>   |                    |            |
|  | <b>7</b> Notes and loans receivable, net . . . . .   |                          | <b>7</b>   |                    |            |
|  | <b>8</b> Inventories for sale or use . . . . .   |                          | <b>8</b>   |                    |            |
|  | <b>9</b> Prepaid expenses and deferred charges . . . . .   |                          | <b>9</b>   |                    |            |
|  | <b>10a</b> Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D   | <b>10a</b> 1,860,219.    |            |                    |            |
|  | <b>b</b> Less accumulated depreciation . . . . .   | <b>10b</b> 532,106.      | 1,371,254. | <b>10c</b>         | 1,328,113. |
|  | <b>11</b> Investments - publicly traded securities . . . . .   |                          | <b>11</b>  |                    |            |
|  | <b>12</b> Investments - other securities See Part IV, line 11 . . . . .  |                          | <b>12</b>  |                    |            |
|  | <b>13</b> Investments - program-related See Part IV, line 11 . . . . .   |                          | <b>13</b>  |                    |            |
|  | <b>14</b> Intangible assets . . . . .  | 4,513.                   | <b>14</b>  | 21,497.            |            |
|  | <b>15</b> Other assets See Part IV, line 11 . . . . .  |                          | <b>15</b>  |                    |            |
| <b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . . | 3,059,024.   | <b>16</b>                | 3,098,223. |                    |            |
| <b>Liabilities</b>   | <b>17</b> Accounts payable and accrued expenses . . . . .  | 1,423.                   | <b>17</b>  | 1,948.             |            |
|  | <b>18</b> Grants payable . . . . .   |                          | <b>18</b>  |                    |            |
|  | <b>19</b> Deferred revenue . . . . .   | 144,821.                 | <b>19</b>  | 129,766.           |            |
|  | <b>20</b> Tax-exempt bond liabilities . . . . .  |                          | <b>20</b>  |                    |            |
|  | <b>21</b> Escrow or custodial account liability Complete Part IV of Schedule D . . . . .   |                          | <b>21</b>  |                    |            |
|  | <b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .  |                          | <b>22</b>  |                    |            |
|  | <b>23</b> Secured mortgages and notes payable to unrelated third parties <b>ATCH. 2</b> . . . . .  | 743,050.                 | <b>23</b>  | 725,385.           |            |
|  | <b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .   |                          | <b>24</b>  |                    |            |
|  | <b>25</b> Other liabilities Complete Part X of Schedule D . . . . .  | 3,560.                   | <b>25</b>  | 3,174.             |            |
|  | <b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .  | 892,854.                 | <b>26</b>  | 860,273.           |            |
| <b>Net Assets or Fund Balances</b>   | <b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>  |                          |            |                    |            |
|  | <b>27</b> Unrestricted net assets . . . . .  | 2,155,970.               | <b>27</b>  | 2,223,976.         |            |
|  | <b>28</b> Temporarily restricted net assets . . . . .  | 10,200.                  | <b>28</b>  | 13,974.            |            |
|  | <b>29</b> Permanently restricted net assets . . . . .  |                          | <b>29</b>  |                    |            |
|  | <b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>   |                          |            |                    |            |
|  | <b>30</b> Capital stock or trust principal, or current funds . . . . .   |                          | <b>30</b>  |                    |            |
|  | <b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .   |                          | <b>31</b>  |                    |            |
|  | <b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .   |                          | <b>32</b>  |                    |            |
| <b>33</b> <b>Total net assets or fund balances</b> . . . . .                         | 2,166,170.   | <b>33</b>                | 2,237,950. |                    |            |
| <b>34</b> <b>Total liabilities and net assets/fund balances</b> . . . . .            | 3,059,024.   | <b>34</b>                | 3,098,223. |                    |            |

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

|   |   |   |            |
|---|---|---|------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12)   | 1 | 1,347,690. |
| 2 | Total expenses (must equal Part IX, column (A), line 25)  | 2 | 1,275,910. |
| 3 | Revenue less expenses Subtract line 2 from line 1   | 3 | 71,780.    |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                     | 4 | 2,166,170. |
| 5 | Other changes in net assets or fund balances (explain in Schedule O)  | 5 |            |
| 6 | Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | 6 | 2,237,950. |

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII

|    |   | Yes | No |
|----|---|-----|----|
| 1  | Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____<br>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?   |     | X  |
| 2b | Were the organization's financial statements audited by an independent accountant?  | X   |    |
| 2c | 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 | X   |    |
| 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 separate basis, consolidated basis, or both:<br><input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?  |     | X  |
| 3b | 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  |     |    |

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

**Public Charity Status and Public Support**

OMB No 1545-0047

**2010**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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.

Name of the organization

THE NORA SCHOOL, INC.

Employer identification number

52-1036230

**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?
  - (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?

|          | Yes | No |
|----------|-----|----|
| 11g(i)   |     |    |
| 11g(ii)  |     |    |
| 11g(iii) |     |    |

- 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 |                         |
| (A)                                |          |   |  |    |   |    |  |    |                         |
| (B)                                |          |   |  |    |   |    |  |    |                         |
| (C)                                |          |   |  |    |   |    |  |    |                         |
| (D)                                |          |   |  |    |   |    |  |    |                         |
| (E)                                |          |   |  |    |   |    |  |    |                         |
| <b>Total</b>                       |          |   |  |    |   |    |  |    |                         |

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Schedule A (Form 990 or 990-EZ) 2010

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2006, (b) 2007, (c) 2008, (d) 2009, (e) 2010, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2006, (b) 2007, (c) 2008, (d) 2009, (e) 2010, (f) Total. Rows include: 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; 10 Other income Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc; 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

Table with 2 columns: Line number, Description. Rows include: 14 Public support percentage for 2010; 15 Public support percentage from 2009 Schedule A, Part II, line 14; 16a 33 1/3 % support test - 2010; b 33 1/3 % support test - 2009; 17a 10%-facts-and-circumstances test - 2010; b 10%-facts-and-circumstances test - 2009; 18 Private foundation.

**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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ▶  | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")  |          |          |          |          |          |           |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any 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, and 3 received from disqualified persons . . . . .  |          |          |          |          |          |           |
| 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 . . . . .           |          |          |          |          |          |           |
| c Add lines 7a and 7b . . . . .  |          |          |          |          |          |           |
| 8 Public support (Subtract line 7c from line 6) . . . . .  |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ▶   | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 9 Amounts from line 6 . . . . .   |          |          |          |          |          |           |
| 10 a 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 in 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 2010 (line 8, column (f) divided by line 13, column (f)) . . . . . | 15 | % |
| 16 Public support percentage from 2009 Schedule A, Part III, line 15 . . . . .                      | 16 | % |

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

|  |    |   |
|--|----|---|
| 17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)) . . . . . | 17 | % |
| 18 Investment income percentage from 2009 Schedule A, Part III, line 17 . . . . .                        | 18 | % |

19 a 33 1/3 % support tests - 2010. 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 - 2009. 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 ▶

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**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2010

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

THE NORA SCHOOL, INC.

Employer identification number

52-1036230

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.

Table with 3 columns: Line number, Description, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

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

Table with 3 columns: Line number, Description, Held at the End of the Tax Year. Includes questions 1-9 regarding 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

Table with 3 columns: Line number, Description, Amount. Includes questions 1a, 1b, 2, a, b regarding art and historical treasures.

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

Schedule D (Form 990) 2010

JSA 0E1268 1 000

**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? . . . . .  Yes  No

**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? . . . . .  Yes  No

b If "Yes," explain the arrangement in Part XI V and complete the following table

|   | Amount |
|---|--------|
| c Beginning balance . . . . .             | 1c     |
| d Additions during the year . . . . .     | 1d     |
| e Distributions during the year . . . . . | 1e     |
| f Ending balance . . . . .                | 1f     |

2a Did the organization include an amount on Form 990, Part X, line 21? . . . . .  Yes  No

b If "Yes," explain the arrangement in Part XI V.

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

|  | (a) Current year | (b) Pnor 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 . . . . .

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

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 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 . . . . .   |                                      | 330,229.                        |                              | 330,229.          |
| b Buildings . . . . .   |                                      | 1,230,734.                      | 291,260.                     | 939,474.          |
| c Leasehold improvements . . . . .  |                                      |                                 |                              |                   |
| d Equipment . . . . .   |                                      | 226,512.                        | 187,858.                     | 38,654.           |
| e Other . . . . .   |                                      | 50,956.                         | 31,200.                      | 19,756.           |
| <b>Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) . . . . .</b> |                                      |                                 |                              | <b>1,328,113.</b> |

**Part VII Investments - Other Securities.** See Form 990, Part X, line 12.

| (a) Description of security or category<br>(including name of security) | (b) Book value | (c) Method of valuation<br>Cost or end-of-year market value |
|---|----------------|---|
| (1) Financial derivatives   |                |   |
| (2) Closely-held equity interests                                       |                |   |
| (3) Other   |                |   |
| (A)   |                |   |
| (B)   |                |   |
| (C)   |                |   |
| (D)   |                |   |
| (E)   |                |   |
| (F)   |                |   |
| (G)   |                |   |
| (H)   |                |   |
| (I)   |                |   |
| 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.

| (a) Description of investment type                               | (b) Book value | (c) Method of valuation<br>Cost or end-of-year market value |
|--|----------------|---|
| (1)  |                |   |
| (2)  |                |   |
| (3)  |                |   |
| (4)  |                |   |
| (5)  |                |   |
| (6)  |                |   |
| (7)  |                |   |
| (8)  |                |   |
| (9)  |                |   |
| (10)   |                |   |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 13) |                |   |

**Part IX Other Assets.** See Form 990, Part X, line 15

| (a) Description  | (b) Book value |
|--|----------------|
| (1)  |                |
| (2)  |                |
| (3)  |                |
| (4)  |                |
| (5)  |                |
| (6)  |                |
| (7)  |                |
| (8)  |                |
| (9)  |                |
| (10)   |                |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 15) |                |

**Part X Other Liabilities.** See Form 990, Part X, line 25

| 1. (a) Description of liability                                  | (b) Amount |
|--|------------|
| (1) Federal income taxes   |            |
| (2) ACCRUED INTEREST   | 3,174.     |
| (3)  |            |
| (4)  |            |
| (5)  |            |
| (6)  |            |
| (7)  |            |
| (8)  |            |
| (9)  |            |
| (10)   |            |
| (11)   |            |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 25) | 3,174.     |

2. FIN 48 (ASC 740) 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 (ASC 740)

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

|    |   |    |            |
|----|---|----|------------|
| 1  | Total revenue (Form 990, Part VIII, column (A), line 12)                                | 1  | 1,347,690. |
| 2  | Total expenses (Form 990, Part IX, column (A), line 25)                                 | 2  | 1,275,910. |
| 3  | Excess or (deficit) for the year Subtract line 2 from line 1                            | 3  | 71,780.    |
| 4  | Net unrealized gains (losses) on investments  | 4  |            |
| 5  | Donated services and use of facilities  | 5  |            |
| 6  | Investment expenses   | 6  |            |
| 7  | Prior period adjustments  | 7  |            |
| 8  | Other (Describe in Part XIV.)   | 8  |            |
| 9  | Total adjustments (net) Add lines 4 through 8   | 9  |            |
| 10 | Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9 | 10 | 71,780.    |

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

|   |   |    |            |
|---|---|----|------------|
| 1 | Total revenue, gains, and other support per audited financial statements        | 1  | 1,347,690. |
| 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 |            |
| e | Add lines 2a through 2d   | 2e |            |
| 3 | Subtract line 2e from line 1  | 3  | 1,347,690. |
| 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 |            |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5  | 1,347,690. |

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

|   |  |    |            |
|---|--|----|------------|
| 1 | Total expenses and losses per audited financial statements                       | 1  | 1,275,910. |
| 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 |            |
| e | Add lines 2a through 2d  | 2e |            |
| 3 | Subtract line 2e from line 1   | 3  | 1,275,910. |
| 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 |            |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5  | 1,275,910. |

**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.

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

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

**Schools**

OMB No 1545-0047

**2010**

**Open to Public  
Inspection**

▶ 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.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
THE NORA SCHOOL, INC.

Employer identification number  
52-1036230

**Part I**

|  | 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 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 Part II. . . . . | X   |    |
| SEE SUPPLEMENTAL PAGE  |     |    |
| -----  |     |    |
| -----  |     |    |
| 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? . . . . .   | X   |    |
| If you answered "No" to any of the above, please explain. If you need more space, use Part II  |     |    |
| -----  |     |    |
| -----  |     |    |
| 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? . . . . .  |     | X  |
| If you answered "Yes" to any of the above, please explain. If you need more space, use Part II   |     |    |
| -----  |     |    |
| -----  |     |    |
| 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? . . . . .   |     | X  |
| If you answered "Yes" to either line 6a or line 6b, explain on Part II   |     |    |
| 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 Part II . . . . .  | X   |    |

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

Schedule E (Form 990 or 990-EZ) (2010)

JSA  
0E1273 1 000

**Part II** **Supplemental Information.** Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions).

PART I LINE 3

PUBLICATION OF POLICY IN THE WASHINGTON POST ALONG WITH INCLUSION OF  
BLACK STUDENT FUND STATEMENTS IN PUBLICITY PACKET SENT TO PROSPECTIVE  
STUDENT AND PARENTS.

Name of the organization

THE NORA SCHOOL, INC.

Employer identification number

52-1036230

COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.

3. PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST

A. AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST.

B. THE COMPLIANCE OFFICER WILL INVESTIGATE AND RESOLVE ALL REPORTED COMPLAINTS AND ALLEGATIONS. THE COMPLIANCE OFFICER SHALL INFORM THE HEAD, BOARD CHAIR AND FINANCE COMMITTEE ABOUT THE OUTCOME AND IF NEEDED, THE INVESTIGATION AND THE APPROPRIATE COURSE OF ACTION.

C. AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE SCHOOL CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST.

D. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE SCHOOL'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT.

GOVERNANCE

PART VI, SECTION B, QUESTION 15

EXECUTIVE COMPENSATION

THE HEAD OF SCHOOL IS EVALUATED BY THE BOARD OF DIRECTORS AND THE FACULTY

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

Department of the Treasury  
Internal Revenue Service

Name of the organization

THE NORA SCHOOL, INC.

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No 1545-0047

**2010**

**Open to Public  
Inspection**

Employer identification number

52-1036230

GOVERNANCE

PART VI SECTION B QUESTION 11

REZNICK GROUP WILL PRESENT THE FORM 990 TO THE BOARD AT THE NOVEMBER  
BOARD MEETING. THE BOARD WILL REVIEW AND ASK QUESTIONS ABOUT THE FORM  
990. THE BOARD WILL THEN APPORVE THE FORM 990.

GOVERNANCE

PART VI SECTION C QUESTION 19

THESE DOCUMENTS ARE AVAILABLE UPON REQUEST.

GOVERNANCE

PART VI, SECTION B, QUESTION 12

ARTICLE III: PROCEDURES

1. DUTY TO DISCLOSE

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN  
INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST  
AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE  
DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS  
OR OTHERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT.

2. DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS

AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND  
AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE  
GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A  
CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR

|   |  |
|---|--|
| Name of the organization<br>THE NORA SCHOOL, INC. | Employer identification number<br>52-1036230 |
|---|--|

EVERY THREE YEARS. THE HEAD OF SCHOOL IS THEN OFFERED A CONTRACT WITH A SALARY NEGOTIATED BETWEEN THE HEAD OF SCHOOL AND BOARD CHAIR, WHICH IS THEN REVIEWED AND APPROVED OR DISAPPROVED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS.

ATTACHMENT 1

FORM 990, PART VIII - INVESTMENT INCOME

| DESCRIPTION            | (A)<br>TOTAL<br>REVENUE | (B)<br>RELATED OR<br>EXEMPT REVENUE | (C)<br>UNRELATED<br>BUSINESS REV. | (D)<br>EXCLUDED<br>REVENUE |
|------------------------|-------------------------|-------------------------------------|-----------------------------------|----------------------------|
| INTEREST AND DIVIDENDS | 20,226.                 |                                     |                                   | 20,226.                    |
| TOTALS                 | <u>20,226.</u>          |                                     |                                   | <u>20,226.</u>             |

ATTACHMENT 2

FORM 990, PART X - SECURED MORTGAGES AND NOTES PAYABLE

LENDER: POTOMAC VALLEY BANK  
 ORIGINAL AMOUNT: 838,100.  
 DATE OF NOTE: 04/04/2003  
 MATURITY DATE: 04/04/2033  
 REPAYMENT TERMS: FIXED 5 YRS., VARIABLE REMAINING 25 YRS.  
 SECURITY PROVIDED: LAND AND BUILDING  
 PURPOSE OF LOAN: REFINANCE EXISTING BUILDING

|   |                 |
|---|-----------------|
| BEGINNING BALANCE DUE .....                       | 743,050.        |
| ENDING BALANCE DUE .....                          | <u>725,385.</u> |
| TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE | <u>743,050.</u> |
| TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE    | <u>725,385.</u> |

**Depreciation and Amortization  
(Including Information on Listed Property)**

Department of the Treasury  
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to your tax return.

Attachment  
Sequence No **67**

Name(s) shown on return

Identifying number

THE NORA SCHOOL, INC.

52-1036230

Business or activity to which this form relates

**GENERAL DEPRECIATION**

**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 instructions)  | 1                            |                  |
| 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                            |                  |
| 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                            |                  |
| 6  | (a) Description of property  | (b) Cost (business use only) | (c) Elected cost |
| 7  | Listed property Enter the amount from line 29  | 7                            |                  |
| 8  | Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7  | 8                            |                  |
| 9  | Tentative deduction Enter the smaller of line 5 or line 8  | 9                            |                  |
| 10 | Carryover of disallowed deduction from line 13 of your 2009 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 2011 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 | 56,613. |

**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 2010  | 17 |  |
| 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 2010 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              |                                      |  |                     |                |            |                            |
| c 7-year property              |                                      |  |                     |                |            |                            |
| d 10-year property             |                                      |  |                     |                |            |                            |
| e 15-year property             |                                      |  |                     |                |            |                            |
| 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 2010 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 |         |
| 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 | 56,513. |
| 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 |         |

Part V Listed Property (Include automobiles, certain other vehicles, 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 X No 24b If "Yes," is the evidence written? Yes X 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
27 Property used 50% or less in a qualified business use
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28
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)
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?
35 Was the vehicle used primarily by a more than 5% owner or related person?
36 Is another vehicle available for personal use?
(a) Vehicle 1 (b) Vehicle 2 (c) Vehicle 3 (d) Vehicle 4 (e) Vehicle 5 (f) Vehicle 6
Yes No Yes No Yes No Yes No Yes No Yes No

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?
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 2010 tax year (see instructions)
43 Amortization of costs that began before your 2010 tax year 43 1,546.
44 Total. Add amounts in column (f) See the instructions for where to report 44 1,546.