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Department of the Treasury Internal Revenue Service

A For the 2010 calendar year, or tax year beginning

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)

JUL 1,

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. 2010

and ending JUN 30,

OMB No 1545-0047

Open to Public Inspection

В	Check if applicab	C Name of organization		D Employer identifi	cation number
Г	Addre	DaVinci Academy of Arts & Science			
F	Name Chang			74-3	234914
F	Initial		Room/suite	E Telephone numbe	
F	Termi		Tioonibadic	· '	754-6 <u>577</u>
F	Amen	ded Co.		G Gross receipts \$	3,457,778.
F	Appli			H(a) Is this a group re	
	pend	F Name and address of principal officer.Cory Klabunde		for affiliates?	Yes X No
		same as C above		H(b) Are all affiliates in	
$\overline{}$	Tax-ex	empt status: X 501(c)(3) 501(c) ()	or 527	1	list. (see instructions)
		te: Davincicharterschool.org	J4 JE1	H(c) Group exemption	
		organization: X Corporation Trust Association Other	I Vaar		M State of legal domicile: MN
	art I	Summary	IL Icai	or formation. 2007 F	W State of legal doffficie. P114
_		Bnefly describe the organization's mission or most significant activities: To po	rovide	an educati	on to
Activities & Governance		students in grades K-8.	rovide	an educaci	OII CO
'n	2		and of more	there? See of its not be	nooto
Ve	3	Check this box if the organization discontinued its operations or dispositions of voting members of the governing body (Part VI, line 1a)			7
တိ	4	Number of independent voting members of the governing body (Part VI, line 1b)	1 7 Lan V	101	5
oğ yı	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	3	- 2012 · D	54
itie	6	Total number of volunteers (estimate if necessary)	FEB	8 8 2012 3	137
≨	72	Total unrelated business revenue from Part VIII, column (C), line 12	ŭ		0.
ĕ		Net unrelated business taxable income from Form 990-T, line 34	MA	JEN. UT 7a	0.
_	╅	THOSE CHARGE SCIENCES (EXCESS RECORDS HOTT OF THE SET), line SET		Prior Year	
4	8	Contributions and grants (Part VIII, line 1h)		2,479,667.	Current Year 459,569.
age a	9	Program service revenue (Part VIII, line 2g)		106,633.	2,992,717.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	333.	1,762.
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	0.	2,262.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	2,586,633.	3,456,310.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,300,033.	3,430,310.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	-	0.	0.
s	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	—	984,000.	1,584,404.
3Se	16a	Professional fundraising fees (Part IX, column (A), line 11e)	—	904,000.	1,384,404.
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25)	0.		77. 4
ŭ	17	Other expenses (Part IX, column (A), lines 11a.11d, 11f.24f)	- · ⊢	1,092,507.	1,484,264.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	2,076,507.	3,068,668.
	19	Revenue less expenses. Subtract line 18 from line 12		510,126.	387,642.
56	3	Trevende 1999 expenses. Cabitact line 10 from line 12	Pa		_ ·
Net Assets	20	Total assets (Part X, line 16)	De	ginning of Current Year 1,034,767.	End of Year 1,454,198.
Ags BSS	21	Total liabilities (Part X, line 26)	<u> </u>	205,862.	237,651.
E S	22	Net assets or fund balances. Subtract line 21 from line 20	-	828,905.	1,216,547.
P	art II	Signature Block	<u> </u>	020,303.	1,210,341.
_		alties of perjury, I declare that I have examined this return, including accompanying schedules	e and statem	ents and to the best of m	v knowledge and helief it is
		ct, and complete. Declaration of prepager (other than officer) is based on all information of wh			y knowiedge and benef, it is
	.,	N	non proparci	2/1//	
Sig	nn	Signature of officer		Date	
He		Cory Klabunde, Director of Education			
•••		Type or print name and title	_		-
_		Print/Type preparer's name Preparer's signature	770	Date Check	PTIN
Pai	id	Thomas A. Karnowski		2/13/12 self-employ	
	parer	Firm's name Malloy Montague Karnowski Radose		Firm's EIN	
	e Only	Firm's address 5353 Wayzata Blvd., Ste. 410	CATCII	THIII 2 CHA	
	,	Minneapolis, MN 55416		Phone no. (952) 545-0424
Ma	v the I	RS discuss this return with the preparer shown above? (see instructions)		Tradicato. (X Yes No
	001 02-		nns		Form 990 (2010)
-02	· ve-		/III.		1 01111 000 (2010)

		i Academy of Arts & Science	74-3234914 Page 2
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 mi		
		on, incorporating a focus of art	ts and science, to
	students in grades		
	scudencs in grades	N U.	
2	Did the organization undertake any s	gnificant program services during the year which were not liste	ed on
	the pnor Form 990 or 990-EZ?		Yes X No
	If "Yes," describe these new services	on Schedule O.	
		g, or make significant changes in how it conducts, any prograr	m services? Yes X No
	If "Yes," describe these changes on		
		ements for each of the organization's three largest program ser	
		zations and section 4947(a)(1) trusts are required to report the	amount of grants and
	allocations to others, the total expen	ses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expense	s \$ _ 2 , 774 , 527 • including grants of \$)(Revenue \$ <u>2,992,717.</u>)
	To provide an educ	ation, incorporating a focus of	arts and science, to
		K-8. During the fiscal year en	
		Arts and Science served approxi	
	Davinci Academy OI	THE B AND DETENCE SELVED APPLOX.	Imacery 3/2 scudencs.
			
	· · · · · · · · · · · · · · · · · · ·		
			
4b	(Code:) (Expense	s \$ including grants of \$) (Revenue \$)
	_	•	
		-	
4c	(Code:) (Expense	s \$ including grants of \$) (Revenue \$
•-			
	Other program services. (Describe in	Schedule O.)	
4d			
4d	(Expenses \$	including grants of \$) (Revenue \$)
4d 4e	, -)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			ļ
	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	ļ	X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			l
	If "Yes," complete Schedule D, Part V	10	-	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	-		1
	as applicable.	ľ		}
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			l
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			v
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44-		x
	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	11c		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	444		х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		Α_
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			-
	Schedule D, Parts XI, XII, and XIII	12a	х	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	x	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		ļ	
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	L	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	1	1	١
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	ļ	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			ŀ
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	ł		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		İ	
	complete Schedule G, Part III	19	<u> </u>	X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	<u> </u>	X
Ь	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			{
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		L

Form **990** (2010)

Part IV	Checklist	of Required	Schedules (continued)
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			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		. :	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23_	-	_X_
24a		'		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a	-	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			ļ
_	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	ļ		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a_	_	X
р	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	1	}	
	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	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			v
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		i	
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	07		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		<u> </u>
20	instructions for applicable filing thresholds, conditions, and exceptions):	l		l
а		28a		x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		<u> </u>	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	_33	<u> </u>	<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	<u> </u>	X
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	<u> </u>	X
а	,,,,,			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes X 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	_36		X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	х	
_	Note. All Form 990 filers are required to complete Schedule O	38 Form		L (2010)
		COUL	550	(ZU 1U)

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
·	(gambling) winnings to prize winners?	1c	x	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		-	
Lu	filed for the calendar year ending with or within the year covered by this return	I		
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		é	. * .
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	` {	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
h	If "Yes," enter the name of the foreign country:		-	
-	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	- 1		٠,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	-	
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			***
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		_	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h_		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		-	4.
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			٠, ٠,
а	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter.			,
а	Initiation fees and capital contributions included on Part VIII, line 12		,	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			٠.
b	Gross income from other sources (Do not net amounts due or paid to other sources against			-
	amounts due or received from them.)	-	,	-
12a		12a		<u> </u>
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			[
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	·	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the	!		1
	organization is licensed to issue qualified health plans Enter the amount of reserves on head			
C 14-		44-		Х
14a		14a	<u> </u>	^
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		L

Form **990** (2010)

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			\mathbf{X}
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7	-	-	
b	Enter the number of voting members included in line 1a, above, who are independent 1b 5		,,	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other]	١,	_
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision		ĺ	
	of officers, directors or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	x	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	,	,^,	
	by the following:		l	
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	i
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	9		х
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Х
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?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	_14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	٠,	٠,	-12
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?]	
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)]
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	-7_	-	_
	taxable entity during the year?	16a		Х
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?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►MN			
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. X 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, ai	nd fina	ncial	
	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 organiza	tion:		
	Cory Klabunde - 7637546577			
	13001 Central Ave Northeast, Blaine, MN 55434			
		Form	990	20101

032006 12-21-10

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		orga	ınıza			nper	<u>ısa</u>			
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	١		Pos				Reportable	Reportable	Estimated
	hours per	(cl	neck	allt	hat	арр	ly)	compensation	compensation	amount of
	week (describe	cto						from the	from related organizations	other compensation
	hours for) H				pg .	ļ	organization	(W-2/1099-MISC)	from the
	related	stee	unste			pensa		(W-2/1099-MISC)	(11 22 1000 111100)	organization
	organizations	nal tru	le uo		ploye	E CO		, , , , , ,		and related
	ın Schedule	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Ē			organizations
	<u>O)</u>	=	=	°	Ž.	Ī.				
Therese Sheehan		l			İ				_	_
Board President	10.00	X	<u> </u>	X	<u> </u>		<u> </u>	0.	0.	0.
David Cauley					i		1		_	
Board Vice President	40.00	X	_	Х	<u> </u>	<u> </u>	<u> </u>	34,170.	0.	5,447.
Douglass Hiatt							1			
Board Treasurer	10.00	X		Х	<u> </u>	ļ		0.	0.	0.
Stephanie Severson	10.00									
Board Secretary	40.00	X	<u> </u>	Х	<u> </u>		_	0.	0.	0.
Douglass Dinndorf	10.00		ļ		l					
Board Member	10.00	X		<u> </u>	<u> </u>	-	_	0.	0.	0.
Holly Fischer	40.00				l					
Board Member	40.00	X			<u> </u>	 		34,954.	0.	5,469.
Dale Lieb	10.00								1	
Board Member	10.00	X	-			-	├	0.	0.	0.
Cory Klabunde	40.00							20 500		16 650
School Director	40.00	-	-	X	 -	├-	-	89,588.	0.	16,652.
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Form 990 (2010)

Form **990** (2010)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization

3456310.

2010.05050 DaVinci Academy of Arts & S 6917___1

12

e Total. Add lines 11a-11d

Total revenue. See instructions

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

, -	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	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				
	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				1 4
5	Compensation of current officers, directors,	_			
	trustees, and key employees	162,438.	73,525.	88,913.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,114,775.	1,062,031.	52,744.	
	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	73,831.	65,636.	8,195.	
9	Other employee benefits	136,726.	119,498.	17,228.	
10	Payroll taxes	96,634.	85,798.	10,836.	
11	Fees for services (non-employees).				
а	Management	1,194.		1,194.	
b	Legal	11,974.		11,974.	
C	Accounting	28,113.		28,113.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		, ,	-	
f	Investment management fees				
g	Other	290,487.	263,847.	<u> 26,640.</u>	
12	Advertising and promotion				
13	Office expenses .	190,776.	182,444.	8,332.	
14	Information technology	57,343.	55,493.	1,850.	
15	Royalties				
16	Occupancy	684,022.	675,198.	8,824.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1,462.	1,462.		
19	Conferences, conventions, and meetings	2,941.	2,906.	35.	<u> </u>
20	Interest				
21	Payments to affiliates	12,456.	738.	11,718.	
22	Depreciation, depletion, and amortization	28,400.	27,772.	628.	
23	Insurance	16,917.		16,917.	
24	Other expenses. Itemize expenses not covered			4	
	above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A)	- ^ -		, , , , , , , , , , , , , , , , , , ,	1. 1. (2 4. 8)
	amount, list line 24f expenses on Schedule O.)				
а	Transportation	139,422.	139,422.		
b	Food	18,757.	18,757.		
C		0.		0.	
d					<u> </u>
е					<u> </u>
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	3,068,668.	2,774,527.	294,141.	0.
26	Joint costs. Check here ▶ ☐ 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				

		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		1	327,307.
'2	Savings and temporary cash investments	145,035.	2	341,301
3	Pledges and grants receivable, net	714,741.		
I	Accounts receivable, net		_3_	949,384
4	· · · · · · · · · · · · · · · · · · ·	3,638.	4	949,384
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)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary		ق ئاد	
.	employees' beneficiary organizations (see instructions)		6	
7 8	Notes and loans receivable, net		7	
8 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	49,542.	9	56,740
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D . 10a 185,156.	المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع		the same of the same of
b	Less: accumulated depreciation 10b 64,389.	121,811.	10c	120,767
11	Investments - publicly traded securities		11	
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	-	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,034,767.	16	1,454,198
17	Accounts payable and accrued expenses	126,645.	17	231,346
18	Grants payable		18	
19	Deferred revenue	79,217.	19	6,305
20	Tax-exempt bond liabilities	· · · · · · · · · · · · · · · · · · ·	20	7,505
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22	Payables to current and former officers, directors, trustees, key employees,			
·	highest compensated employees, and disqualified persons. Complete Part II	- ' 1		
i	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		25	
26	Total liabilities. Add lines 17 through 25	205,862.	26	237,651
	Organizations that follow SFAS 117, check here and complete	203,002.	20	231,031
	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	•	. ,	-
28	Temporanly restricted net assets		27	
29			28	
25	Permanently restricted net assets	4	29	
27 28 29 30 31 32	Organizations that do not follow SFAS 117, check here			
	complete lines 30 through 34.		weth.	المنافعة المحافظة المساوات
30	Capital stock or trust principal, or current funds	707,094.	30	1,095,780
31	Paid-in or capital surplus, or land, building, or equipment fund	121,811.	31	120,767
32	Retained earnings, endowment, accumulated income, or other funds	0.	32	0
33	Total net assets or fund balances	828,905.	33	1,216,547

1,454,198. Form **990** (2010)

34 Total liabilities and net assets/fund balances

Form 990 (2010)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

ZU IU

Inspection

Name of the organization

Employer identification number

	J. g	DaVinci	Academy of	Arts	& Sci	ence		-	7.	4-3234914
Part I	Reason	for Public Char	rity Status (All organiz	zations mu	st comple	te this par	t.) See ins	tructions.		
The orga	anization is not	a private foundation	because it is (For lines	1 through	11, check	only one b	oox)	•		-
1 📙		nvention of churche	s, or association of chur	ches desc	nbed in se	ection 170	(b)(1)(A)(i)).		
2 <u>X</u>	A school des	scribed in section 1	70(b)(1)(A)(ii). (Attach Sc	hedule E.)						
3 📙	¬ ·		ıtal service organization i							
4 L	A medical re	search organization	operated in conjunction	with a hos	pıtal desc	rıbed in se	ection 170	(b)(1)(A)(i	ii). Enter t	he hospital's name,
_	city, and sta									
5 ∟			benefit of a college or u	niversity ov	wned or op	perated by	a governi	mental un	t describ	ed in
	7	(b)(1)(A)(iv). (Compl	•							
6 <u> </u>	¬		nent or governmental uni							
7			ceives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general _l	public described in
	7	(b)(1)(A)(vi). (Comple	-	(0 1-1-	D- + U)					
9 -	7		section 170(b)(1)(A)(vi).							-
5			ceives: (1) more than 33 notions - subject to certa							
			axable income (less sec							
	_	509(a)(2), (Complet		tion of tha	x, 110111 00	1311103363	acquired b	y ino orga	inzation	atter durie 30, 1973
10 🗀	7		perated exclusively to te	st for publ	c safety. S	See sectio	on 509(a)(4	1)_		
11 🗀			perated exclusively for th						v out the	purposes of one or
			ations described in secti							
			organization and compl							
_	_ a	l b	_] Type II	с 🗀 Тур	e III - Func	tionally in	tegrated		d 🗀	Type III - Other
e 🗀			at the organization is not							
	foundation n	nanagers and other	than one or more publicly	y supporte	d organiza	ations des	cnbed in s	ection 50	9(a)(1) or	section 509(a)(2).
f	If the organiz	ation received a wri	tten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III		
	· · · · · -	rganization, check t						•		. \square
g			organization accepted ar							
			directly controls, either al	one or tog	ether with	persons o	described	in (ii) and ((iii) below,	
			upported organization?	•			•			11g(i)
			n described in (i) above? a person described in (i) (• ••	•	11g(ii)
h			a person described in (i) on about the supported or						-	11g(iii)
"	1 TOVIDE LITE	Onowing information	about the supported of	ganization	(S)					
/i) Nor	no of ournorted	/::> C(A)	(iii) Type of	riv) Is the o	roanization	(v) Did vo	u notify the	(vi) Is	the	
• •	ne of supported rganization	(ii) EIN	organization		sted in your		tion in col.	Loroanizati	on in col. I	(vii) Amount of
	gameanon		(described on lines 1-9 above or IRC section	governing	document?		r support?	(i) organiz U.S	.?	support
			(see instructions))	Yes	No	Yes	No	Yes	No	
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Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2010

II Support Schedule for	Organizations	Described in	Sections 170	(b)(1)(A)(iv) and	d 170(b)(1)(A)(vi)	Page 2
(Complete only if you checked	d the box on line 5	5, 7, or 8 of Part I o	r if the organization			
	listed below, plea	se complete Part	III.)			
on A. Public Support		<u>,</u>				
r year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
fts, grants, contributions, and						
embership fees received. (Do not				}		
clude any "unusual grants.")						<u> </u>
x revenues levied for the organ-						
• 1						
expended on its behalf						
e value of services or facilities						
· · ·						
tal. Add lines 1 through 3						
e portion of total contributions		· · · · · · · · · · · · · · · · · · ·			- : "	
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blic support. Subtract line 5 from line 4	元·4篇,11年1日的	Fire Consider to	· · · · · · · · · · · · · · · · · · ·	F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A STATE OF THE STA	
					 	
r year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
r year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
r year (or fiscal year beginning in) nounts from line 4 oss income from interest,	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
r year (or fiscal year beginning in) nounts from line 4 oss income from interest, ridends, payments received on	(a) 2006	(ь) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
r year (or fiscal year beginning in) nounts from line 4 oss income from interest, ridends, payments received on curities loans, rents, royalties	(a) 2006	(ь) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
r year (or fiscal year beginning in) nounts from line 4 oss income from interest, ridends, payments received on curties loans, rents, royalties d income from similar sources	(a) 2006	(ь) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
r year (or fiscal year beginning in) nounts from line 4 oss income from interest, andends, payments received on currities loans, rents, royalties d income from similar sources of income from unrelated business	(a) 2006	(ь) 2007	(e) 2008	(d) 2009	(e) 2010	(f) Total
r year (or fiscal year beginning in) nounts from line 4 coss income from interest, ridends, payments received on curties loans, rents, royalties d income from similar sources at income from unrelated business tivities, whether or not the	(a) 2006	(ь) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
ryear (or fiscal year beginning in) nounts from line 4 oss income from interest, ridends, payments received on curties loans, rents, royalties d income from similar sources of income from unrelated business tivities, whether or not the siness is regularly carried on	(a) 2006	(ь) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
r year (or fiscal year beginning in) nounts from line 4 oss income from interest, ridends, payments received on curties loans, rents, royalties d income from similar sources of income from unrelated business trivities, whether or not the siness is regularly carried on the income. Do not include gain	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
r year (or fiscal year beginning in) nounts from line 4 coss income from interest, ridends, payments received on curties loans, rents, royalties d income from similar sources of income from unrelated business trivities, whether or not the siness is regularly carried on the income. Do not include gain loss from the sale of capital	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
r year (or fiscal year beginning in) nounts from line 4 oss income from interest, ridends, payments received on curities loans, rents, royalties d income from similar sources of income from unrelated business tivities, whether or not the siness is regularly carried on the income. Do not include gain loss from the sale of capital sets (Explain in Part IV.)			(c) 2008	(d) 2009	(e) 2010	(f) Total
r year (or fiscal year beginning in) nounts from line 4 oss income from interest, yidends, payments received on curities loans, rents, royalties d income from similar sources of income from unrelated business tivities, whether or not the siness is regularly carried on their income. Do not include gain loss from the sale of capital sets (Explain in Part IV.)	7. [. (The state of the s	(c) 2008	(d) 2009		(f) Total
ryear (or fiscal year beginning in) nounts from line 4 oss income from interest, ridends, payments received on curties loans, rents, royalties d income from similar sources of income from unrelated business trivities, whether or not the siness is regularly carried on their income. Do not include gain loss from the sale of capital sets (Explain in Part IV.)	etc. (see instructi	ons)			12	(f) Total
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ryear (or fiscal year beginning in) nounts from line 4 oss income from interest, ridends, payments received on curties loans, rents, royalties d income from similar sources of income from unrelated business trivities, whether or not the siness is regularly carried on their income. Do not include gain loss from the sale of capital sets (Explain in Part IV.) tal support. Add lines 7 through 10 oss receipts from related activities, ret five years. If the Form 990 is forganization, check this box and stop	etc. (see instruction the organization's here	ons) s first, second, thir	d, fourth, or fifth ta		12 n 501(c)(3)	>
ryear (or fiscal year beginning in) nounts from line 4 oss income from interest, yidends, payments received on curties loans, rents, royalties of income from similar sources of income from unrelated business trivities, whether or not the siness is regularly carried on their income. Do not include gain loss from the sale of capital sets (Explain in Part IV.) tall support. Add lines 7 through 10 oss receipts from related activities, at five years. If the Form 990 is for ganization, check this box and stop on C. Computation of Public	etc. (see instruction the organization's here c Support Peine 6, column (f) d	ons) s first, second, thir rcentage rvided by line 11, o	d, fourth, or fifth ta		12 n 501(c)(3)	▶
ryear (or fiscal year beginning in) nounts from line 4 coss income from interest, yidends, payments received on curties loans, rents, royalties d income from similar sources at income from unrelated business trivities, whether or not the siness is regularly carned on their income. Do not include gain loss from the sale of capital sets (Explain in Part IV.) Ital support. Add lines 7 through 10 coss receipts from related activities, set five years. If the Form 990 is for ganization, check this box and stop on C. Computation of Public support percentage from 2009	etc. (see instruction the organization's here column (f) dischedule A, Part	ons) s first, second, thir rcentage rvided by line 11, o	d, fourth, or fifth to	ax year as a section	12 n 501(c)(3)	9
ryear (or fiscal year beginning in) nounts from line 4 coss income from interest, yidends, payments received on curties loans, rents, royalties d income from similar sources at income from unrelated business trivities, whether or not the siness is regularly carned on their income. Do not include gain loss from the sale of capital sets (Explain in Part IV.) Ital support. Add lines 7 through 10 coss receipts from related activities, set five years. If the Form 990 is for ganization, check this box and stop on C. Computation of Public support percentage for 2010 (lines income set in the sale of capital sets five years.)	etc. (see instruction the organization's interesting the following of the following of the following	ons) s first, second, thir rcentage wided by line 11, c II, line 14	d, fourth, or fifth ta	ax year as a section	12 n 501(c)(3)	9
ryear (or fiscal year beginning in) nounts from line 4 coss income from interest, ridends, payments received on curties loans, rents, royalties d income from similar sources at income from unrelated business at income. Do not include gain loss from the sale of capital sets (Explain in Part IV.) Ital support. Add lines 7 through 10 coss receipts from related activities, ast five years. If the Form 990 is for ganization, check this box and stop on C. Computation of Public support percentage for 2010 (liblic support percentage from 2009 1/3% support test - 2010. If the or	etc. (see instruction the organization's here in a column (f) dischedule A, Partical Translation did not as a publicly suppreganization did not reganization	ons) s first, second, thus rcentage livided by line 11, of II, line 14 t check the box or lorted organization t check a box on li	d, fourth, or fifth ta	ax year as a section	12 n 501(c)(3) 14 15 ore, check this box a	9 9 and
	(Complete only if you checked fails to qualify under the tests on A. Public Support If year (or fiscal year beginning in) the fails, grants, contributions, and embership fees received. (Do not clude any "unusual grants.") If x revenues levied for the organition's benefit and either paid to expended on its behalf the value of services or facilities mished by a governmental unit to expended on the organization without charge that. Add lines 1 through 3 the portion of total contributions each person (other than a evernmental unit or publicly proported organization) included line 1 that exceeds 2% of the fount shown on line 11, furnin (f)	(Complete only if you checked the box on line 5 fails to qualify under the tests listed below, please on A. Public Support In year (or fiscal year beginning in) (a) 2006 Its, grants, contributions, and embership fees received. (Do not clude any "unusual grants.") In x revenues levied for the organition's benefit and either paid to expended on its behalf the value of services or facilities mished by a governmental unit to be organization without charge that. Add lines 1 through 3 the portion of total contributions each person (other than a evernmental unit or publicly proported organization) included line 1 that exceeds 2% of the fount shown on line 11, furnin (f) (a) 2006	Support Schedule for Organizations Described in (Complete only if you checked the box on line 5, 7, or 8 of Part I or fails to qualify under the tests listed below, please complete Part on A. Public Support If year (or fiscal year beginning in) (a) 2006 (b) 2007 Its, grants, contributions, and embership fees received. (Do not clude any "unusual grants.") If x revenues levied for the organition's benefit and either paid to expended on its behalf evalue of services or facilities mished by a governmental unit to organization without charge tal. Add lines 1 through 3 eportion of total contributions each person (other than a vernmental unit or publicly proported organization) included line 1 that exceeds 2% of the fount shown on line 11, furnin (f)	Support Schedule for Organizations Described in Sections 170 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization fails to qualify under the tests listed below, please complete Part III.) On A. Public Support Tryear (or fiscal year beginning in) (a) 2006 (b) 2007 (c) 2008 Its, grants, contributions, and sembership fees received. (Do not clude any "unusual grants.") In x revenues levied for the organition's benefit and either paid to expended on its behalf The value of services or facilities mished by a governmental unit to be organization without charge tall. Add lines 1 through 3 The portion of total contributions each person (other than a vernmental unit or publicly provided organization) included line 1 that exceeds 2% of the mount shown on line 11, flumn (f) The little but the form line 4 in the second line 5 from line 4 in the line 5 from line 4 in the line 5 from line 4 in the little second line 5 from line 6 in the little second line 5 from line 6 in the little second line 5 from line 6 in the little second line 5 from line 6 in the little second line 5 from line 6 in the line 5 from line 6 in the	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify it fails to qualify under the tests listed below, please complete Part III.) On A. Public Support Tyear (or fiscal year beginning in) (a) 2006 (b) 2007 (c) 2008 (d) 2009 Its, grants, contributions, and embership fees received. (Do not clude any "unusual grants.") X revenues levied for the organition's benefit and either paid to expended on its behalf e value of services or facilities mished by a governmental unit to organization without charge tail. Add lines 1 through 3 e portion of total contributions each person (other than a evernmental unit or publicly provided organization) included line 1 that exceeds 2% of the fount shown on line 11, furmin (f) blic support. Subtract line 5 from line 4	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. III. III. III. III. III. III. II

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

Schedule A (Form 990 or 990-EZ) 2010

17a 10% -facts-and-circumstances test - 2010. 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

b 10% -facts-and-circumstances test - 2009. 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

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2010 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.)

_	quality diffuoi the tests listed by	Siow, picaso com	piete i art ii j					
Sec	ction A. Public Support		·	γ		1		
Cale	ndar 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	İ	1	-				
	ınclude any "unusual grants.")							
2	Gross receipts from admissions,							
	merchandise sold or services per-	l		1	}			
	formed, or facilities furnished in	1						
	any activity that is related to the organization's tax-exempt purpose	į						
2	Gross receipts from activities that			† · · · · · · · · · · · · · · · · · · ·		1		
3	are not an unrelated trade or bus-	İ						
	-		Ì	1	ľ			
	iness under section 513			 		 		
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to				1	1		
	or expended on its behalf			<u> </u>		↓		
5	The value of services or facilities			1				
	furnished by a governmental unit to				1			
	the organization without charge							
6	Total. Add lines 1 through 5							
7 a	Amounts included on lines 1, 2, and							
	3 received from disqualified persons				-			
t	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					1		
	Add lines 7a and 7b		 		 	+	<u></u> .	
	• •				-	-		
	Public support (Subtract line 7c from line 6) ction B. Total Support	A		1, 1, 2, 2, 2, 2, 3, 1, 3	a substitute of	⊥`	_	<u> </u>
			# 1 000 0	T	T			
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	-	(e) 2010	(f) Total
_	Amounts from line 6				 			
10a	Gross income from interest, dividends, payments received on							
	securities loans, rents, royalties			1	}			
	and income from similar sources							
t	Unrelated business taxable income							
	(less section 511 taxes) from businesses					1		
	acquired after June 30, 1975	1						
	Add lines 10a and 10b							
	Net income from unrelated business		<u> </u>	-		\dagger		
	activities not included in line 10b,							
	whether or not the business is							
10	regularly carned on Other income. Do not include gain			 		+		
12	or loss from the sale of capital					1		
	assets (Explain in Part IV.)	 	 	<u> </u>	 	+		
	Total support (Add lines 9, 10c, 11, and 12)		1	L	.1	1		l
14	First five years. If the Form 990 is for	r the organization'	's first, second, thi	rd, fourth, or fifth t	tax year as a secti	on 501	(c)(3) organiz	zation,
_	check this box and stop here	 	·					▶∟_
<u>Se</u>	ction C. Computation of Publ	ic Support Pe	ercentage	 				
15	Public support percentage for 2010 (line 8, column (f) c	divided by line 13,	column (f))		15		%
16	Public support percentage from 2009	Schedule A, Par	t III, line 15	<u> </u>	<u></u>	16		%
Se	ction D. Computation of Inve	stment Incom	ne Percentage)				
17	Investment income percentage for 20)10 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17		%
	Investment income percentage from					18		%
	a 33 1/3% support tests - 2010. If the		•	on line 14, and lin	 ne 15 is more than		%, and line 1	
	more than 33 1/3%, check this box a	•		•			,	▶□
	b 33 1/3% support tests - 2009. If the	•	•		• • •		an 22 1/20/	► 🗀
•		_					-	
~~	line 18 is not more than 33 1/3%, che		• -	•			-	
	Private foundation. If the organization	in did not check a	DOX ON line 14, 19	a, or 19b, check				P
0320	23 12-21-10				So	hedul	e A (Form 99	10 or 990-EZ) 201

SCHEDULE D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

74-3234914 DaVinci Academy of Arts & Science Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year 1 2 Aggregate contributions to (dunng year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 5 are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Partill Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? 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 Partillia 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 (ASC 958), 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 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2010

	dule D (Form 990) 2010 DaVinci t III Organizations Maintaining C	Academy o						323491 sets (cont		
3	Using the organization's acquisition, accessi									
3	(check all that apply):	on, and other record	is, check	arry Or ti	ie ionownig tria	Laicas	grillicant use of	its collectio	ii iteiii	5
_	Public exhibition			00D 01 0	xchange progra	me				
a		-			xchange progra					
b	Scholarly research	е		лпет						
C	Preservation for future generations	-H	- la a 4la .		- Al	!		Dod VIV		
4	Provide a description of the organization's co	•		•	_			Part XIV.		
5	During the year, did the organization solicit o					er sımılal	assets	<u></u>		1
·Do	to be sold to raise funds rather than to be ma							Yes_		No
Par	t IV Escrow and Custodial Arran		ete if the	organıza	tion answered	"Yes" to	Form 990, Part	IV, line 9, or	•	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for c	ontributi	ons or other as	sets not	ıncluded		_	,
	on Form 990, Part X?							Yes	L.	No
þ	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing ta	able:			_ 			
								Amoun	t	
C	Beginning balance .						1c			
ď	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21?					Yes		No
b	If "Yes," explain the arrangement in Part XIV	·								
Pai	t V Endowment Funds. Complete	f the organization ar	swered "	Yes" to	Form 990, Part	IV, line 1	0.			
		(a) Current year	(b) Pr	or year	(c) Two year	rs back	(d) Three years ba	ack (e) Fou	r years	back
1a	Beginning of year balance]							
b	Contributions							,		
C	Net investment earnings, gains, and losses		<u> </u>		1			-		
d	Grants or scholarships								-	
e	Other expenditures for facilities									
•	and programs									
f	Administrative expenses		·							
g	End of year balance		 					- 		<u></u>
2	Provide the estimated percentage of the year	r and halance hold r								
	-	i end balance nelo a								
a	Board designated or quasi-endowment Permanent endowment	%	%							
0	· · · · · · · · · · · · · · · · · · ·	% %								
0-			_4 41			14				
3a	Are there endowment funds not in the posse	ession of the organiz	ation that	are nei	and administe	erea for t	ne organization			- -
	by:							<u> </u>	Yes	No
	(i) unrelated organizations				••			3a(i)	<u> </u>	
	(ii) related organizations					•		. 3a(ii)		
_	If "Yes" to 3a(ii), are the related organization:	-					- •	_3b		
4	Describe in Part XIV the intended uses of the									
Pa	rt VI Land, Buildings, and Equipn									
	Description of investment	(a) Cost or o basis (investi			ost or other is (other)		ccumulated preciation	(d) Boo	k valu	e
1a	Land						;			
b	Buildings									
С	Leasehold improvements									
d	Equipment			1	85,156.		64,389.	12	0,7	67.
е	Other				-					
Tota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colum	n (B), lin	e 10(c).)			12	0,7	67.

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010

	dule D (Form 990) 2010 DaVinci Academy of Arts & S	cience			234914	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Fina	ncial State	ements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		3,456	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		3,068	668.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3			642.
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			0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		10		387	642.
Par	t XII. Reconciliation of Revenue per Audited Financial Statemer	nts With Reve	enue per F	Return		
1	Total revenue, gains, and other support per audited financial statements			1	3,456	310.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a		The Mark		
b	Donated services and use of facilities	2b		1 de 1		
C	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV.)	2d				
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	3,456	310.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1 1		
b	Other (Describe in Part XIV.)	4b				
c	Add lines 4a and 4b			4c		0.
5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	3,456	310.
Pài	TXIII Reconciliation of Expenses per Audited Financial Stateme	ents With Exp	enses per	Retur		
1	Total expenses and losses per audited financial statements			1	3,068	<u>,668.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			1,500		
а	Donated services and use of facilities	2a		\$		
b	Prior year adjustments	2b] 1 -		
C	Other losses	2c				
d	Other (Describe in Part XIV)	2d		」 │		
е	Add lines 2a through 2d			2e		<u> </u>
3	Subtract line 2e from line 1			3	3,068	,668.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			- ' '		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a] - ; -		
b	Other (Describe in Part XIV.)	4b				
	Add lines 4a and 4b			4c		0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	··	<u>.</u>	5	3,068	<u>,668.</u>
	TEXIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,					4; Part
	e 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also compl					
<u>Pa</u>	ct X, Line 2: The Academy is exempt from fe	<u>ederal an</u>	<u>d state</u>	e inc	ome	
	rog under Internal Berranus Gode E01/a)/2) a		16-3 A			
Laz	kes under Internal Revenue Code 501(c)(3) a	ind is su	<u>Dject</u>	LO La	IX OII	
ine	come from any unrelated business.					
===						·
On	July 1, 2009, the Academy adopted the reco	gnition	require	ement	s for	
ung	certain income tax positions as required by	the Fin	ancia1	Acco	unting	
Sta	andards Board (FASB) ASC 740-10 (formerly k	nown as	FASB In	nterp	retatio	on
<u>No</u>	. 48, Accounting for Uncertainty in Income	Taxes),	with no		nulative ale D (Form 9	
03205	4			Joneal	(, 0, 111 s	JU, <u>LU</u> 10

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

Open to Public Inspection

Name of the organization

DaVinci Academy of Arts & Science

Employer identification number 74-3234914

Par	t1			
			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?	1_	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,		2 -	
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			
	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes		-	
	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	3	X	ļ
	Nondiscrimination policy is included in registration		ومتعسر عام	, 249.
	materials.		-	1
			ĺ	-
		- '	4 -	-
				,
4	Does the organization maintain the following?		أ ــــ ،	-
а		4a	X	ļ
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student		٠,,	
_	admissions, programs, and scholarships?	4c	X	-
a	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	-
	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			
а	Students' rights or privileges?			_v
-	Admissions policies?	5a 5b	 	X
c	Employment of faculty or administrative staff?	5c		X
ď	Scholarships or other financial assistance?	5d		X
e	Educational policies?	5e		X
-	·			X
f	Use of facilities?			
f a	Use of facilities? Athletic programs?	5f		1 X
f g h	Athletic programs?	5g		X
f g h	Athletic programs? Other extracurncular activities?			
f g h	Athletic programs?	5g		
f g h	Athletic programs? Other extracurncular activities?	5g		
f g h	Athletic programs? Other extracurncular activities?	5g		
f g h	Athletic programs? Other extracurncular activities?	5g		
	Athletic programs? Other extracurncular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5g 5h	X	
6a	Athletic programs? Other extracurncular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency?	5g 5h	X	X
6a	Athletic programs? Other extracurncular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	5g 5h	X	X
6a	Athletic programs? Other extracurncular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency?	5g 5h	X	X
6a b	Athletic programs? Other extracurncular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II.	5g 5h	X	Х

Sched	lule E	(Form	990	or 990-EZ)	(2010)	${ t DaVinc}$	i Aca	ademy	of	Arts	s &	<u>Science</u>	_	<u>74-323</u>	4914	Page 2
Part	<u>: II </u>	Sup	pler	nental	nform	ation. Co	molete th	his part to	Drovia	le the ex	nlanati	ons required b	v Part	l. lines 3, 4d, 5h, 6b	and 7.	
		as an	plica	ble. Also	complet	e this part to	provide	any othe	er addı	tional infe	ormatio	on	,	l, lines 3, 4d, 5h, 6b	,	
									-							
													_			
Sch	edu	le	Ε,	line	6 -	Expla	nati	on of	Go	verni	ment	Financ	ial	Aid:		
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SCHEDULE 0

(Form 990 or 990-EZ)

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.

2010
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

DaVinci Academy of Arts & Science

Employer identification number 74-3234914

Davinci Academy of files & selence 74 5254514
Form 990, Part VI, Section A, line 7a: Each parent of a child at the
school and each employee of the school has a vote for election of board
members
Form 990, Part VI, Section B, line 11: The form 990 is prepared by an
independent accounting firm. Once the form is completed it is given to
management and the board treasurer for review before it is signed and
filed.
Form 990, Part VI, Section B, Line 12c: Board members sign a conflict of
interest statement annually. The board also reviews the conflict of
interest policy annually and makes changes as necessary.
Form 990, Part VI, Section B, Line 15: Annually the board of determines
the salaries for the executive direct and the academic director positions.
Form 990, Part VI, Section C, Line 18: DaVinci Academy of Arts and Science
makes its governing documents, conflict of interest policy and financial
statements available to the public on their website and upon request.
Form 990, Part VI, Section C, Line 19: DaVinci Academy of Arts and Science
makes its form 990 available to the public upon request.
Form 990. Part XII, Line2C:
The Academy's Finance Committee assumes responsibility for oversight of
the audit of its financial statements. The Board selects an
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2010)

Page 2
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2010 DEPRECIATION AND AMORTIZATION REPORT

Page 10 Date		Ending Accumulated Depreciation		4,560.	209.	156.	337.	528.	1,043.	1,665.	507.	15,606.	643.	534.	6,483.	22,515.	1,190.	624.	931.	,
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2	orm 95	Asset	1	ਜ. `	72	m		, M	9	7	80		10	#		13	14		16	- !

(D) - Asset disposed

*ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2010 DEPRECIATION AND AMORTIZATION REPORT

	Ending Accumulated Depreciation	608. 1,040.	317.	128.	250.	187.	64, 389.	,		,
	Current Year Deduction	243.	317.	128.	100.	75.	28,400.			·
	Current Sec 179 Expense	, , , , , , , , , , , , , , , , , , ,			•			,	, _	
	Beginning Accumulated Depreciation	365.	Cold to the control of the cold to the col	155.	150.	35,989.	35,989.			
	Basis For Depreciation	1,216. 2,080.	3,171.	1,279.	2,000.	1,121.	185,156.	28	,	5: 5
	Reduction in Basis								A STATE OF THE STA	1
	Section 179 Expense				() () () () () () () () () ()				1"	
066	Bus % Excl	is is	7				-3). ·		-
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	Life	5.00		5.00	20.00	15.00	f. , , ,		· ·	,
	Method	he's	5	SI.	SL	SI	<u> </u>			
	Date Acquired	06/29/00 SL	08/31/10	03/25/11	03/31/09	08/02/08			,	1
Form 990 Page 10	Description	Laptop storage cart	Laptop computers	Si Li	2 Schwab Fire Proof File Cabinets Kiln		* Grand Total 990 Page 10 Depr			
orm 9	Asset No	18	20	23 23	2 2 2 2 5 5	26				,
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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

990

OMB No 1545-0172

Attachment Sequence No 67

► See separate instructions. Name(s) shown on return

Business or activity to which this form relates

Identifying number

	inci Academy of Ar			orm 990 Pa			74-3234914
<u>Par</u>	t Election To Expense Certain Prop	erty Under Section 17	9 Note: If you have an	y listed property, c	omplete Part		
1 M	aximum amount (see instructions)					1	500,000.
2 To	otal cost of section 179 property place	ced in service (see i	nstructions)			2	
3 TI	nreshold cost of section 179 propert	y before reduction i	n limitation			. 3	2,000,000.
4 R	eduction in limitation. Subtract line 3	from line 2. If zero	or less, enter -0-			4	
5 D	ollar limitation for tax year Subtract line 4 from lin	ne 1 if zero or less, enter -	0- If married filing separately	, see instructions		5	
6	(a) Description of p	property	(b) Cost (l	ousiness use only)	(c) Elected	cost	
							17
							· · · · · · · · · · · · · · · · · · ·
7 L	sted property. Enter the amount from	m line 29		7			, -4
8 T	otal elected cost of section 179 prop	erty. Add amounts	in column (c), lines 6	and 7		. 8	
9 T	entative deduction. Enter the <mark>smalle</mark>	r of line 5 or line 8			•	. 9	
10 C	arryover of disallowed deduction fro	m line 13 of your 20	009 Form 4562			10	
11 B	usiness income limitation. Enter the	smaller of business	income (not less than	zero) or line 5		11	
12 S	ection 179 expense deduction. Add	lines 9 and 10, but	do not enter more tha	n line 11		12	
13 C	arryover of disallowed deduction to	2011. Add lines 9 a	nd 10, less line 12	▶ 13			<u> </u>
	Do not use Part II or Part III below f	or listed property In	nstead, use Part V.				
Par	till Special Depreciation Allow	ance and Other De	epreciation (Do not in	clude listed prope	rty.)		
14 S	pecial depreciation allowance for qu	alified property (oth	er than listed property	/) placed in service	dunng		
th	ne tax year					14	
15 P	roperty subject to section 168(f)(1) e	election				. 15	
_	ther depreciation (including ACRS)				·	16	28,400.
Pár	till MACRS Depreciation (Do n	not include listed pro	operty.) (See instruction	ons)			
	you are electing to group any assets placed in se Section B - Asset (a) Classification of property		e During 2010 Tax Ye (c) Basis for depreciation (business/investment us only - see instructions)	ear Using the Gen	eral Deprecia		(g) Depreciation deduction
19a	3-year property	III Sa VICe			+	 	
b b	5-year property	\footings\			 		
c	7-year property				 -		
d	10-year property					 	
<u>u</u> е	15-year property				 	 	
_ -	20-year property		-		+		
<u>'</u>	25-year property			25 yrs.	 	S/L	
	Lo your property	 		27.5 yrs.	MM	S/L	
h	Residential rental property	7		27.5 yrs.	MM	S/L	
		'		1	MM	S/L	
i	Nonresidential real property	' ,		39 yrs	MM	S/L	
	Section C - Assets	Placed in Service	During 2010 Tax Yea	r Using the Alterr			tem
20a	Class life	· .			T	S/L	
b	12-year			12 yrs.		S/L	
	40-year			40 yrs.	ММ	S/L	
	rt IV Summary (See instructions.						
21 L	usted property. Enter amount from li					21	
	otal. Add amounts from line 12, line		es 19 and 20 in colum	n (g), and line 21.			
	Inter here and on the appropriate line			=	r, ,	22	28,400.
	or assets shown above and placed i	-					
23 F	OI assets SHOWH above and Diaceu i	in service during me	3 Current year, enter ti	ne i i		ļ	
	portion of the basis attributable to se	-	· _	ne 23			

(a)
Description of costs

(b)
Date amortization
begins

Amortizable
amount

(c)
Amortizable
Code
Section

Amortization
pend or percentage
for this year

42 Amortization of costs that begins during your 2010 tax year:

43 Amortization of costs that began before your 2010 tax year

44 Total. Add amounts in column (f). See the instructions for where to report

016252 12-21-10

Form 4562 (2010)