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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Openito Public

	nal Revenue S			The organizatio	n may have to us	se a copy of th	is return to satis	sfy state reporti	ng requirem	ients.	<u> </u>	inspection-	M. S.	
A	For the 20	11 calend	lar year, or tax	year begin	ning Oct	1	, 2011	, and endin	g Sep	30		,2012		
В	Check if appl	cable	C Name of orga	nization Adv	vanced Te	eaching	Concept	s, Inc.		D Employ	er Ident	ification Number		
	Address	change	Doing Busines	s As		_				38-3	3130	362		
	Name ch	nange	Number and s	treet (or PO b	oox if mail is not o	lelivered to stre	et addr)	Room/s	uite	te E Telephone number				
	Initial re	turn	PO Box 15	58				į		(248) 486-5368				
	Termina	ted	City, town or	country			State	ZIP code + 4						
	Amende	d return	South Ly	on			MI	48178-	0158	G Gross r	eceipts	\$2,283,332.		
	Applicat	ion pending	F Name and ad-		al officer					a group retur			X No	
			Michael Fiel	ds 40714 R	eisa Lane #20	4 Cantor	n M	I 48188		affiliates incl		Yes	☐ No	
ī	Tax-exemp		X 501(c)(3)	501(c) (nsert no)	4947(a)(1) o	r 527	IT INO,	attach a list	(see ins	structions)		
3	Website	: N/	A						H(c) Group	exemption nu	ımber 🏲	-		
K	Form of or	ganization	X Corporation	Trust	Association	Other ►	L	Year of Format	on 1993	3 M s	State of I	legal domicile MI		
Pa	rt I S	ummar	У											
			oe the organiza	ation's miss	ion or most s	gnificant ac	tivities: C	ARE FOR	CHALL	ENGED	ADUI	LTS		
ø					- 									
and					- 					_ _				
Governance								. -						
9	2 Check this box ► if the organization discontinued its operations or disposed of more the solution of voting members of the governing body (Part VI, line 1a).											ets		
ø			ting members dependent voti	•		•	•	16)	• •	• • • •	3 4		4	
ee			of individuals							• • • • • •	5		110	
Activities &			of volunteers								6		110	
Ac			d business rev								7a		0.	
	ſ		business taxa		•						7b			
									Р	rior Year		Current Ye	ar	
	8 Con	tributions	and grants (Pa	art VIII, line	1h)						64.		110.	
	L.		ice revenue (P						2	,417,3		2,280,		
Revenue	10 Inve	stment in	come (Part VII	I, column (/	4), lines 3, 4,	and 7d) .					00.		0.	
ď	11 Othe	er revenue	e (Part VIII, co	lumn (A), lii	nes 5, 6d, 8c,	9c, 10c, ar	nd 11e)							
			- add lines 8					ne 12)	. 2	<u>,426,8</u>	40.	2,283,	<u>332.</u>	
			mılar amounts					•	·					
			to or for meml			•	• • • • •							
ø		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)								2,226,761. 1,99			<u>363.</u>	
:ec	16a Prof	essional t	undraising fee	Sept VE	ediumn (A), li	ne 11e)								
Ехрепэеэ	b Tota	l fundrais	ing expenses	(Part IX, col	umn (D) ine	25) ►		0.						
û	17 Othe	er expens	es Bart IX/89	lumn (A) nmul	nes 11a0 d.	11f-24e).				320,3	90.	298,	783.	
	18 Tota	l expense	s Add lines 1	3-17 (must	equal Part IX	column (A), line 25)		2	,547,1		2,292,		
			expenses Su							-120,3			814.	
88				DEN, I						g of Curren		End of Yea		
A C	20 Tota	l assets (Part X, line 16)	<u> </u>					562,9			191.	
Net Assets or Fund Balances	21 Tota	l liabilitie:	s (Part X, line	26)						131,0		104,		
25	22 Net	assets or	fund balances	. Subtract li	ne 21 from lir	ne 20				431,8	69.	423,	056.	
Pa	HII S		e Block						<u> </u>		<u> </u>			
				xamined this re	turn_ including_ac	companying sc	hedules and stat	tements, and to	the best of n	v knowledge	and be	lief, it is true, correct,	and	
coffit	olete. Declara	tion of prepa	rer (other than offic	er) s based or	al information o	f which prepare	er has any knowl	ledge.				/		
2	5		STM	1 0	wh					5/	14/	13		
Sic	ín l	Signatu	re of officer	•	\mathcal{C}				Da	te	_			
Нę	re		nael Fiel						Ĺ					
_[i	<u>ū</u>		print name and titl											
چ		Print/Type p	reparer's name		Preparer's sign	nature		Date		Check	ıf	PTIN		
He Land	id	M McDo	nald) _		05/14/	13	self-employ	⊸ ed	P01407383		
Pre		Firm's name	McDon	ald & C	ompany.	PC PC		, _ , _			·	<u>.5 = .5 = . = . = . = . = . = </u>		
	Control	Firm's addre			e Lake F					Firm's EiN	► 38	-3009522		
		_		field H			MI 4830	02-0462		Phone no.		8) 258-507	0	



Yes

No

Form **990** (2011)

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

Form	n 990 (2011) Advanced Teaching Concepts, Inc.	38- <u>3130</u> 3	52 Page 2
	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission:		
•	CARE FOR CHALLENGED ADULTS		
		-	
2	Did the organization undertake any significant program services during the year which were not listed or	_	v 🗔
	Form 990 or 990-EZ?		Yes 🗓 No
	If 'Yes,' describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program sei	rvices? .	Yes X No
	If 'Yes,' describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service	ices, as measured	by expenses
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the air others, the total expenses, and revenue, if any, for each program service reported.	mount of grants an	d allocations to
	others, the total expenses, and revenue, if any, for each program service reported.		
	- (O-d)	(Davis C	2 200 222 \
48	a (Code:) (Expenses \$ 2,057,071. including grants of \$)		
	FOSTER HOME CARE		
		- 	
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
	h (Ooder	(D	
41	b (Code:) (Expenses \$ including grants of \$)	(Revenue \$	
	<u> </u>		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
			
40	c (Code:) (Expenses \$including grants of \$)	(Revenue \$)
	Troidung grants of Y	(,.oronae y	
	~		
40	d Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$	\$)
46	e Total program service expenses ► 2,057,071.		

			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 (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_		Х
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		Х
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 98-197 If 'Yes,' complete Schedule C, Part III	5		Х
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		х_
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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		Х
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		Х
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.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	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		Х
	c 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	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.	11 e		X
	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		х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	<u>x</u>	
	b 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
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
1	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	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		х
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		х
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		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		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H			Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	L	<u></u>

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Form 990 (2011) Advanced Teaching Concepts, Inc.

Part IV: Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	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		Х
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
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and 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		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	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		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
;	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Χ
İ	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
,	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I.	31		Х
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		Х
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		Х
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		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
1	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		Х
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 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

38-3130362 Page 5 Form 990 (2011) Advanced Teaching Concepts, Inc. 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 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 b **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c Х (gambling) winnings to prize winners? . 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 110.kwi t 2b Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) 3a Х 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 4a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Х **b** 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 Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? ... 5b Х c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? Χ 6a . . . b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were 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 and Х services provided to the payor? 7 a b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с .32 d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f Х g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? **7**g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7h 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? ... 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a Х **b** Did the organization make a distribution to a donor, donor advisor, or related person? Х 9 b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a 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: 11 a b Gross income from other sources (Do not net amounts due or paid to other sources 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | 12b 13 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.

13b

b Enter the amount of reserves the organization is required to maintain by the states in

14a Did the organization receive any payments for indoor tanning services during the tax year?

which the organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

Form 990 (2011)

BAA

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. X Check if Schedule O contains a response to any question in this Part VI.... Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year ... If there are material differences in voting rights among members **9**0. 49-20 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 200 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Χ of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 5 Х Did the organization become aware during the year of a significant diversion of the organization's assets? . Х Did the organization have members or stockholders? 6 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? Х 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b Х 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Х 10a Did the organization have local chapters, branches, or affiliates? 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 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a Х 高等。 **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 12a Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 13 Did the organization have a written whistleblower policy? 13 Х 14 Did the organization have a written document retention and destruction policy? 14 Χ Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official . . . 15a Х **b** Other officers of key employees of the organization . . 15b Х 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 Х **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Michigan ____ 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 Upon request Own website Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► MICHAEL FIELDS 22170 PONTIAC TRAIL, SOUTH LY SOUTH LYON MI 48178 (248) 486-5368

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Form 990 (2011)	Advanced	Teaching	Concepts,	Inc.

38-3130362

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee											
(A) Name and title	(B) Average hours per week	·	(C) Position do not check more th unless person is bottl and a director/tr			on e than one box, both an officer		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation	
	(describe hours for related organiza- tions in Schedule O)	andividual traistee or director	institutional frustee	Office	Key employee	Higl est compansated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
_(1) MICHAEL FIELDSPRESIDENT	40.00	х		х	x	Х		52,150.	0.1	4,672.	
(2) THOMAS GONDEK VP & SECY	0.00	х		х				0.	0.	0.	
(3) STEVE FOX TREASURER				х				0.	0.	0.	
(4) JACK CAIN BOARD CHAIR				Х				0.	0.1	0.	
(5)											
<u>(9)</u>											
(10)								•			
<u>(11)</u>											
(12)											
(13)											
(14)				 -	-						
			<u> </u>				L	<u> </u>			

Part VII Section A. Officers, Directors, Trusto	ees, r	\ey [EM		ye C)	es,	anc	nignest Com	pensateu Em	pioyees (cont)
(A) Name and title	(B) Average hours per	box	Position (do not check more to box, unless person is officer and a director			ıs botl	h an	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	week (describ e hours for related organi- zations in Sch O)	Individual trustee or director	Inshtutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(15)										
(16)										
(12)										
(18)		İ								
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total c Total from continuation sheets to Part VII, Section A				· ·	· ·		>	52,150.	0	
d Total (add lines 1b and 1c)				abo	ve) \	who	rece	52,150. erved more than \$1	00,000 of reporta	<u> </u>
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such inc. 4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater this such individual	dividua ortable an \$15	соп 0,00	npen 0? /:	nsatı f 'Ye	on a	ind c omp	thei lete	r compensation from Schedule J for	m	Yes No. 3 X 4 4 X 5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensate	d inder	end	ent o	cont	ract	ors t	hat	received more tha	n \$100,000 of	
compensation from the organization. Report compens	sation	for t	ne c	alen	dar	year	enc	ding with or within	the organization's	(C)
Name and business address	5	_						Description		Compensation
					_		_			
2 Total number of independent contractors (including b \$100,000 in compensation from the organization ►	out not	lımıt	ed to	o the	ose	iste	d ab	ove) who received	more than	

Pa	art:viii Statement of Revenue					
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S, GIFTS, GRANTS WILAR AMOUNTS	the boundary of the boundary o					
E CONTRIBUTIONS, AND OTHER SIM	f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in Ins 1a-1f: \$ h Total. Add lines 1a-1f	3,110.	3,110.			
PROGRAM SERVICE REVENUE	2a	Business Code				25000 Banda Sa 1996
PROGR	f All other program service revenue g Total. Add lines 2a-2f	· · · •	2,280,222. 2,280,222.	2,280,222.	0.	0.
	3 Investment income (including dividends, in other similar amounts) 4 Income from investment of tax-exempt bon 5 Royalties					
	6a Gross rents	(ii) Personal				
	d Net rental income or (loss)	▶				
	7a Gross amount from sales of assets other than inventory	0.				
	and sales expenses c Gain or (loss)	0.				
NUE	d Net gain or (loss)		0.	0.	0.	0.
OTHER REVE	of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b					
٥	c Net income or (loss) from fundraising event	ts ▶				
	9a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b					
	c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances					
	b Less: cost of goods sold b					
	c Net income or (loss) from sales of inventor Miscellaneous Revenue	Business Code				NT #MEAST
	d All other revenue	>		manufacture of the second seco	C. Consultation	
	12 Total revenue. See instructions		2,283,332.	2.280.222	0	0

Part IX Statement of Functional Expenses

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

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

	Check if Schedule O contains a response to any question in this Part IX										
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				a fine 1-						
2	Grants and other assistance to individuals in the United States. See Part IV, line 22										
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.										
4					Adam.						
5	Compensation of current officers, directors, trustees, and key employees	52,150.	0.	52,150.	0.						
- 6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		-		-						
7	-	1,608,671.	1,495,833.	112,838.	0.						
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)										
9	Other employee benefits	177,101.	162,640.	14,461.	0.						
10	Payroll taxes	155,441.	140,117.		0.						
11	Fees for services (non-employees).										
	a Management										
	b Legal	· · · · · · · · · · · · · · · · · · ·									
	c Accounting	13,500.	0.	_13,500.	0.						
	d Lobbying										
	e Professional fundraising services See Part IV, line 17			100 100 100 100 100 100 100 100 100 100							
	Investment management fees										
	g Other										
12	Advertising and promotion										
13	Office expenses	12,747.	4,251.	8,496.	0.						
14	Information technology		<u> </u>								
15	Royalties										
16	Occupancy	90,166.	89,756.		0.						
17	Travel	53,776.	42,089.	11,687.	0.						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials										
19	Conferences, conventions, and meetings										
20	Interest	3,616.	3,616.	0.	0.						
21	•										
22	Depreciation, depletion, and amortization .	22,210.	20,153.	2,057.	0.						
23	Insurance	31,459.	27,307.	4,152.	0.						
24	covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10%			And the second							
	of line 25, column (A) amount, list line 24e expenses on Schedule O.)				建设设置等						
	EQUIPMENT	3,997.	3,997.	0.	0.						
	RESIDENT, Consumable supplies	40,147.	40,147.	0.	0.						
	VEHICLE, Repairs & maintenance	13,432.	13,432.	0.	0.						
	RESIDENT, Food	9,660.	9,660.	0.	0.						
	e All other expenses	4,073.	4,073.	0.	0.						
25	Total functional expenses. Add lines 1 through 24e	2,292,146.	2,057,071.	235,075.	0.						
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>	l							

BAA

Part X Balance Sheet (A) Beginning of year (B) End of year 1 285,972. Cash - non-interest-bearing 252,222 2 2 Savings and temporary cash investments . . . 3 3 Pledges and grants receivable, net Accounts receivable, net . 4 193,064 4 149.557. Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 17, 5 975 16,175 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 organizations (see instructions) ... 7 Notes and loans receivable, net 8 8 Prepaid expenses and deferred charges ... 13,975 9 11,983. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 251,583 **b** Less: accumulated depreciation 10Ы 10 c 188,079 85,715 63,504. Investments - publicly traded securities . . . 11 Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11. 13 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . 562,951 16 527,191. 63,783. 17 Accounts payable and accrued expenses . . . 17 59,139. 18 Grants payable 18 19 Deferred revenue 0. 0 19 20 Tax-exempt bond liabilities . . 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D . . 21 Pavables to current and former officers, directors, trustees, key employees 22 highest compensated employees, and disqualified persons. Complete Part II 22 23 Secured mortgages and notes payable to unrelated third parties 67,299 44,996. 23 24 Unsecured notes and loans payable to unrelated third parties 24 0. 0 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 25 25 26 Total liabilities. Add lines 17 through 25 . . 131,082 26 104 Organizations that follow SFAS 117, check here ► and complete lines 27 through 29 and lines 33 and 34. Unrestricted net assets 27 27 28 Temporarily restricted net assets 28 Permanently restricted net assets . . 29 P X and complete Organizations that do not follow SFAS 117, check here lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 431,869 32 423,056. Total net assets or fund balances . . 33 431,869. 33 423,056. Total liabilities and net assets/fund balances 562,951 34 527,191.

Form 990 (2011)

Form 990 (2011) Advanced Teaching Concepts, Inc.	38-3130362	Page 12
Part XI Reconciliation of Net Assets	-	
Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<u></u>
1 Total revenue (must equal Part VIII, column (A), line 12)	1	2,283,332.
2 Total expenses (must equal Part IX, column (A), line 25)	. 2	2,292,146.
3 Revenue less expenses. Subtract line 2 from line 1	3	-8,814.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	431,869.
5 Other changes in net assets or fund balances (explain in Schedule O)	. 5	1.
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	423,056.
Part XII Financial Statements and Reporting		
Check if Schedule O contains a response to any question in this Part XII	· · · · · · · · · · · · · · · · · · ·	
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? b Were the organization's financial statements audited by an independent accountant? c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis		Yes No 2a X 2b X 2c X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	he Single	3a X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the ror audits, explain why in Schedule O and describe any steps taken to undergo such audits	•	3b
BAA	_	Form 990 (2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Total

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.

Employer identification number Advanced Teaching Concepts, Inc. 38-3130362 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Δ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii), Enter the hospital's 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.) 5 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) R A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) Х 9 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h. 11 **b** | Type ii c | Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, 1 1 check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) A family member of a person described in (i) above? . . . 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above? 11 q (iii) Provide the following information about the supported organization(s) h (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (v) Did you notify the organization in column (I) of your support? (i) Name of supported organization (i) EIN (iv) Is the (vi) Is the (vii) Amount of support organization in column (I) organized in the U.S.? organization in column (i) listed in your governing document? Yes No Yes No Yes No (A) (B) (C) (D)

F 12. 18 BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 Advanced Teaching Concepts, Inc. 38-3130362 Partill 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						
	ndar year (or fiscal year nning 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.')						
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		o Themselven and the state white	maring while of	Say Sage Hope Same and State & Strate	المراق المالة المحافظة	
Sec	tion B. Total Support	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		Mary 10	-6 - Land 15 - 5 - 5 - 5 - 6 - 6 - 6 - 6 - 6 - 6 -	3 the mechanic	
Cale	ndar year (or fiscal year nning 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 carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activi	ities, etc (see instr	ructions)			12	
	organization, check this box and	stop here			fifth tax year as a	section 501(c)(3)	▶ □
	tion C. Computation of Pu						
	Public support percentage for 20					14	%
	Public support percentage from 2					<u> 15 </u>	<u></u>
	33-1/3% support test — 2011. If the and stop here. The organization of	qualifies as a publ	icly supported org	janization		••• • • •	▶∐
	33-1/3% support test — 2010. If the and stop here. The organization of	qualifies as a publ	icly supported org	anization .			. • 📋
17 a	10%-facts-and-circumstances te or more, and if the organization r the organization meets the 'facts-	neets the tacts-ar	id-circiimstances'	test check this hi	ov and eton here	Evoluin in Part IV	0% how . ► □
	10%-facts-and-circumstances te or more, and if the organization r organization meets the 'facts-and	neets the 'facts-ar I-circumstances' te	id-circumstances' est. The organizati	test, check this bo ion qualifies as a j	ox and stop here. publicly supported	Explain in Part IV organization	how the
18 RAA	Private foundation. If the organiz	ation did not chec	k a box on line 13	3, 16a, 16b, 17a, c		box and see instruc	

Page 3

Part'Ill 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.)

Sec	tion A. Public Support						
	dar year (or fiscal yr 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.')						
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	2 572 630	2 488 020	2 503 103	2 400 779	2 323 720	12,288,360.
3	Gross receipts from activities that are not an unrelated trade or business under section 513	2,312,030.	2,400,025.	2,303,133.	2,400,113.	2,323,123.	12,200,300:
	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					,	
	Total. Add lines 1 through 5 a Amounts included on lines 1, 2, and 3 received from disqualified persons	2,572,630.	2,488,029.	2,503,193.	2,400,779.	2,323,729.	12,288,360.
ŀ	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	2,572,630.	2,488,029.	2,503,193.	2.400.779.	2.323.729.	12,288,360.
	Add lines 7a and 7b						12,288,360.
	Public support (Subtract line 7c from line 6.)	9/3 7/2		-484		r a lo	0.
Sec	tion B. Total Support	Committee of the Commit	party and a second second second second	The state of the s	PROPERTY CONTRACTOR OF THE PROPERTY OF	Contraction of the Section of the Se	<u> </u>
	dar year (or fiscal yr beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6						12,288,360.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0.	0.	0.	0.	2,323,729.	0.
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
	Add lines 10a and 10b	0.	0.	0.	0.		0.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0.	0.	0.	0.		0.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					i	
13	Total support. (Add Ins 9, 10c, 11, and 12.)	2,572,630.	2,488,029.	2,503,193.	2,400,779.	2,323,729.	12,288,360.
14		is for the organiza					
Sec	tion C. Computation of Pu		ercentage				
15	Public support percentage for 20	11 (line 8, column	(f) divided by line	13, column (f))	<u> </u>	15	0.00 %
16	Public support percentage from 2					16	0.00 %
Sec	tion D. Computation of Inv					<u></u>	
17	Investment income percentage for	or 2011 (line 10c,	column (f) dıvıded	by line 13, colum	nn (f))	17	0.00 %
18	Investment income percentage fr	om 2010 Schedule	e A, Part III, line 1	7		18	0.00 %
19 a	33-1/3% support tests — 2011. If is not more than 33-1/3%, check	the organization of this box and stop	did not check the long here. The organia	box on line 14, an zation qualifies as	id line 15 is more a publicly suppor	than 33-1/3%, and ted organization	
t	33-1/3% support tests - 2010. If line 18 is not more than 33-1/3%	the organization of the check this box a	did not check a bo nd stop here. The	ox on line 14 or line organization qua	ie 19a, and line 16 lifies as a publicly	s s more than 33- supported organi	zation 🏲 📘
20	Private foundation. If the organiz	zation did not ched	ck a box on line 14	4, 19a, or 19b, ch	eck this box and s	ee instructions	► X

Schedule A	(Form 990 o	r 990-EZ) 20	<u> 11 Adv</u>	anced	Teaching	Concep	ts, In	c.	38-31	30362	Page 4
Part IV	Suppleme Part II, Iin (See instr	ental Informe 17a or 1 uctions).	mation. (7b; and l	Complete Part III,	e this part line 12. Al	to provide so comple	e the exp ete this p	planations part for any	required by additional	Part II, line information.	10;
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SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047

Open to Public Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

dvanced Teaching Concepts, Inc.	38-3130362
artil Organizations Maintaining Donor Advised Funds or Other Similar Fu	inds or Accounts. Complete if
the organization answered 'Yes' to Form 990, Part IV, line 6.	
(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	
2 Aggregate contributions to (during year)	
3 Aggregate grants from (during year)	
4 Aggregate value at end of year	
5 Did the organization inform all donors and donor advisors in writing that the assets held in dofunds are the organization's property, subject to the organization's exclusive legal control?	onor advised Yes No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant fund used only for charitable purposes and not for the benefit of the donor or donor advisor, or for purpose conferring impermissible private benefit?	ds can be rany other Yes No
artilla Conservation Easements. Complete if the organization answered 'Yes	s' to Form 990, Part IV, line 7.
1 Purpose(s) of conservation easements held by the organization (check all that apply)	
Preservation of land for public use (e.g., recreation or education)	of an historically important land area
	of a certified historic structure
Preservation of open space	
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
•	2c
c Number of conservation easements on a certified historic structure included in (a)	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a histo structure listed in the National Register	. 2d
Number of conservation easements modified, transferred, released, extinguished, or terminal tax year ►	ted by the organization during the
Number of states where property subject to conservation easement is located ▶	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, har and enforcement of the conservation easements it holds?	
 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ease 	ements during the year
Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easemen ► \$	nts during the year
Does each conservation easement reported on line 2(d) above satisfy the requirements of se 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	ection Yes No
In Part XIV, describe how the organization reports conservation easements in its revenue and include, if applicable, the text of the footnote to the organization's financial statements that disconservation easements.	d expense statement, and balance sheet, and lescribes the organization's accounting for
Organizations Maintaining Collections of Art, Historical Treasures, Complete if the organization answered 'Yes' to Form 990, Part IV, line	or Other Similar Assets. e 8.
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its rever art, historical treasures, or other similar assets held for public exhibition, education, or resea in Part XIV, the text of the footnote to its financial statements that describes these items.	nue statement and balance sheet works of irch in furtherance of public service, provide,
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue historical treasures, or other similar assets held for public exhibition, education, or research following amounts relating to these items:	
	▶\$
(i) Revenues included in Form 990, Part VIII, line 1	
If the organization received or held works of art, historical treasures, or other similar assets f 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	

Schedule D (Form 990) 2011 Advan	iced Teacl	hing C	oncepts,	Inc			38-313			Page 2
Part III Organizations Maintai	ining Collec	ctions c	of Art, Histo	orical	Treasures, o	r Other	Similar Ass	ets (c	<u>ontinu</u>	<u>ed)</u>
3 Using the organization's acquisition items (check all that apply):	on, accession,	and othe	r records, che	ck any	of the following	that are a	a significant use	of its c	ollectio	n
a Public exhibition			d Loan	or excl	nange programs					
b Scholarly research			e Other							
c Preservation for future genera	ations									
4 Provide a description of the organ Part XIV.				-	_			ın		
5 During the year, did the organizat assets to be sold to raise funds ra								Yes		No
Part IV Escrow and Custodia	l Arrangem	ents. C	omplete if	the o	rganızatıon ar	nswered	i 'Yes' to For	m 990), Parl	ιIV,
line 9, or reported an	amount on		90, Part X,	iirie a	<u> </u>					
1a Is the organization an agent, trust included on Form 990, Part X?	tee, custodian,	or other	intermediary f	for cor	tributions or othe	er assets	not	Yes		No
b If 'Yes,' explain the arrangement	ın Part XIV and	d complet	te the followin	g table	: :					
						ļ	<u> </u>	Amoun	t	
5					••	. 10				
d Additions during the year						10				
e Distributions during the year						10				
f Ending balance						. 11	<u> </u>			
2a Did the organization include an ar		1 990, Pa	rt X, line 21?					Yes	L	_] No
b If 'Yes,' explain the arrangement					3 1 E	000	5 (1)7 (10		
Part V Endowment Funds. Co					····				<u> </u>	
1 a Danimura of completeness	(a) Current y	/ear	(b) Prior yea	<u>r </u>	(c) Two years bad	ck (d)	Three years back	(e)	Four year	s back
1 a Beginning of year balance.					- ,			STREET STREET		- American Constitution
b Contributions				-+				Parities de la constitue de la	1932	
c Net investment earnings, gains, and losses					· · · · · · · · · · · · · · · · · · ·			440		
d Grants or scholarships								Anna-Cas	12. Mar. 1	
Other expenditures for facilities and programs								3035		
f Administrative expenses								\$2.5		1973/27 ·
g End of year balance								1940		
2 Provide the estimated percentage		year end	l balance (line	1g, c	olumn (a)) held a	ıs:				
a Board designated or quasi-endow	ment -		—, *							
b Permanent endowment ►	 *									
c Temporarily restricted endowmen			<u>ሄ</u>							
The percentages in lines 2a, 2b, a		•								
3a Are there endowment funds not in organization by:	the possession	on of the	organization tl	hat are	held and admin	stered fo	r the	Г	Yes	No
(i) unrelated organizations .						•		. 3a(i)		
(ii) related organizations								3a(ii)		
b If 'Yes' to 3a(II), are the related or								3b		<u> </u>
4 Describe in Part XIV the intended										
Part VI Land, Buildings, and I	<u>Equipment.</u>	See Fo	rm 990, Pa	art X,	line 10.					
Description of property	(r other basis estment)		Cost or other asis (other)		ccumulated preciation	(d) [Book va	alue
1a Land						841.73				
b Buildings	· · · ·					<u> </u>				
c Leasehold improvements	-					ļ				
d Equipment			251,583.			<u> </u>	188,079.		63	<u>,504.</u>
e Other						L			· · · · · ·	
Total. Add lines 1a through 1e. (Column	n (d) must equ	al Form 9	990, Part X, co	olumn	(B), line 10(c).)	<u> </u>	<u> </u> ►1			,504.
BAA							Sched	lule D (F	Form 99	90) 2011

2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

38-3130362

Page 3

Sche	dule D (Form 990) 2011 Advanced Teaching Concepts, Inc.	38-3130362	Page 4
	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	2	,283,332.
	•		,292,146.
2	Total expenses (Form 990, Part IX, column (A), line 25)		
3	Excess or (deficit) for the year. Subtract line 2 from line 1	• • • • • • • • • • • • • • • • • • • •	-8,814.
4	Net unrealized gains (losses) on investments	·	
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments	· · · · · · · · · · · · · · · · · · ·	
8	Other (Describe in Part XIV.)		
9	Total adjustments (net). Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		-8,814.
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return	
1	Total revenue, gains, and other support per audited financial statements		,283,332.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	5-5-7-5	
	Net unrealized gains on investments	62 64	
	Donated services and use of facilities		
	Recoveries of prior year grants 2c		
	Other (Describe in Part XIV.) 2d		
	· · · · · · · · · · · · · · · · · · ·		
_	Add lines 2a through 2d	·	
3	Subtract line 2e from line 1	3 2	,283,332.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b		
k	Other (Describe in Part XIV.)		
	: Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 2	,283,332.
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return	
1	Total expenses and losses per audited financial statements	1 2	,292,146.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	- A - A - A - A - A - A - A - A - A - A	
Ŀ	Prior year adjustments		
c	Other losses		
	Other (Describe in Part XIV.)		
	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1		,292,146.
-	Amounts included on Form 990, Part IX, line 25, but not on line 1:	. 3	,232,140.
	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV) 4b		
	Add lines 4a and 4b	4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		,292,146.
	EXIV Supplemental Information	·· - · J 2	,232,140.
Part	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; 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 compadditional information.	t IV, lines 1b and 2b lete this part to prov	nde
- - -			

chedule b (Form 990) 2011 Advanced Teaching Concepts, Inc.	38-3130362	Page 3
PartXIV Supplemental Information (continued)		
.v		
		
	- -	_

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047 2011

38-3130362

Department of the Treasury Internal Revenue Service

(7) (8) (9) (10)

Advanced Teaching Concepts, Inc.

Employer identification number

Partitude Excess Benefit Transactions Complete if the organization answere	(sect	ion 50	1(c)(3) and section	501(c)(4) organiza	ations Part \	only). = 40b.			
		1			,	,			(c) Corr	rected?
(a) Name of disqualified person		1	•	(b) Description of transaction				1	Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)				· · · · · · · · · · · · · · · · · · ·						
2 Enter the amount of tax imposed on the org section 4958				sons during the year ur	nder 	► \$				
3 Enter the amount of tax, if any, on line 2, a	bove, r	eimburs	ed by the organization			▶\$				
Part II Loans to and/or From Intere	sted P	erson	S.							
Complete if the organization answere	d 'Yes'	on Form	990, Part IV, line 26 or	Form 990-EZ, Part V, II	ne 3 <u>8a.</u>					
(a) Name of interested person and purpose	(b) Loan the orga	to or from anization?	(c) Original principal amount	(d) Balance due	(e) In de	fault?	(f) App by box comm	oroved ard or ottee?	(g) W agree	ritten ment?
	То	From			Yes	No	Yes	No	Yes	No
(1) Michael Fields Personal		Х	29,375.	16,175.		Х	Х		Х	
(2)										
(3)										
(4)										
(5)										
(6)										
(7)					<u> </u>					L
(8)		ļ								
(9)					1					
(10)	<u></u>		<u> </u>	l	name was co	OMBIGUES A	Mark of the last o	Sicilia de Carrela de		, - % 5
Total	<u> </u>	· · · ·	<u></u>	16,175.					Bills de	
Rartill Grants or Assistance Benefi Complete if the organization answere										
(a) Name of interested person	(b) Relation	ship between interested person the organization	and (c) Amount a	and typ	oe of as	sistance	e	
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										

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

Schedule L (Form 990 or 990-EZ) 2011

Schedule	e L (Form 990 or 990-EZ) 2011 Advan	ced Teaching Co	oncepts, Inc.	38-3130362	F	age 2	
.Part [∤] IV	Part IV Business Transactions Involving Interested Persons.						
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.						
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction		aring of zation's nues?	
					Yes	No	
(2)			-			H	
(3)							
(4)							
(5)						<u> </u>	
<u>(6)</u>						├──	
(7) (8)					+-	├	
(9) (9)					+	 	
(10)							
Part.V	Supplemental Information		·	==			
	Complete this part to provide additional	information for response	es to questions on Schedi	ule L (see instructions).			
							
- -							
						-	
							

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization 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.

Advanced Teaching	Concepts, Inc.	38-3130362
	The chief executive officer reviews Form 990 in	n_detail
Pt VI, Line 19	All public documents are available for inspect	ion on request
·		
·		
·		
. = = = = = = = = = = = = = = = = = = =		
· 		

Form 4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return. OMB No 1545-0172

2011

Name(s) shown on return Identifying number Advanced Teaching Concepts, Inc. 38-3130362 Business or activity to which this form relates Part I. Election To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I. 1 Total cost of section 179 property placed in service (see instructions) . . . 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0- 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 5 separately, see instructions 6 (a) Description of property (b) Cost (business use only) Listed property. Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11 11 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 tax year (see instructions) 15 Other depreciation (including ACRS) 16 Partill MACRS Depreciation (Do not include listed property.) (See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2011 11.810 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B -Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (a) Classification of property (C) Basis for depreciation (b) Month and (g) Depreciation (e) (business/investment use year placed in service Recovery period deduction only - see instructions) 19 a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L h Residential rental 27.5 yrs MM S/L property . 27.5 yrs MM S/L i Nonresidential real 39 yrs MM S/L property ... MM S/L Section C — Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20 a Class life S/L b 12-year 12 yrs S/L c 40-year 40 yrs MM S/L Part IVA Summary (See instructions.) Listed property. Enter amount from line 28 . . . 10,400. 21

For assets shown above and placed in service during the current year, enter

22,210

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

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

	columns	(a) through (c)	of Section A,	all of Sec	ction B, a	and Sect	tion C if	appl	ıcable.						
	Section	n A – Deprecia	tion and Othe	er Informa	ation (Ca			ınstru	ctions foi	limits fo	r passer	iger auto	mobiles)	
24	a Do you have evidence	ce to support the bu	ısıness/ınvestme	nt use claim	ed? .	. 2	Yes		No 24b	f 'Yes,' ıs tl	ne evidenci	e written?	X	Yes	No
T)	(a) pe of property (list vehicles first)	(b) Date placed In service	(c) Business/ investment use percentage	(d Cost other I	or	(busine	(e) or depreciess/investr se only)		(f) Recover period	y co	(g) fethod/ nvention	Depr	(h) eciation fuction	Ele sect	(i) ected tion 179 cost
25	Special depreci used more than	depreciation allowance for qualified listed property placed in service during the tax year and ore than 50% in a qualified business use (see instructions)													
_26	Property used r	nore than 50%	ın a qualified	business	use:										
20:	11 Ford van	06/30/11	100.00	32	2,091.		32,0	91.	5.00	SL-	-HY	<u> </u>	5,200		
201	11 Ford E250							5,200	-						
27	Property used 5	0% or less in a	qualified bus	iness use	:	-/ 		·				· · · · · · · · · · · · · · · · · · ·		Tremese.	****
						├						<u> </u>			
			 									ļ		-	
	Add amounts in		25 Abb	07 5-4-		<u> </u>	- 01 -				100	1.	400		
	Add amounts in							-				·	0,400	• ***********	21722
	Add amounts in	column (i), ime	e 26. ⊏nter ne	Section					objeje	·			29	1	
Com to yo	iplete this section our employees, fi	for vehicles us	sed by a sole questions in S	proprietor	, partner	, or othe	er 'more	than	5% own	er,' or rel	ated per	son. If yo	ou provid	led vehi cles.	cles
30	Total business/i during the year commuting mile	(do not include		1	(a) iicle 1	(I Vehi	-	<u> </u>	(c) /ehicle 3		(d) ncle 4	1 *	e) cle 5	-	f) icle 6
31	Total commuting m	•	he year												
32	Total other pers	<u>-</u>	-												
33	Total miles driv	en during the ye	ear. Add												
				Yes	No	Yes	No	Ye	s No	Yes	No	Yes	No	Yes	No
34	Was the vehicle during off-duty l		ersonal use		х		Х								
35	Was the vehicle than 5% owner	used primarily or related perso	by a more on?		х		Х								
36	Is another vehic personal use? .		<u></u>	_ x_		х						<u>.</u>			
		Section	C - Question	s for Em	ployers \	Nho Pro	vide Ve	hicle	s for Use	by Their	Employ	ees/			
Ansv	wer these question owners or related	ns to determine persons (see i	e if you meet nstructions).	an except	ion to co	mpleting	g Section	n B f	or vehicle	s used b	y emplo	yees who	are not	: more t	han
37	Do you maintair by your employe	n a written polic	y statement t	hat prohib	oits all pe	ersonal u	ise of v	ehicle	es, includ	ing comm	nuting,			Yes	No
38	Do you maintair employees? See	a written polic	y statement t	hat prohib	oits perso	onal use	of vehics	cles,	except co	mmuting	, by you	r	Ī		
39	Do you treat all			_			0, 000								
40	Do you provide vehicles, and re	more than five tain the informa	vehicles to you	ur employ	yees, obt	taın ınfoi			your em		bout the	use of t	he 		
41	Do you meet the Note: If your an	e requirements swer to 37, 38,	concerning qu <i>39, 40, or 41</i>	ualified au us 'Yes,' o	itomobile do not co	e demon	stration <i>Section</i>	use? B for	(See ins	tructions ered vehic	.) cles.	• • • • • • • • • • • • • • • • • • • •		Maria c	Special de la la la la la la la la la la la la la
_P a	rt VI∰ Amorti	zation								-		***		74 100 200	
	(a) (b) (c) (d) (e) (f) Description of costs Date amortization begins Amortizable amount Section Period or percentage percentage							on ar							
42	Amortization of	costs that beni	ns durina voii	r 2011 tax	vear (s	ee instri	ictions)	<u>. </u>							
	2	23000 and begin		. 2011 (4)	· your (a	55 11300	, cuoi 13)		<u> </u>		$\neg \Gamma$		Γ		
				T				_	 						
43	Amortization of	f costs that beg	an before you	ır 2011 ta:	x year							43			
44	Total. Add amo	ounts in column	(f). See the	nstruction	s for wh	ere to re	port .	<u></u>		<u>.</u> .		44			

Supporting Statement of:

Form 990 p 12/Part XI, Line 5

	Description	Amount
Rounding		1.
Total		 1.

Supporting Statement of:

Sch. A, page 3/Amounts Included Disqual.-1

Description	Amount
GOVERNMENT AGENCIES, 2007	2,572,630.
Total	2,572,630.

Supporting Statement of:

Sch. A, page 3/Amounts Included Disqual.-2

Description	Amount
GOVERNMENT AGENCIES, 2008	2,488,029.
Total	2,488,029.

Supporting Statement of:

Sch. A, page 3/Amounts Included Disqual.-3

Description	Amount 2,503,193.	
GOVERNMENT AGENCIES, 2009		
Total	<u>2,503,193.</u>	

Supporting Statement of:

Sch. A, page 3/Amounts Included Disqual.-4

Description	Amount
GOVERNMENT AGENCIES, 2010	2,400,779.

Total

2,400,779.

Advanced	Teaching	Concepts.	Inc.
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38-31303621

2

Supporting Statement of:

Sch. A, page 3/Amounts Included Disqual.-5

Description	Amount 2,323,729.	
GOVERNMENT AGENCIES, 2011		
Total	2,323,729.	