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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No 1545-0047 2011 Open to Public Inspection

Ā	For the	2011 c	alendar year, or tax year beginning 08/01/11, and ending 07/31/12			
В.	Check if ap		C Name of organization	D	Employ	yer identification number
ň	Address ch	`	THE ACADEMY AT OCEAN REEF, INC.	ı		
	Audiess di	laliye	Doing Business As	_	65-	-0146241
	Name char	nge	Number and street (or P O box if mail is not delivered to street address) Room/suite	- E		one number
	Initial return	n				
吊			395 SOUTH HARBOR DRIVE		305	<u>5-367-2409</u>
	Terminated	1	City or town, state or country, and ZIP + 4			
	Amended r	etum	KEY LARGO FL 33037	G	Gross rece	eipts \$ 1,037,16
	Application	nendina	F Name and address of principal officer			affiliates? Yes X N
	, фриосион	ponding	GRAHAM BROWN	s a group	return for a	affiliates? Yes X N
		į	395 SOUTH HARBOR DRIVE H(b) Are	all affiliate	s included	1? Yes N
			KEY LARGO FL 33037	If "No," att	tach a list	(see instructions)
_	Tax-exem	nt etatue	X 501(c)(3) 501(c) () ◀ (insert no) 4947(e)(1) or 527			
<u> </u>						
<u>J</u>	Website:			ip exempt	T	
	Form of or	-			1	M State of legal domicile F.
	Part I		ımmary			· · · · ·
-	_ 1 B		escribe the organization's mission or most significant activities			
ø	1	To p	provide education for children from preschool through	= -		
aŭ		seco	ondary level.			
Ē	1					
š	2 0	heck thi	is box ▶ 🧻 if the organization discontinued its operations or disposed of more than 25% of its net as	sets		
Ŋ	3 N		of voting members of the governing body (Part VI, line 1a)		3	3
S.	4 N		of independent voting members of the governing body (Part VI, line 1b)		4	3
ij	-		nber of individuals employed in calendar year 2011 (Part V, line 2a)		5-	13
÷	3					10
کر ِ	6 1		nber of volunteers (estimate if necessary)		6	
လ်ပို	7a ⊺		elated business revenue from Part VIII, column (C), line 12		7a	
S \succeq	b N	let unrela	lated business taxable income from Form 990-T, line 34		7b	(
Ź٤			· · · · · · · · · · · · · · · · · · ·	r Year	247	Current Year
Zfg	8 C			895 <u>,</u>	\longrightarrow	710,603
ᇎ	9 P	rogram		344,		326,038
Revenue Activities & Governance	10 lr	nvestme	ent income (Part VIII, column (A), lines 3, 4, and 7d)	-58 <u>,</u>	559	509
_; ≅	11 C	Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	10
	12 T	otal reve	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	181,	067	1,037,160
0.2	13 0	Grants ar	nd similar amounts paid (Part IX, column (A), lines 1–3)		0	
<i>∞</i> ′			paid to or for members (Part IX, column (A), line 4)		0	
2013				574,	194	569,428
013 enses	160		onal fundraising fees (Part IX, column (A), line 11e)		0	(
Ξ.	IDAF				~	
Expe			• • • • • • • • • • • • • • • • • • •	490,	407	482,19
	1	-				
		-	penses Add lines 13–17 (must equal Part IX, column (A), line-25)	064,		1,051,61
	19 F	Revenue		116,		-14,45
Net Assets or			beginning o	526,		End of Year
3set	B 20 T		sets (Part X, line 16) Sets (Part X, line 26) Sets (Part X, line 26) JUN 1 8 2013			
₹,	립 21 T		1 1 2 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u>251,</u>		
				275,	431	4,261,35
_ <u>-</u> F	Part II	S <u>i</u>	gnature Block OCDCALLE			
ι	Jnder pen	alties of p	penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the	e best of	my kno	wledge and belief, it is
tı	rue, corre	ct, and co	omplete Declaration of preparer (other than officer) is based on all information of which preparer-has any knowledge.	edge		
			1 / 1			
Si	gn	S	Signature/of/officer/	_	Date	
	ere		v wey			
	,,,,	 	Type or prnt name and title			
		<u> </u>	preparer's name Preparer's signature A Dat	9	Obserte	f PTIN
Pa	id				Check	□"
		OCTAVI			self-em	
	eparer	Firm's na		Firm's	EIN .	20-4989621
US	e Only	l	255 Alhambra Cir Ste 560			
		Firm's ad		Phon	e no	<u> 305-446-317</u>
Ma	y the IRS	S discus	ss this return with the preparer shown above? (see instructions)			Yes No
		work Re	eduction Act Notice, see the separate instructions.			Form 990 (201
DA	۹.					•

Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		·	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 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		1	1
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? 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 as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		·	
	complete Schedule D, 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 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 assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	•			7,5
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		.	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a		40-	v	
	Schedule D, Parts XI, XII, and XIII	12a	X	
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	42h		x
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b 13		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
14a b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	144		
U	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
. •	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
-	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	L	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		1

Pa	art IV Checklist of Required Schedules (continued)			
	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	_22_		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated		:	
	employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
đ	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 disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
-b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	_		
	If "Yes," complete 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 person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
-	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		- X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	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	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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	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	35b		х
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			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	192 Note. All Form 990 filers are required to complete Schedule O	38	l x	l

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 0 Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 13 Statements, filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a 3a b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, secunties account, or other financial X account)? 4a 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 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?-6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods X and services provided to the payor? 7a 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was X required to file Form 8282? 7с If "Yes," indicate the number of Forms 8282 filed during the year 7е Х Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a Did the organization make a distribution to a donor, donor advisor, or related person? 9Ь b 10 Section 501(c)(7) organizations. Enter: 10a Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources 11b against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c Enter the amount of reserves on hand 14a X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

DAA

X

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

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			l
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O			I
b	Enter the number of voting members included in line 1a, above, who are independent			I
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			ŧ
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customanly performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	<u> </u>	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_ 5_		X_
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?			_X_
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	ıg		
а	The governing body?	8a	X	L
b	Each committee with authority to act on behalf of the governing body?	8b	X	L
-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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Code)		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete 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	Did the organization have a written conflict of interest policy? If "No," go to line 13	12 <u>a</u>	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
•	describe in Schedule O how this was done	12c		X
13	Did the organization have a written whistleblower policy?	13		X
14	Did 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 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 taxable entity during the year?	16a	.]	[x
b	and the second section of the second section is a second section to the second section to the second section to			
_	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			1
	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 ▶ FL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
. •	available for public inspection. Indicate how you made 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 made its governing documents, conflict of interest policy,			
. •	and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ► KEIRA HERLTH 395 South Harbor Drive			
ĸ	ey Largo FL 33037	305-30	67-2	2409

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

(A) Name and Title	(B) Average hours per week (describe hours for	(di bo	o not o x, unk	Pos check ess pe	C) ition more rson i irecto	than o s both r/truste	ne an	ensated any current officer, (D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related <u>organizations</u> in Schedule O)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	omer	(W-2/1099-MISC)		organization and related organizations
(1) Russell Post President/Secretary	0.50	x						0	0	
(2) Rick Haney Treasurer	0.50	X						0	0	
(3) Stephanie Karl	0.50	 				t				
Vice President	0.50	x						0	0	I
(4) Graham Brown										
Head of School	40.00		<u>L</u> .	X		<u> </u>		0	0	
(5) Scott Scheresche						l	x	22 244	o	
Head of School (6)Melby Hardy	40.00	┼		\vdash	┝		Λ.	33,344	<u> </u>	
Head of School	40.00						x	8,366	0	
(7)	20000									
(8)						-				
(9)						ļ				
(10)		 -								
(11)		T		-	-					
(12)		+		-						
(13)		-			-					
(14)		+			\vdash	\vdash	\vdash			

0

received more than \$100,000 of compensation from the organization ▶

<u> </u>	n V	III Statement of Reve	<u>nue</u>						
	A	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
रुष	1a	Federated campaigns	1a						
E		Membership dues	1b						
호팀		Fundraising events	1c						
₹Y		Related organizations	1d						
0.5		=	1e						
Contributions, Giffs, Grants and Other Similar Amounts		Government grants (contributions)	16						
ĕĔ	•	All other contributions, gifts, grants, and similar amounts not included above	1f		710,603				
뜮히					110,603				
<u>2</u>	_	Noncash contributions included in lines 1a-1	IT	\$		710 603			
<u>0 8</u>	<u> </u>	Total. Add lines 1a-1f			•	710,603			
풀	_				Busn. Code	206 020	206 020		
- S	2a	Tuition & Fees				326,038	326,038		
ا و ا	b								
울	С								
နှ	d								
ᆵ	e	* * * * * * * * * *			=:	<u> </u>	_	·	4 - 1 - 1
Program Service Revenue	f	All other program service reven	iue				, , , , , , , , , , , , , , , , , , , 		
_	g	Total. Add lines 2a-2f				326,038			<u> </u>
	3	Investment income (including d	ividend	ds, interest	i ,				•
		and other similar amounts)			•	50 <u>9</u>			509
	4	Income from investment of tax-	exemp	t bond pro	ceeds 🕨				
-	5-	Royalties			•				
		(i) Real		(II) P	ersonal				
	6a	Gross rents							
	b	Less rental exps							
	С	Rental inc or (loss)							
	_d	Net rental income or (loss)			<u> </u>				
l	7a	Gross amount from (i) Secunties sales of assets		(11)	Other	,			
1		other than inventory							
	b	Less cost or other		<u> </u>					
		basis & sales exps		l					
	С	Gain or (loss)							
	d	Net gain or (loss)			•				
	8a	Gross income from fundraising ever	nts	_					
ᆲ		(not including \$							
š		of contributions reported on line 1c)							
Other Revenue		See Part IV, line 18	а						
ᇐ	b	Less direct expenses	b						
ō		Net income or (loss) from fundi	aising	events	•				
		Gross income from gaming activities							
		See Part IV, line 19	а						
	ь	Less direct expenses	b						
- 1		Net income or (loss) from gami	ng act	vities	•				
		Gross sales of inventory, less	•						
		returns and allowances	а						
	b	Less cost of goods sold	b						
		Net income or (loss) from sales	of inv	entorv	•			,	
	Ť	Miscellaneous Revenue	•		Busn. Code				
	11a	OTHER INCOME				10	10		
	b	, 2v				_ ==			
	c								
	d	All other revenue					· · · · · · · · · · · · · · · · · · ·		
	e	Total. Add lines 11a-11d				10			
	12	Total revenue. See instruction	IS_			1,037,160		0	509

Statement of Functional Expenses

Form 990 (2011)

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)

	Check if Schedule O contains a response to any question in this Part IX							
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising			
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses			
1	Grants and other assistance to governments and							
	organizations in the U.S. See Part IV, line 21	<u> </u>						
2	Grants and other assistance to individuals in							
	the U.S. See Part IV, line 22							
3	Grants and other assistance to governments,							
	organizations, and individuals outside the							
	U S See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors,	CE 000	40 250	22 750				
	trustees, and key employees	65,000	42,250	22,750				
6	Compensation not included above, to disqualified							
	persons (as defined under section 4958(f)(1)) and	<u>. 41,7</u> 03	_ 27,112	14,591				
_	persons described in section 4958(c)(3)(B)	373,957	243,932	130,025	5 5 5 5 6 E E E			
7	Other salanes and wages	313,331	443,334	130,025				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	20,389	13,290	7,099				
9	Other employee benefits	27,496	17,922	9,574				
10	Payroll taxes	40,883	26,690	14,193				
-11-		20,000						
	Management							
b	Legal		· ··= · · · · ·					
	Accounting							
d	Lobbying							
е	Professional fundraising services See Part IV, line 17							
f	Investment management fees							
g	Other	18,515	16,148		2,367			
12	Advertising and promotion							
13	Office expenses				 			
14	Information technology							
15	Royalties							
16	Occupancy							
17	Travel							
18	Payments of travel or entertainment expenses							
	for any federal, state, or local public officials		<u></u>					
19	Conferences, conventions, and meetings	3,008	3,008					
20	Interest	3,000	3,008					
21	Payments to affiliates Depreciation, depletion, and amortization	156,674	156,674	· <u>-</u> ·	.			
22 23	Insurance	27,729	27,729					
24	Other expenses Itemize expenses not covered	= -,						
	above. (List miscellaneous expenses in line 24e. If							
	line 24e amount exceeds 10% of line 25, column							
	(A) amount, list line 24e expenses on Schedule O)							
а	Repairs and maintenance	115,683	115,683					
b	Other expenses	82,285	63,809		18,476			
С	Utilities and telephone	56,510	36,837	19,673				
d	Students supplies	16,425	16,425					
е	All other expenses	5,361	5,361					
25	Total functional expenses Add lines 1 through 24e	1,051,618	812,870	217,905	20,843			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)							
<u> </u>					000			

Part X	Balance Sheet			
		(A)		(B)
		Beginning of year		End of year
1	Cash—non-interest bearing	237,357	1	183,930
2	Savings and temporary cash investments	48,310	2_	48,689
3	Pledges and grants receivable, net	15,500	3_	15,500
4	Accounts receivable, net	15,030	4	49,795
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of			
ŀ	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
1	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
र्ध	employees' beneficiary organizations (see instructions)		6	
Assets 7	Notes and loans receivable, net		7	
⋖ 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment cost or			
- -	other basis Complete Part VI of Schedule D 10a 6,010,785			_
b	Less accumulated depreciation 10b 2,019,884	4,094,446	10c	3,990,901
11	Investments—publicly traded securities		11	
12	Investments—other secunties. See Part IV, line 11		12	
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15-	Other assets -See Part IV, line-11	115,946	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	4,526,589	16	4,-288-,815
17	Accounts payable and accrued expenses	4,117	17	5,899
18	Grants payable		18	
19	Deferred revenue	17,003	19	21,564
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ဖ္ထု 22	Payables to current and former officers, directors, trustees, key			
<u>#</u>	employees, highest compensated employees, and disqualified persons			
Liabilities	Complete Part II of Schedule L		22	
<u>23</u>	Secured mortgages and notes payable to unrelated third parties	230,038		
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X			
	of Schedule D	051 150	25	05.463
26	Total liabilities. Add lines 17 through 25	251,158	26	27,463
	Organizations that follow SFAS 117, check here ▶ X and complete			#
8	lines 27 through 29, and lines 33 and 34.	2 200 075		4 012 052
27	Unrestricted net assets	3,882,875		4,213,253
g 28	Temporarily restricted net assets	344,457		40.000
일 29	Permanently restricted net assets	48,099	29	48,099
[Organizations that do not follow SFAS 117, check here ▶ ☐ and			
Net Assets or Fund Balances 22 8 29 30 31 32	complete lines 30 through 34.			•
30	Capital stock or trust principal, or current funds	· · · · · · · · · · · · · · · · · · ·	30	
¥ 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	Retained earnings, endowment, accumulated income, or other funds	A 07E 401	32	A 261 250
33	Total net assets or fund balances	4,275,431		4,261,352
34	Total liabilities and net assets/fund balances	4,526,589	34	4,288,815

Form 990 (2011) THE ACADEMY AT OC	EAN REEF,	INC.	65-0146241			Page	<u>12</u>
Part XI Reconciliation of Net Assets	s		·				_
Check if Schedule O contains a r	esponse to any o	uestion in thi	s Part XI				
				اما	1 0	27 16	- ^
1 Total revenue (must equal Part VIII, column (A),	•			1		$\frac{37,16}{51,61}$	_
2 Total expenses (must equal Part IX, column (A),	•			2		$\frac{51,61}{14,65}$	
3 Revenue less expenses Subtract line 2 from line				3		$\frac{14,45}{25}$	
4 Net assets or fund balances at beginning of year			nn (A))	4	4,2	75,43	_
5 Other changes in net assets or fund balances (e	explain in Schedule	O)		5		37	9
6 Net assets or fund balances at end of year Com	ibine lines 3, 4, and	l 5 (must equal	Part X, line 33,				
column (B))				6	4,2	61,35	<u> </u>
Part XII Financial Statements and R	eporting					_	_
Check if Schedule O contains a r	esponse to any o	uestion in thi	s Part XII				
	_				•	Yes N	lo
1 Accounting method used to prepare the Form 99	90 🗌 Cash	X Accrua	l Other				
If the organization changed its method of accour	nting from a prior ye	ear or checked	"Other," explain in		l l		
Schedule O					l l		
2a Were the organization's financial statements cor	mpiled or reviewed	by an independ	lent accountant?		2a	3	X
b Were the organization's financial statements aud	dited by an indepen-	dent accountar	nt?		2b	X	
c If "Yes" to line 2a or 2b, does the organization ha	ave a committee tha	at assumes res	ponsibility for oversight				
of the audit, review, or compilation of its financia	al statements and s	election of an ii	ndependent accountant?		2c	-X	
If the organization changed either its oversight p	rocess or selection	process dunno	the tax year, explain in				_
Schedule O.							
d If "Yes" to line 2a or 2b, check a box below to ine	dicate whether the f	financial statem	ents for the year were				
issued on a separate basis, consolidated basis,			,				
Separate basis — Consolidated basis —		dated and sepa	rate hasis				
3a As a result of a federal award, was the organiza						-	
the Single Audit Act and OMB Circular A-133?		5.35 an addit 0	. danie do oct official		3a	3	X
b If "Yes," did the organization undergo the require	ed audit or audits? I	f the organizati	on did not undergo the		34		_
required audit or audits, explain why in Schedule					3ь		
required addit of addits, explain wity in odifedute	, o and describe an	iy otopo takeri	o unacigo odon addito			m 990 (20	

SCHEDULE A (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.

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

Department of the Treasury Internal Revenue Service Name of the organization

THE ACADEMY AT OCEAN REEF, INC.

Employer Identification number 65-0146241

OMB No 1545-0047

P	art i	Rease	on for Public Charity	Status (All organizations i	must co	mplete t	his pa	rt.) Se	e instr	uction	S			
The	orgai	nization is not a	private foundation because	it is (For lines 1 through 11, che	ck only or	ne box)	•					_		
1		A church, con	ivention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(A)(i).							
2	X		cribed in section 170(b)(1)(A											
3	П	A hospital or a	a cooperative hospital service	e organization described in secti	on 170(b)	(1)(A)(iii)								
4	П	•		in conjunction with a hospital des)(A)(iii).	Enter th	ne hospi	ital's nam	e.		
		city, and state		•						•				
5		-		a college or university owned or	operated	by a gove	rnmenta	ıl unit de	scabed	ın				
_	ш	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	\Box	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).												
7	H	•		ubstantial part of its support from			•	n the ne	neral nu	blic				
•	ш				a govern	incinal un	01 11011	ii iiic gei	iciai pu	ibiic				
	- =	described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)												
9	H	-		more than 33 1/3% of its suppor	-		= . mombe		<u>-</u>					
ð	Ш	-	- · · · · · · · · · · · · · · · · · · ·	of functions—subject to certain e						-				
		•	·	l unrelated business taxable inco						IIS				
		• •	-	1975 See section 509(a)(2).	-		i lax/ ii	om ousi	1163363					
40			_	clusively to test for public safety	•		n\(4\							
10 -44-	H.	•	•	clusively to test for public safety		•		carn, ou	t the					
11	Ш	•	•	d organizations described in sec				_ · -		tion -				
				e type of supporting organization						LIOII				
		a Type		c Type III–Functiona		•	d [— ř	 e III–Otl	hor				
_			··	nization is not controlled directly	-									
e	Ш	-	•	than one or more publicly suppo										
				than one of more publicly suppo	nteu organ	iizationis t	iesci ibei	u III SECI	1011 303	(a)(1)				
		or section 509		mination from the IRS that it is a	Type I Ty	me II or T	wa III e	unnortin	^					
Ť		-	check this box	illiadon nom the into that it is a	Type I, Ty	rpe II, OI I	ype air s	арроган	y					\Box
_		•		an accounted any sift or contribute	on from a	ov of the								Ш
g		_	_	on accepted any gift or contributi	on nom a	ny or trie								
		following per					al (v) a						V	
		• • •	•	trols, either alone or together wi	in persons	s describe	u III (II) e	ariu			ſ	14-10	Yes	No
			v, the governing body of the s	•							Г	11g(i)		├
		• •	member of a person describe	* *							Г	11g(ii)		
		• •	ontrolled entity of a person de								Ľ	11g(iii)		<u> </u>
<u> </u>			ollowing information about the		(Cod to the c		64) Det.		4.0	10.45.0	Ι ,			
1		e of supported ganization	(ii) EIN	(ili) Type of organization (described on lines 1–9	1 ' '	organization sted in your		ou notify	organizat	is the tion in col	"	ll) Amo supp		
	Ų.	gumzassn		above or IRC section		document?	∞l (l)	of your	(i) organi	zed in the				
				(see instructions))		1		port?	· -	S?				
<u></u>					Yes	No	Yes	No	Yes	No				
(A)														
					 	 		 		 	<u> </u>			
(B)								1						
·									-					
(C)														
		·-		 	 						 			
(D)														
(E)														
					<u> </u>				-					
T -*														
Tota	a i		I	t	.t	1	£	£	I	1	1			

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.)

Sec	tion A. Public Support				<u> </u>			-
Caler	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011		f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							<u></u>
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3			·····				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)		######################################				-	
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support			, ,				
Caler	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4							
8—	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							·
9	Net income from unrelated business activities, whether or not the business is regularly carned on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)			,				· · · · · · · · · · · · · · · · · · ·
11	Total support. Add lines 7 through 10	Ĺ	<u> </u>			<u>L</u>		
12	Gross receipts from related activities, etc. (•					12	
13	First five years. If the Form 990 is for the	organization's first,	second, third, fourt	h, or fifth tax year	as a section 501(c)	(3)		. —
	organization, check this box and stop here				 			
	tion C. Computation of Public Su	• •				1.		
14	Public support percentage for 2011 (line 6,	• •	•	(f))		<u> </u>	14	<u>%</u>
15	Public support percentage from 2010 Sche				4/00/		15	<u>%</u>
16a	33 1/3% support test—2011. If the organi				1/3% or more, che	CK this		▶ □
b	box and stop here. The organization qualifactors and stop here. The organization qualifactors and stop here. The organization qualifactors are stop here.	•	• •		us 22 1/29/ or more			
U	check this box and stop here . The organiz				15 33 1/3 /6 01 111016	•		▶ □
17a	10%-facts-and-circumstances test—201	•		=	or 16h and line 1	4 10		
11 G	10% or more, and if the organization meets	•						
	Part IV how the organization meets the "fac							
	organization		g	,,				▶ □
ь	10%-facts-and-circumstances test—20°	0. If the organizati	on did not check a l	oox on line 13, 16a	a, 16b, or 17a, and	ine		ا .
_	15 is 10% or more, and if the organization is	•		•				
	Explain in Part IV how the organization med					cly		
	supported organization			•		-		▶ 🗍
18	Private foundation. If the organization did	not check a box of	n line 13, 16a, 16b,	17a, or 17b, check	k this box and see			ب
	instructions							▶ 🗌
								

Schedule A (Form 990 or 990-EZ) 2011 THE ACADEMY AT OCEAN REEF, INC. 65-0146241

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.)

	tion A. Public Support			,		,		
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	1	(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					ļ		-
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							
С	Add lines 7a and 7b		1			:		
8	Public support (Subtract line 7c from							
Sec	tion B. Total Support	<u> </u>	1	<u> </u>	1	<u> </u>	1	
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	1	(f) Total
9	Amounts from line 6	(2) 200.	(27 2000	(-/	(-, : -	(-/		
_	Gross income from interest, dividends,	-				1		
10a	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							
С	Add lines 10a and 10b	-						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned 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,						:	
44	and 12) First five years. If the Form 990 is for the	organization's first	second third four	th or fifth tax year	as a section 501(c)	(3)		
14	organization, check this box and stop here		secona, uma, nan	iii, oi iiitii tax year	as a scollori so i(c)	(0)		▶ [
Sec	tion C. Computation of Public Su		tage					
15	Public support percentage for 2011 (line 8,			(f))	-		15	%
16	Public support percentage from 2010 Sche						16	%
	tion D. Computation of Investme							
17	Investment income percentage for 2011 (lii			column (f))			17	%
18	Investment income percentage from 2010						18	%
19a				14, and line 15 is n	nore than 33 1/3%,	and line		
	17 is not more than 33 1/3%, check this bo							▶ [
b	33 1/3% support tests—2010. If the orga						d	
	line 18 is not more than 33 1/3%, check thi							<u> </u>
20	Private foundation. If the organization did	not check a box o	n line 14, 19a, or 1	9b, check this box	and see instruction	s		•

chedule A (Form 990 or 990-EZ) 2011	THE	ACADEMY	ΑT	OCEAN	REEF,	INC.

65-0146241

Page 4

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization

Employer Identification number

T	HE ACADEMY AT OCEAN REEF, INC.		65-0	146241		
	Organizations Maintaining Donor Advised Fur organization answered "Yes" to Form 990, Part IV					
		(a) Donor advised funds	(b) Funds and other accounts		
1	Total number at end of year	(4, 25.15. 25.15.15.	·	, , , , , , , , , , , , , , , , , , , ,		
2	Aggregate contributions to (dunng year)					
3	Aggregate contributions to (during year) Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in writing that the	L L L L L L L L L L L L L L L L L L L				
•	funds are the organization's property, subject to the organization's exclus			Yes No		
6	Did the organization inform all grantees, donors, and donor advisors in w					
٠	only for chantable purposes and not for the benefit of the donor or donor					
	conferming impermissible private benefit?	advisor, or for any other purpose		Yes No		
Pi	art II Conservation Easements. Complete if the organ	nization answered "Yes" to Form 9	90, Part			
1	Purpose(s) of conservation easements held by the organization (check a	il that apply)				
	Preservation of land for public use (e g , recreation or education)	Preservation of an historically impo	rtant land	area		
	Protection of natural habitat	Preservation of a certified historic s	structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualified conserva-	ation contribution in the form of a conservati	on			
-	easement on the last day of the tax year					
			·····	Held at the End of the Tax Year		
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
C	Number of conservation easements on a certified histonic structure include	• •	2c			
d	Number of conservation easements included in (c) acquired after 8/17/06	i, and not on a				
	historic structure listed in the National Register 2d					
3	Number of conservation easements modified, transferred, released, extir	iguished, or terminated by the organization (during the			
	tax year >					
4	Number of states where property subject to conservation easement is loc					
5	Does the organization have a written policy regarding the periodic monito	ing, inspection, nandling of		☐ Yes ☐ No		
	violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	a consequence consequents during the year		res no		
6	Stan and volumeer nours devoted to monitoring, inspecting, and emorcing	g conservation easements during the year				
7	Amount of expenses incurred in monitoring, inspecting, and enforcing col	nservation easements during the year				
	> \$					
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section 170(h)(4)(B)				
	(i) and section 170(h)(4)(B)(ii)?			Yes No		
9	In Part XIV, describe how the organization reports conservation easemer	nts in its revenue and expense statement, a	nd			
	balance sheet, and include, if applicable, the text of the footnote to the or	ganization's financial statements that descri	bes the			
	organization's accounting for conservation easements	11:-4:1 T O4b O	A	4-		
Pi	WIX 題 Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to F		ımılar A	ssets.		
12	If the organization elected, as permitted under SFAS 116 (ASC 958), not		nce sheet			
	works of art, historical treasures, or other similar assets held for public ex	•				
	public service, provide, in Part XIV, the text of the footnote to its financial					
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to r		sheet			
	works of art, historical treasures, or other similar assets held for public ex	chibition, education, or research in furtheran	ce of			
	public service, provide the following amounts relating to these items					
	(i) Revenues included in Form 990, Part VIII, line 1		>	\$		
	(ii) Assets included in Form 990, Part X		•	\$		
2	If the organization received or held works of art, historical treasures, or o	ther similar assets for financial gain, provide	the			
	following amounts required to be reported under SFAS 116 (ASC 958) re	elating to these items:				
а	Revenues included in Form 990, Part VIII, line 1		>	\$		
b	Assets included in Form 990, Part X		•	\$		

Sche	dule D (Form 990) 2011 THE ACAD	EMY AT OCEA	N REEF, INC	. 6	5-U1462	41	Page 2	
Pa	rt III Organizations Maintainin	g Collections of	Art, Historical Tre	easures, or	Other Simil	ar Assets	(continued)	
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other records,	check any of the followi	ng that are a sig	gnificant use of	ıts		
а	Public exhibition	d 🗍 I	Loan or exchange prog	rams				
b	Scholarly research		Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ellections and explain h	ow they further the orga	anization's exem	npt purpose in f	Part		
	XIV							
5	During the year, did the organization solicit of	r receive donations of a	art, historical treasures,	or other similar				
	assets to be sold to raise funds rather than t	be maintained as part	t of the organization's c	ollection?			Yes No	
Pa	et IV Escrow and Custodial Ar				ered "Yes" to	o Form 990), Part IV,	
	line 9, or reported an amou	int on Form 990, F	Part X, line 21.					
1a	Is the organization an agent, trustee, custod	an or other intermediar	y for contributions or ot	her assets not			_	
	included on Form 990, Part X?						Yes No	
b	If "Yes," explain the arrangement in Part XIV	and complete the follow	wing table					
							Amount	
С	Beginning balance					1c		
d	Additions during the year					1d	<u> </u>	
e⁻	Distributions during the year 🚽 😑 🕒					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on F	orm 990, Part X, line 2	12				Yes No	
b	If "Yes," explain the arrangement in Part XIV							
Pa	ert V Endowment Funds. Com	olete if the organiz	ation answered "Y	es" to Form	990, Part IV	', line 10		
		(a) Current year	(b) Pnor year	(c) Two years b	oack (d)∏	hree years back	(e) Four years back	
1a	Beginning of year-balance —	48,310	51,574	50	,145			
b	Contributions							
C	Net investment earnings, gains, and							
	losses	379	-3,264	1	,429			
d	Grants or scholarships							
е	Other expenditures for facilities and				1			
	programs					·		
f	Administrative expenses							
g	End of year balance	48,689	48,310		,574			
2	Provide the estimated percentage of the cur		line 1g, column (a)) hel	d as.				
	Board designated or quasi-endowment	%						
	Permanent endowment ► 98.79 %							
С	Temporanly restricted endowment ▶	1.21%						
_	The percentages in lines 2a, 2b, and 2c sho	•						
3a	Are there endowment funds not in the posse	ssion of the organization	on that are held and adi	ministered for th	ie		V N-	
	organization by						Yes No	
	(i) unrelated organizations							
	(ii) related organizations	- 144	Cabadula DO					
_	If "Yes" to 3a(ii), are the related organization	•					3b	
<u>4</u>	Describe in Part XIV the intended uses of the Land, Buildings, and Equ			10				
re	Description of property	(a) Cost or other b			(c) Accumulate	ed	(d) Book value	
	Description of property	(investment)	(other		depreciation	l l	(a) Dook Value	
1-	Land	,,,,,,		05,000	,		405,000	
	Buildings			84,587	1,232	.560	3,352,027	
	Leasehold improvements			33,639		,650	198,989	
	Equipment			29,829		,944	34,885	
	Other			57,730		,730		
	I. Add lines 1a through 1e (Column (d) must	equal Form 990. Part X				<u> </u>	3,990,901	
	(2)		. ,,					

Part VII	Investments—Other Securities. See For	rm 990, Pai	rt X, line 12.		
	(a) Description of security or category		(b) Book value	(c) Method o	f valuation
	(including name of security)			Cost or end-of-ye	ar market value
(1) Financial	denvatives				
(2) Closely-he	eld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					<u></u> -
(E)					<u></u>
(F)					
(G)					
(H)					
(1)	· · · · · · · · · · · · · · · · · · ·				
	n (b) must equal Form 990, Part X, col (B) line 12)	<u> </u>		<u> </u>	
Part VIII	Investments—Program Related. See Fo	orm 990, Pa		- 1	
	(a) Description of investment type		(b) Book value	(c) Method o	
				Cost or end-of-ye	ar market value
(1)					
(2)				·	
(3)					
(4)					
(5)					
<u>-(6)</u>		-			
(7)					
(8)			·· · · · · · · · · · · · · · · · · · ·	_	
(9)					
(10)	(1)				
	n (b) must equal Form 990, Part X, col (B) line 13)	45		<u> </u>	
Part IX	Other Assets. See Form 990, Part X, line				4.5
	(a) Descri	ption			(b) Book value
(1)					
(2)					
(3)					
(4)	· · ·				
(5)					
(6)					
(7)		•			
(8)					
<u>(9)</u>					
(10)	n (b) must equal Form 990, Part X, col (B) line 15)			<u> </u>	
Part X	Other Liabilities. See Form 990, Part X, I	line 25	· · · · · · · · · · · · · · · · · · ·	<u></u>	
1.	(a) Description of liability	1110 20.	(b) Book value		
	income taxes		(2) 255% (4.05	┪	
(2)	moone taxes	-		┪	
(3)				-	
(4)				7	
(5)_				┪	
(6)	· · · · · · · · · · · · · · · · · · ·				
(7)				7	
(8)				┪	
(9)				┪	
(10)				┪	
(11)				7	
	n (b) must equal Form 990, Part X, col (B) line 25)	▶		₫	
	C 740) Footpote In Part XIV provide the text of the foo		nanization's financial	etatements that reports the	

organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sche	dule D (Form 990) 2011 THE ACADEMY AT OCEAN REEF,		65-0146241		Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 9	90 to Audited F	<u>inancial Stateme</u>	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	1,037,160
2	Total expenses (Form 990, Part IX, column (A), line 25)		L	2	<u>1,05</u> 1,618
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	-14,458
4	Net unrealized gains (losses) on investments			4	379
5	Donated services and use of facilities		L	5	
6	Investment expenses		L	6	
7	Pnor period adjustments		L	7	
8	Other (Describe in Part XIV.)		L	8	
9	Total adjustments (net) Add lines 4 through 8		L	9	379
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a			10	-14,079
_Pa	rt XII Reconciliation of Revenue per Audited Financial Sta	tements With R	evenue per Retu	rn	
1	Total revenue, gains, and other support per audited financial statements			1	1,037,539
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a	379		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c		- 1	
d	Other (Describe in Part XIV.)	2d			
—е	Add lines 2a through 2d			2e-	37 9
3	Subtract line 2e from line 1			3	1,037,160
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
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	
Pa	rt XIII Reconciliation of Expenses per Audited Financial St	atements With	Expenses per Re	turn	
1	Total expenses and losses per audited financial statements			1	1,051,618
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Pnor year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	, .		3	1,051,618
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			
c	Add lines 4a and 4h			40	

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Part X - FIN 48 Footnote

Supplemental Information

The School is exempt from income tax under Section 501(c) (3) of the Internal Revenue Code and therefore, has made no provision for federal income taxes in the accompanying financial statements. In addition, the School qualifies for the charitable contribution deduction under Section 170 (b) (1) (A) and has been classified as an organization other than a private foundation under Section 509 (a) (2).

1,051,618

There are no reserves held for uncertain tax positions at July 31, 2012. Tax years that are open under the statute of limitations remain subject to examination by the IRS.

SCHEDULE J

Compensation Information

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

 Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
 Attach to Form 990. ➤ See separate instructions. OMB No 1545-0047 **2011**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

THE ACADEMY AT OCEAN REEF, INC.

Employer Identification number 65 - 0146241

Part I **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e g, maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director Explain in Part III: Written employment contract Compensation committee Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? 4a X 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of X a The organization? 5a X b Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? 6a b Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III X 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe X 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2011

Page 2

INC. THE ACADEMY AT OCEAN REEF,

Schedule J (Form 990) 2011

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

65-0146241

Part II

Note. The sum of columns (B)(I)—(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

	(B) Bre	akdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	ompensation	(C) Retirement and	d (D) Nontaxable	(E) T	suur	(F) Compensation
(A) Name	(i) Base compensation		(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	<u>e</u>	reported as deferred in pnor Form 990
Scott Schereschewsky (4)		33,344	0		0	0	0 33,	33,344	0
(ii)		0	0	_	o	0	0	0	0
Melby Hardy (0)		8,366	0	=	-	0	' 8 0	998'8	0
2 (0)		0	0	_	0	0	0	0	0
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(11)			,		-				
	(6)				_				
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14	(m)			-					
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16	(II)			_	- :				
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					=			Sche	Schedule J (Form 990) 2011

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

THE ACADEMY AT OCEAN REEF, INC.

Employer Identification number 65-0146241

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 MANAGEMENT WILL REVIEW THE TAX RETURN PRIOR TO BE FILED.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation THE GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

Forms			
990	1	990-PF	-

Mortgages and Other Notes Payable

230,038

2011

For calendar year 2011, or tax year beginning

08/01/11 , and ending

07/31/12

Name .

<u>(9)</u> (10)

Totals

Employer Identification Number

T	HE ACADE	MY AT O	CEAN REEF,	INC.		65-014624	1
							•
F	orm 990,	Part X	<u>, Line 23 -</u>	Additional	Information		
		Nom	o of landar		Relationship to due	avalified names	
(1)	Gibralt		e of lender		Relationship to disc	qualified person	-
(2)			- GIBRALTA	R BANK			
(3)							
(4)							
(5)							
(6)				<u> </u>			
(7)							
(8)	-						
(9)							
(10)		=	5 4 F 15 C	= =	<u> </u>		
			T		T		
	Onginal borrow	amount ved	Date of loan	Matunty date	Repayment terms		Interest rate
(1)		00,000	11/01/01	03/15/13			5.750
(2)				03/30/12	1		5.000
(4)	•						
(5)	71. 11						
(6)							
(7)							
(8)			-	······································	 		
(9)							
(10)					1		,
		Security	provided by borrower		Purpose o	f loan	
(1)	Real es		assignment	of pledges.	School facilities.		
(2)							
(3)			· · · · · · · · · · · · · · · · · · ·				
(4)							
(5)			_				
(6)							
<u>(7)</u>		··					
(8) (0)		· ·				 	
(9) (10)					 		•
(10)			······································				
					Balance due at	Balance	due at
	·	Consideration t	furnished by lender		beginning of year	end of	
(1)			_		171,347	ļ	
<u>(2)</u>					58,691		
(3)						-	
<u>(4)</u>						 	
<u>(5)</u>				-	· · · · · · · · · · · · · · · · · · ·		
(6) (7)					 	· · · · · -	
(8)				-			
ν,					<u> </u>	<u> </u>	

65-0146241

Federal Statements

Statement 1 - Form 8868, Part II, Line 7 - Explanation for Extension

Description

An attempt to obtain information necessary for filing a return was requested in a timely fashion, but the information was not furnished in sufficient time to permit the timely filing of the return, or the taxpayer personally visited an IRS office for the purpose of securing information or advice and was unable to meet with an IRS representative

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the T Internal Revenue Se		► File a	separate a	pplication for each return.			
		omatic 3-Month Extension, complete	only Part I	and check this box			► X
•	_	ditional (Not Automatic) 3-Month Exte			n)		
	_	ess you have already been granted an a			-		
Electronic fili	ng (e-file). You	u can electronically file Form 8868 if you	need a 3-m	onth automatic extension of time to file (6	6 months fo	or	
a corporation r	equired to file	Form 990-T), or an additional (not autom	atic) 3-mont	th extension of time. You can electronica	lly file Forn	1	
8868 to reques	st an extension	of time to file any of the forms listed in F	Part I or Part	II with the exception of Form 8870, Infor	mation		
Return for Trai	nsfers Associa	ted With Certain Personal Benefit Contra	acts, which n	nust be sent to the IRS in paper format (see		
instructions) F	or more details	s on the electronic filing of this form, visit	www irs go	v/efile and click on e-file for Chanties & N	Nonprofits		
Part I	Automati	c 3-Month Extension of Time.	Only subi	mit original (no copies needed).			
A corporation r	equired to file	Form 990-T and requesting an automatic	c 6-month ex	ktension-check this box and complete			
Part I only All other corpo	rations (includi	ng 1120-C filers), partnerships, REMICs			nsion of tim	e	▶ 🗌
to file income t	ax returns.			Enter filer	's identifyi	ng number, see i	nstructions
Type or	Name of exe	empt organization or other filer, see instru	uctions —			er identification numb	
print	mii 20	INDERV AR OCEAN DEEP	TNO		ਚਿਟ	0146041	
File by the		ADEMY AT OCEAN REEF				-0146241	
due date for filing your		eet, and room or suite no If a P.O box, DUTH HARBOR DRIVE	see instructi	ons	Social s	ecurity number (SSN)
return See instructions		post office, state, and ZIP code For a f	oreign addre	ess, see instructions			
	KEY-LA	RGO FL	<u> –33037 </u>				
Enter the Retu	ırn code for the	return that this application is for (file a s	eparate app	lication for each return)			01
Application	1		Return	Application			Return
Is For			Code	ls For			Code
Form 990			01	Form 990-T (corporation)			07
Form 990-B	L		02	Form 1041-A			08
Form 990-E	<u>z</u>		01	Form 4720			09
<u>Form 990-P</u>	F		04	Form 5227			10
Form 990-T	(sec 401(a) o	r 408(a) trust)	05	Form 6069			11
Form 990-T	(trust other tha		06	Form 8870			12
		MELBA HARDY					
• The books	are in the care of	395 South Harbor Driv * Key Largo	re			FL 330	37
THE DOORS	are in the care of	y Moy Zorgo				11 330	<i>3</i>
•		05-367-2409	FAX No				_
_		not have an office or place of business in					▶ ∐
	•	um, enter the organization's four digit Gr	•		this is		
for the whole	group, check ti	nis box If it is for part of	the group, c	heck this box	ıch		
		Ns of all members the extension is for					
		3-month (6 months for a corporation re					
		to file the exempt organization return	n for the orga	anization named above. The extension is	6		
for the	organization's i						
▶ [_	calendar year	or					
▶ 🗓	tax year begin	nning 08/01/11 , and ending	07/31/	12			
2 If the ta	x year entered	in line 1 is for less than 12 months, che		Initial return Final return			
	Change in acco			Al-, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,			
	• •	r Form 990-BL, 990-PF, 990-T, 4720, or	ouoy, enter	the tentative tax, less any)
		See instructions	tor cover	ndoble avadte cod	3a	\$ 0	
		r Form 990-PF, 990-T, 4720, or 6069, er	-		ا م	1. 0	
		its made Include any prior year overpay ct line 3b from line 3a Include your payn			3b	\$	
		deral Tax Payment System). See instruc		s torm, ii required, by using	3c	$ \mathbf{s} \mathcal{O}$	

Form 8868 (Re	ev. 1-2012)					Page 2
• If you are	filing for an Additional (Not Automatic) 3-Month Exte	ension, com	plete only Part II and check this box			► X
_	mplete Part II if you have already been granted an auto		, , , , , , , , , , , , , , , , , , ,	8868		_
***************************************	filing for an Automatic 3-Month Extension, complete					
Part II	Additional (Not Automatic) 3-Month Ex	tension c	of Time. Only file the original (n	o copies	needed)	
			Enter file	1		see instructions
Type or	Name of exempt organization or other filer, see instr	uctions		Employ	er identificatio	n number (EIN) or
print	THE ACADEMY AT OCEAN DEED	TNO		₩ 65	01460	4.1
File by the	THE ACADEMY AT OCEAN REEF Number, street, and room or suite no If a P O box,			 	-01462	
due date for	395 SOUTH HARBOR DRIVE	see instructi	ons	Socials	secunty numbe	er (55N)
filing your return See	City, town or post office, state, and ZIP code For a f	oreign addre	ass see instructions			
instructions		33037				
Enter the Retu	irn code for the return that this application is for (file a s	eparate app	lication for each return)			01
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Application		Return	Application			Return
ls For		Code	ls For	_		Code
Form 990		01				
Form 990-B		02 -	Form 1041-A =			08
Form 990-E	Z	01	Form 4720			09
Form 990-P	F	04	Form 5227	 .	.	10
	(sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T	(trust other than above)	06	Form 8870			12
Telephone If the orga If this is for for the whole of the whole of the whole of the thin the name of the triangle of triangle	mes and EINs of all members the extension is for	FAX No in the United soup Exemption of the group /15/13 08/0	States, check this box on Number (GEN)	attach a	FL	33037 ▶ □
nonrefu	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or indable credits. See instructions			8a	\$	0
	pplication is for Form 990-PF, 990-T, 4720, or 6069, en ed tax payments made. Include any prior year overpayr	•				
	paid previously with Form 8868	nem anower	as a credit and any	8b	s	
	e due. Subtract line 8b from line 8a Include your paym	ent with this	form if required by using EETPS	- 00	-	
	onic Federal Tax Payment System) See instructions		rom, ir rodonos, by doing Er 11 o	8c	s	Ø
Under penaltii knowledge an	Signature and Verifices of perjury, I decide that I have examined this form, is decided, it is true, conect, and complete and that Lam	ncluding acc authorized to	a aranara ibia farra	•	Date	> 03/12/13 m 8868 (Rev 1-2012)