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4711 11/13/2013 1.46 PM Form **990**

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 **2012**

Open to Public Inspection

A Fort	he 2012 calendar year, or tax year beginning $07/01/12$, and ending $06/30$	/13		
B Check i	• • • • • • • • • • • • • • • • • • • •		D Emplo	yer identification number
Address	s change THE SAGE SCHOOL, INC.		↓	
Name o	hange Doing Business As	- 	+	-0273042
Initial re	Number and street (or P O box if mail is not delivered to street address)	Room/suite		none number
	P.O. BOX 30	<u> </u>	208	3-788-0120
Termina				
Amendo	ed return ID 83333-0030	· ;	G Gross rec	eipts\$ 741,27
Applica	tion pending F Name and address of principal officer	H(a) Is this a	aroun return for	affiliates? Yes X
	HENRY DE FOREST WEEKES		,	
	PO BOX 30	H(b) Are all a		
	HAILEY ID 83333	l If "N	o," attach a list	(see instructions)
I Tax-ex	rempt status X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527	_		
J Websi	·	H(c) Group e		
	forganization X Corporation Trust Association Other L	Year of formation 2	2009	M State of legal domicile I
Part I	Summary			
1	Briefly describe the organization's mission or most significant activities			
စ္က	SEE SCHEDULE O			
i i				
Ĕ				
Activities & Governance 9 9 9 8 8 7	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than	25% of its net as	sets	
ت مع 3	Number of voting members of the governing body (Part VI, line 1a)	20 /0 0/ 113 /101 43	3	8
80 4	Number of independent voting members of the governing body (Part VI, line 1b)		4	2
. <u>‡</u> <u>€</u>				12
	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	20
	Total number of volunteers (estimate if necessary)		6	
	a Total unrelated business revenue from Part VIII, column (C), line 12		7a	<u> </u>
<u></u>	Net unrelated business taxable income from Form 990-T, line 34		7b	
	0.11.1	Prior Ye		Current Year
9 8	Contributions and grants (Part VIII, line 1h)		5,912	159,59
ē 9	Program service revenue (Part VIII, line 2g)	49	1,350	565,07
Revenue	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		33	4
¹¹ 11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,870	16,56
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	73	1,165	741,27
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	375		
14	Benefits paid to or for members (Part IX, column (A), line 4)			
<i>ι</i> 15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	37	1,754	515,29
sesued 16	a Professional fundraising fees (Part IX, column (A), line 11e)		1,908	
ē	Total fundraising expenses (Part IX, column (D), line 25) ► 47,146			
.51	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	20	4,506	272,79
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	_	8,543	788,08
19			2,622	-46,80
19	Trevende less expenses oubtract line to norm line 12	Beginning of Cu		End of Year
Sets alauc 20	Total assets (Part X, line 16)		6,033	498,92
Sa Sa St	Total liabilities (Part V line 36)		1,643	220,08
ᅓᅙ	Net assets or fund balances Subtract line 21 from line 20		4,390	278,84
원 22 Part I		<u> 18/1 - </u>	1,550	
		nalis India ha h		aviladas and balas it is
true co	enalties of perjury, I declare that I have examined this return, including accompanying schedules and statel rect, and complete Declaration of prepare (other than officer) is based on all information of which prepare	shas any knowled	esioimy kn ae	owieuge and belief, it is
	Same City (1)	1	1	
true, cor	1/01/01/01	_ 	D-1-	
Sign	Signatures officer	2	Date	11 15 13
Here	DE LINUTY TOTAL TILL TRATTURE			<u> 11 15 13 </u>
′	Type or print flame and title			
	Print/Type preparer's name	Date	Check	ıf PTIN
Paid	LINDA P. CHAMBERS MUCH WOUNTER	11/13	1/13 self-em	ployed P00157522
Preparer			Firm's EIN ▶	84-0437743
Use Only				
-	Firm's address HAILEY, ID 83333-0909	١,	Phone no	208-788-959
May the I	RS discuss this return with the preparer shown above? (see instructions)		.10.10	X Yes No
	work Reduction Act Notice, see the separate instructions.			Form 990 (201
DAA	Transitional motification, and the apparate mattheticine.			Form 330 (201

orm 990 (2012) THE SAGE SCHO	OL, INC.	27-0273042	Page 2
•	Service Accomplishments		
	ontains a response to any que	estion in this Part III	X
1 Briefly describe the organization's miss SEE SCHEDULE O	ion		
			
2 Did the organization undertake any sign	nificant program services during the	year which were not listed on the	
prior Form 990 or 990-EZ?			Yes X No
If "Yes," describe these new services of 3 Did the organization cease conducting,		ut conducts, any program	
services?	or make significant changes in now	The conductor, any program	Yes X No
If "Yes," describe these changes on So	hedule O		
		ts three largest program services, as measured	-
		port the amount of grants and allocations to oth	ers,
the total expenses, and revenue, if any	, for each program service reported		
4a (Code) (Expenses \$	433,749 including gran	ts of \$) (Revenue	\$ 553,612
		LLENCE AND THE DEVELOPM ND HUMANITARIAN AND ECO	
4b (Code) (Expenses \$	14,087 including gran	1(0	\$ 11,460
THE GREENHOUSE - THRO	OUGH WHAT WE GROW,	ts of \$ WE TEACH OUR STUDENTS JLTURE OF FOOD, AND ECON	ABOUT ECOLOGY,
As (Code) (Farances f	60,977 including gran	46 C	
STUDENTS INTO THE FIRTURE. THIS IS THE POEXPERIENCE THEIR LOCA	M - THIS PORTION OF ELD, NEAR AND FAR, ORTION OF OUR PROG AL AND REGIONAL CO E SHORT OUTINGS TO	OF THE SCHOOL IS DESIGNED AND FOR SHORT AND LONG FRAM DESIGNED FOR STUDEN OMMUNITIES, AS WELL AS TO O OUR LOCAL ART CENTER A	ED TO TAKE F PERIODS OF NTS TO THE BROADER
Ad Other program applicate (Passarha in C	chedule ()		
4d Other program services (Describe in S (Expenses \$	including grants of \$) (Revenue \$)
4e Total program service expenses ▶	508,813	/ (Ivevenue #	
<u> </u>			000

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	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			37
	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)			v
_	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 98-197 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		-	
٠	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		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, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or		1	
	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		1	
	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	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	11d	X	37
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			x
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		
120	Schedule D, Parts XI and XII	12a	İ	x
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a		
b	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	ŀ		
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization 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	İ		
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u>X</u>
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		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		İ	
	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		

Part IV Checklist of Required Schedules (continue

	1		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization	ł		
	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		
С	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		
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, highest compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial 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		l	
	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		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u>_X</u>
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		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,		ĺ	
	or IV, and Part V, line 1	34		<u> </u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a		i	
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
86	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	_		v
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	-	<u> </u>
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,			v
	Part VI	37		<u> </u>
88	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	_ 38	X n 990	1,00:0:
		FOR	n タラい	(2012)

Pa	áut A	Statements Regarding Other IRS Fillings and Tax Compliance					
		* Check if Schedule O contains a response to any question in this Part V				Yes	No
1a	Enter th	e number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	5		res	NO
b		e number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
С		organization comply with backup withholding rules for reportable payments to vendors and		•			
		ole gaming (gambling) winnings to prize winners?			1c		Х
2a	Enter th	e number of employees reported on Form W-3, Transmittal of Wage and Tax	1	1			
	Stateme	ents, filed for the calendar year ending with or within the year covered by this return	2a	12			
b	If at leas	st one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	X	
	Note. If	the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)				
3a	Did the	organization have unrelated business gross income of \$1,000 or more during the year?			3a	<u> </u>	X
b		has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	↓	_
4a		ime during the calendar year, did the organization have an interest in, or a signature or other		-			
		financial account in a foreign country (such as a bank account, securities account, or other fi	nancial				,,
	account	•			4a	┼	X
b		enter the name of the foreign country					
		tructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financia	Accou	ints	-	1	v
5a		e organization a party to a prohibited tax shelter transaction at any time during the tax year?	al.aa2		5a	\vdash	X
b	=	taxable party notify the organization that it was or is a party to a prohibited tax shelter transa to line 5a or 5b, did the organization file Form 8886-T?	Clion		5b 5c	+	├ ^
c 6a		e organization have annual gross receipts that are normally greater than \$100,000, and did t	ho		30		
Va		ation solicit any contributions that were not tax deductible as charitable contributions?			6a		x
b	-	did the organization include with every solicitation an express statement that such contributi	ons or		- Ju		
-		re not tax deductible?			6b		
7	-	rations that may receive deductible contributions under section 170(c).					
а	_	organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods				
		vices provided to the payor?	-		7a	x	
b	If "Yes,"	did the organization notify the donor of the value of the goods or services provided?			7b	X	
С	Did the	organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as				
	required	to file Form 8282?		•	7c	<u> </u>	X
d	If "Yes,"	indicate the number of Forms 8282 filed during the year	7d				
е		organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		ł,	7e	—	X
f		organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f	⊢	X
g		ganization received a contribution of qualified intellectual property, did the organization file Fo			7 <u>g</u>	├	X
h		ganization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz	ation file	e a Form 1098-C	7h_	-	X
8		oring organizations maintaining donor advised funds and section 509(a)(3) supporting					
	•	ations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					ŀ
9	_	ation, have excess business holdings at any time during the year?			8		
э a	•	oring organizations maintaining donor advised funds. organization make any taxable distributions under section 4966?			9a	1	1
b		organization make a distribution to a donor, donor advisor, or related person?			9b		
10		501(c)(7) organizations. Enter			30		\vdash
а		n fees and capital contributions included on Part VIII, line 12	10a		:		
b		eceipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			'	
11		501(c)(12) organizations. Enter				1	
а		ncome from members or shareholders	11a				
b	Gross in	ncome from other sources (Do not net amounts due or paid to other sources		-			
		amounts due or received from them)	11b				
12a	Section	4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	n 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.					<u> </u>
а	is the or	ganization licensed to issue qualified health plans in more than one state?			13a		<u> </u>
		ee the instructions for additional information the organization must report on Schedule O					
b		e amount of reserves the organization is required to maintain by the states in which	, ,	ı			
	•	inization is licensed to issue qualified health plans	13b				
С		e amount of reserves on hand	13c			<u> </u>	
14a		organization receive any payments for indoor tanning services during the tax year?	_		14a	 	X
_ <u>b</u>	ıt "Yes,"	has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	e U		14b	001	
DAA					For	m 99(0 (2012)

Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 8 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 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 2 Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its 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 6 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 X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a X 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a 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 X 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 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 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? X The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization X 15b 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 X with a taxable entity during the year? 16a 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 take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed 17 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 X Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 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 > BECKER, CHAMBERS & CO. PO BOX 909

208-788-9595

ID 83333

HAILEY

•				
orm 990 (2012)	\mathtt{THE}	SAGE	SCHOOL,	INC.

27-0273042

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Part VII	Compensation of Officers	, Directors,	Trustees, Key Employees	, Highest Compensated E	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 organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for	bo off	x, unle	Pos check ess pe nd a c	erson	than one is both an or/trustee)	(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 organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	(W-2/1099-MISC)	(** 27 1033 **********************************	organization and related organizations
(1) HARRY WEEKES									
	60.00					1 1			
EXECUTIVE DIRECTOR	0.00	X					67,200	0	0
(2) SCOTT FULLER		ſ							
	0.50								
DIRECTOR	0.00	X					0	0	0
(3) LISA FISHER		1			ļ				
	3.00	ì							
PRESIDENT	0.00	X		X			0	0	0
(4) BAS VERHEIJEN					1				
	2.50								
VICE PRESIDENT	0.00	X		X			0	0	0
(5) DUNCAN MORTAN									
	2.50								
TREASURER	0.00	X		X			0	0	0
(6) JUDIANNE FULLER									
	2.50								
SECRETARY	0.00	X		X			0	0	0
(7) ELIZABETH ANNE	ILMAN								
	1.00								
DIRECTOR	0.00	X				.	0	0	0
(8) LISA GRIFFITH									
	1.00								
DIRECTOR	0.00	X					0	0	0
(9)									
(10)									
(11)		-							
Daa								<u>.</u>	000

Pa	rt Vif Section A. Officers	s, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	ind Highest Compensated	Employees (continued)				
	(A) Name and title	(B) (C) Average hours per (do not check more than on box, unless person is both a officer and a director/trustee hours for							(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation			
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	6	from t organiza and rela rganiza	ation ated	
(12)														_
(13)					-									
(14)														
(15)						_								
(16)													•	
(17)														
														_
(18)									:					
(19)														
1b c	Sub-total Total from continuation shee	ets to Part VII, S	ecti	on A	\		li	>	67,200					
<u>d</u> _2	Total (add lines 1b and 1c) Total number of individuals (in reportable compensation from				thos	e list	ted a	bove	e) who received more than	\$100,000 in				_
3	Did the organization list any fo	rmer officer, dire	ector	, or t					oyee, or highest compensa	ted		\exists	Yes	No
4	employee on line 1a? If "Yes," For any individual listed on line organization and related organ	e 1a, is the sum	of re	porta	able	com	pens	atio				3	:	x
5	individual Did any person listed on line 1 for services rendered to the or	ganization? If "Y								ındıvıdual		5		X
Secti 1	ion B. Independent Contracto Complete this table for your fix compensation from the organi	e highest compe	ensa	ted i	ndep	end	ent c	ontr	actors that received more t	han \$100,000 of			_	
		(A) business address		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						(B) Jon of services		Cor	(C) npensal	tion
														<u>-</u> _
2	Total number of independent of								se listed above) who					
DAA	received more than \$100,000								·	0		Form	990	(2012)

Total Acid lines 2 = 2 Total Acid lines 2 = 2	Pa	irį V	/III Stateı Check	ment of Reve	e <mark>nue</mark> O conta	ains a	response	to any question in	this Part VIII		
Federated campagins 1a						_		(A)	(B) Related or exempt function	Unrelated business	Revenue excluded from tax under sections
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	ts	1a	Federated car	mpaigns	1a				10701.00		312, 313, 01 314
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	Srai	b			1b						
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	Am.	c	Fundraising e	vents	1c	·				1	
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	ar Jair	ď			1d	•					
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	E,S	e	Government grants	(contributions)	1e		15,853				
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	tior Sr. S	f	All other contributio	ns, gifts, grants,							
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	ĘĘ,		and similar amount	s not included above	1f						
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	FO P	g	Noncash contribution	ons included in lines 1a	-1f \$		9,349				
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	<u>ರ ೯</u>	h	Total. Add line	es 1a-1f			•	159,597			
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	Jue						Busn Code				
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	e e	2a	TUITION								
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	а Ж	ь	GREENHO	USE SALES				11,460	11,460		
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	Σ̈	С									
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	Se	d									
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	ш	е									
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real	ō.	f	All other progr	ram service reve	nue						<u> </u>
and other similar amounts) 4 Income from investment of fax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6a Gross rents (ii) Real (iii) Personal 6b Less mail exps (iii) Securities (iii) Securities (iii) Securities (iiii) Securities (iiii) Securities (iiii) Other sales of dassets other but income or (foss) 4 Net rental in core or (foss) (iv) Securities (iv) Other sales of dassets other but income or (foss) 5 Royalties (iv) Other sales of dassets other but income or (foss) (iv) Securities (iv) Other sales of dassets other but income or (foss) (iv) Net garn or (g						565,072			·
Income from investment of fax-exempt bond proceeds Society S		3		, .	dividend	s, intere	st,				
Social Research Color Research Col				•			>	43			43
(i) Personal (ii) Personal (iii) Personal Perso		4		nvestment of tax	-exempt	bond p	roceeds ►				
See Service See See See See See See See See See		5	Royalties								
b Less rental exps c Rental inc or (loss) d Net rental income or (loss) Gross amount from (i) Securities (ii) Other as cos amount from (iii) Securities (iii) Other basis desee exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses b c Net income or (loss) from fundraising events c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Bush Code 111, 461 11, 461 5 STUDENT COLLECTIONS C MISCELLANEOUS 643 643 643 643 644 90 90 90 16, 565		_	_	(ı) Real		(II) P	ersonal				
C Rental inc or (loss)		6a									
d Net rental income or (loss) Fragressmount from (i) Securities (ii) Other select of assets of assets other than inventory b Less cost or other basis & sales exps c Gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses b c Net income or (loss) from fundraising events > See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities > Continuous of the control o		b									
a Gross amount from sales of assets other than inventory. b Less cost or other bases & sales exps c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) for contributions reported on line 1c) See Part IV, line 18 a Less direct expenses c Net income or (loss) from fundraising events so result income or (loss) from fundraising events b Less cost or other bases 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 gaming activities 11a SPECIAL EVENTS b STUDENT COLLECTIONS c MISCELLANEOUS d All other revenue e Total. Add lines 11a-11d b 16,565					L						
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Miscellaneous Revenue Busn Code 11a SPECIAL EVENTS 11,461 b STUDENT COLLECTIONS 4,371 c MISCELLANEOUS 643 d All other revenue 90 e Total. Add lines 11a-11d 16,565			-			ntory		Ì			
11a SPECIAL EVENTS 11,461 11,461 b STUDENT COLLECTIONS 4,371 4,371 c MISCELLANEOUS 643 643 d All other revenue 90 90 e Total. Add lines 11a-11d 16,565	Ì		,		o or mive		Busn Code				
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c MISCELLANEOUS 643 643 d All other revenue 90 90 e Total. Add lines 11a−11d 16,565 ■						ŀ					
d All other revenue 90 90 e Total. Add lines 11a–11d ▶ 16,565							-				
e Total. Add lines 11a–11d ► 16,565											
						ı	•				
					ıs		•		581,637	0	43

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) Check if Schedule O contains a response to any question in this Part IX (A) Total expenses (B) Program service (D) Fundraising (C) Do not include amounts reported on lines 6b, Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 425,000 265,375 127,625 32,000 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 48,162 30,073 14,463 3,626 Other employee benefits 42,128 26,305 12,651 $3,17\overline{2}$ Payroll taxes Fees for services (non-employees) Management 1,645 1,645 Legal 11,510 11,510 Accounting Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column 17,986 13,964 4,022 (A) amount, list line 11g expenses on Schedule O) 3,490 41 $3, \overline{449}$ 12 Advertising and promotion 1.471320 1,126 25 13 Office expenses 14 Information technology 15 Royalties 58,456 48,939 9,517 16 Occupancy 8,886 1,854 7,032 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 525 525 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 26,157 26,157 Depreciation, depletion, and amortization 22 13,453 2,650 10,803 23 Insurance 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) 60,977 60,947 30 FIELD TRIPS b SCHOOL MATERIALS 23,259 21,899 1,360 SUPPLIES 14,941 213 10,327 4,401 c PROPERTY TAX 6,717 6,71723,322 10,684 10,076 2,562 e All other expenses 508,813 788,085 232,126 47,146 Total functional expenses. Add lines 1 through 24e 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 ▶ following SOP 98-2 (ASC 958-720) DAA Form 990 (2012)

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 16,290 122,153 Cash-non-interest bearing 147,806 265,572 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 27,642 25,536 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 2,500 3,500 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 164,613 other basis Complete Part VI of Schedule D 10a 52,802 45,932 10b 111,811 10c b Less accumulated depreciation 11 11 Investments—publicly traded securities 12 Investments-other securities See Part IV, line 11 12 13 13 Investments-program-related See Part IV, line 11 Intangible assets 14 14 76,219 15 15 Other assets See Part IV, line 11 498,928 346,033 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 11,643 15,615 Accounts payable and accrued expenses 17 17 18 Grants payable 18 158,500 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 45,972 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 of Schedule D 11,643 26 220,087 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 334,390 278,841 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here 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 32 Retained earnings, endowment, accumulated income, or other funds 334,390 278,841 33 Total net assets or fund balances 346,033 498,928 Total liabilities and net assets/fund balances 34

Form	990 (2012) THE SAGE SCHOOL, INC. 27-0273042			Page 12
Pa	rt XI Reconciliation of Net Assets			
	'Check if Schedule O contains a response to any question in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		11,277
2	Total expenses (must equal Part IX, column (A), line 25)	2	78	<u>38,085</u>
3	Revenue less expenses Subtract line 2 from line 1	3	4	16,808
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	33	34,390
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		_
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-	-8,741
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10	27	78,841
Ρa	rt XII Financial Statements and Reporting			_
	Check if Schedule O contains a response to any question in this Part XII			
				Yes No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		1	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			_
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	

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.

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

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE SAGE SCHOOL, INC

Employer identification number 27-0273042

				2							<u> </u>	<u> </u>			
	art l			Status (All organizations				art)Se	ee ins	tructio	<u>ns</u>				
The	orga			se it is (For lines 1 through 11, o											
1		A church, co	nvention of churches, or ass	ociation of churches described	ın sectio	n 170(b)(1)(A)(i).								
2	X	A school des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3		A hospital or	a cooperative hospital service organization described in section 170(b)(1)(A)(iii).												
4		A medical re	search organization operate	d in conjunction with a hospital	described	l ın sectio	n 170(b)(1)(A)(i	iii). Ent	er the h	ospital's	name) ,		
		city, and stat	е												
5		An organizat	on operated for the benefit	of a college or university owned	or operat	ted by a g	overnm	ental un	ıt descr	ibed in					
			o)(1)(A)(iv). (Complete Part II)												
6			te, or local government or governmental unit described in section 170(b)(1)(A)(v).												
7	H		on that normally receives a substantial part of its support from a governmental unit or from the general public												
•															
8			section 170(b)(1)(A)(vi). (Complete Part II) / trust described in section 170(b)(1)(A)(vi). (Complete Part II)												
9	H	-			•										
9	Ш	_	·	1) more than 33 1/3% of its supp						•	oss				
		-		npt functions—subject to certain	•		•								
			-	nd unrelated business taxable in	•			x) from t	ousines	ses					
			-	0, 1975 See section 509(a)(2)	•		•								
10	H	•		exclusively to test for public safe	•		,								
11		-	•	exclusively for the benefit of, to	•				•						
				ed organizations described in se						section	1				
		509(a)(3). Ch	eck the box that describes t	he type of supporting organizati	on and co	omplete iii	nes 11e	through	11h						
		a Type	I b Type II	c Type III–Function	ally ıntegi	ated	d	Тур	e III–Ne	on-funct	ionally i	ntegra	ted		
е		-	•	anization is not controlled direct	•				•	•					
		other than for	undation managers and othe	er than one or more publicly sup	ported or	ganızatıor	ns descr	ibed in s	section	509(a)(1)				
		or section 50	9(a)(2)												
f		If the organiz	ation received a written dete	rmination from the IRS that it is	a Type I	Type II,	or Type	III suppo	orting						
		organization,	check this box												
g		Since August	t 17, 2006, has the organiza	tion accepted any gift or contrib	ution fron	n any of th	ne								
_		following per	sons?			•									
				ontrols, either alone or together	with persi	ons descr	ibed in (ii) and					Yes	No	
			w, the governing body of the	=				,				11g(i)		"	
			member of a person describ	• • •								11g(II)		<u> </u>	
		•	•	described in (i) or (ii) above?										 	
h		-	•	** **								11g(iii)		<u> </u>	
<u>n</u>	Nan			he supported organization(s)	(nd la tha		63.53		6	_ 41					
(I		e of supported janization	(II) EIN	(III) Type of organization (described on lines 1–9		organization sted in your		ou notify	organizal	s the ion in col	(VII) A	mount o supp		tary	
				above or IRC section	1 ,,	document?	col (ı)	of your	(ı) organı	zed in the		зарр	J11		
				(see instructions))		r		port?	† — —	S?					
					Yes	No	Yes	No	Yes	No					
(A)															
								+				_			
B)															
					ļ										
(C)								İ							
D)															
												_			
E)														_	
													_	_	
Tota	<u></u>				J				1	<u> </u>					

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

	tion A. Public Support												
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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												
Sec	tion B. Total Support			-	<u>. </u>		-						
Caler	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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				<u> </u>								
12	Gross receipts from related activities, etc	(see instructions)				12							
13	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	ourth, or fifth tax ye	ar as a section 50	1(c)(3)							
	organization, check this box and stop her						•						
Sec	tion C. Computation of Public Su	ipport Percen	tage										
14	Public support percentage for 2012 (line 6	, column (f) divide	d by line 11, colun	nn (f))		14	%_						
15	Public support percentage from 2011 Sch					15							
16a	33 1/3% support test—2012. If the organ	ızatıon dıd not che	ck the box on line	13, and line 14 is	33 1/3% or more, o	check this	. —						
	box and stop here. The organization qual		• •										
b	33 1/3% support test—2011. If the organicheck this box and stop here. The organic			•	15 is 33 1/3% or m	ore,	▶ □						
172	10%-facts-and-circumstances test—201	•		-	Sa or 16b and line	2.1 <i>1</i> ie							
174	10% or more, and if the organization meet	-											
	Part IV how the organization meets the "fa			*									
			11000 1001 1110 01	gamzation qualific	o do a pabiloly cap	portou	▶ □						
b	organization 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line												
_	15 is 10% or more, and if the organization	•											
	Explain in Part IV how the organization me												
	supported organization			2. 3--24.	4		▶ □						
18	Private foundation. If the organization did	d not check a box	on line 13, 16a, 16	6b, 17a, or 17b, ch	eck this box and se	ee	·,						
	instructions			,			▶ □						

Page 3

Schedule A (Form 990 or 990-EZ) 2012 THE SAGE SCHOOL, INC. 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.)

500	tion A. Public Support	quality under the	ile lesis listeu i	below, please c	omplete Fait ii	<u> </u>	
	ndar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	(a) 2000	(b) 2009	(6) 2010	(u) 2011	(e) 2012	(i) Iolai
2	grants *) Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons			_			
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b		_				
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support				·		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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 carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop her	•	st, second, third, fo	ourth, or fifth tax ye	ar as a section 50°	1(c)(3)	
Sec	ction C. Computation of Public Su		tage				
15	Public support percentage for 2012 (line 8			nn (fl)		15	
16	Public support percentage from 2011 Scho			(1))		16	<u>%</u>
	ction D. Computation of Investme						<u>~</u>
17	Investment income percentage for 2012 (I			3, column (f))		17	%
18	Investment income percentage from 2011					18	%
19a	33 1/3% support tests—2012. If the orga			e 14, and line 15 is	more than 33 1/3		
	17 is not more than 33 1/3%, check this be						> \[\]
b	33 1/3% support tests—2011. If the orga						
	line 18 is not more than 33 1/3%, check th	us box and stop h	ere. The organiza	tion qualifies as a j	oublicly supported	organization	>
20	Private foundation. If the organization did	d not check a box	on line 14, 19a, or	19b, check this bo	x and see instruct	ions	▶ 「

Schedule A (Form 990 or 990-EZ) 2012 THE SAGE SCHOOL, INC.

27-0273042

Page 4

Part IV

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10,
Part II, line 17a or 17b, and Part III, line 12 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

OMB No 1545-0047 **2012**

Open to Public Inspection

Name of the organization Employer identification number THE SAGE SCHOOL, INC. 27-0273042 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 \$ b Assets included in Form 990, Part X

Sche	edule D (Form 990) 2012 THE SAGE	SCHOOL, I	NC.		27-02/3042	Page 2
Pŧ	art III Organizations Maintaini	ng Collections o	f Art, Historic	al Treasures,	or Other Similar As	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and other record	ds, check any of t	the following that a	re a significant use of its	-
а	Public exhibition	d 🗌	Loan or exchang	ge programs		
b	Scholarly research	e 🗍	Other			
С	Preservation for future generations					
4	Provide a description of the organization's	collections and explai	n how they furthe	er the organization'	s exempt purpose in Part	
	XIII					
5	During the year, did the organization solicit	or receive donations	of art, historical t	reasures, or other	sımılar	
	assets to be sold to raise funds rather than	to be maintained as	part of the organi	zation's collection?	·	🗌 Yes 🗍 No
Pa	art IV Escrow and Custodial A	rrangements. Co	mplete if the	organization an	swered "Yes" to Forr	n 990, Part IV,
	line 9, or reported an amo	unt on Form 990,	Part X, line 21	1		
1a	Is the organization an agent, trustee, custo	dian or other interme	diary for contribut	ions or other asset	s not	
	included on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part X	III and complete the fo	ollowing table			
						Amount
С	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance				1f	
2a	Did the organization include an amount on	Form 990, Part X, line	e 21?			Yes No
b	If "Yes," explain the arrangement in Part XI	II Check here if the e	explanation has be	een provided in Pa	rt XIII	
Pa	art V Endowment Funds. Com	plete if the organi	zation answei	red "Yes" to Fo	rm 990, Part IV, line	10
		(a) Current year	(b) Prior yea	er (c) Two yea	rs back (d) Three years I	back (e) Four years back
1a	Beginning of year balance		ļ. <u>-</u>			
b	Contributions					
С	Net investment earnings, gains, and					
	losses					
d	Grants or scholarships					
е	Other expenditures for facilities and					
	programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the cu	irrent year end baland	e (line 1g, colum	n (a)) held as		
а	Board designated or quasi-endowment ▶	%		,		
b	Permanent endowment ▶ %)				
С	Temporarily restricted endowment ▶	%				
	The percentages in lines 2a, 2b, and 2c sh	ould equal 100%				
3a	Are there endowment funds not in the poss	session of the organiz	ation that are held	d and administered	I for the	
	organization by	•				Yes No
	(i) unrelated organizations					3a(i)
	(ii) related organizations					3a(ii)
b	If "Yes" to 3a(ii), are the related organization	ons listed as required of	on Schedule R?			3b
4	Describe in Part XIII the intended uses of t	•				<u> </u>
, ,	art VI Land, Buildings, and Equ			C. line 10		
	Description of property	(a) Cost or other	1	ost or other basis	(c) Accumulated	(d) Book value
	,	(investment)	1	(other)	depreciation	
1a	Land					
	Buildings					
	Leasehold improvements			60,609	37,039	23,570
	Equipment			104,004	<u>15,763</u>	
	Other			201,004	20,700	00,241
	I. Add lines 1a through 1e (Column (d) mus	t equal Form 990. Par	t X. column (B) I	ne 10(c))		111,811
			, σσιατιπ (Β), 1	10(0) /		

DAA

Schedule D (Form 990) 2012

Sche	dule D (Form 990) 2012 THE SAGE SCHOOL, INC.		27-027304	2	Page 4
P₽	rt XI Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per Ret	urn	
1	Total revenue, gains, and other support per audited financial statements	-	_	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d		_	2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 }		- 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<u>.</u>		
b	Other (Describe in Part XIII)	4b		1	
С	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 XII Reconciliation of Expenses per Audited Financial Stater	nents With	Expenses per R	etur	<u>n</u>
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d			2e	·· ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·
3	Subtract line 2e from line 1			3	
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 XIII)	4b			
С	Add lines 4a and 4b		L	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Schedule D (Form 990) 2012 THE SAGE SCHOOL, INC.

27-0273042

Page 5

Part XIII Supplemental Information (continued)

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Schools

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

THE SAGE SCHOOL, INC.

Employer identification number 27-0273042

P	art I			r
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	x	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space, use Part II	3	x	
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	x	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
_	If you answered "No" to any of the above, please explain if you need more space, use Part II	70		
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		x
b	Admissions policies?	_5b		х
С	Employment of faculty or administrative staff?	_ 5c		х
d	Scholarships or other financial assistance?	5d		х
е	Educational policies?	5e		X
f	Use of facilities?	5f		x
g	Athletic programs?	5g		х
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II	5h		х
	in you answered into to any or the above, please explain in you need more space, use Fait in			
6~	Does the organization receive any financial aid or accustoned from a governmental access?			v
6a h	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6a 6b		X
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II	0.0		
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	¥	

Schedule E`(Form 990 or 990-EZ) (2012)

THE SAGE SCHOOL, INC.

27-0273042

Page 2

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

4711 11/13/2013 1 46 PM

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization THE SAGE SCHOOL, INC 27-0273042 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (b) Relationship between disqualified person and (d) Corrected? 1 (a) Name of disqualified person (c) Description of transaction Yes No organization (1) (2) (3) (4) (5) (6) Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of interested person (b) Relationship (c) Purpose of (d) Loan to (e) Original (f) Balance due (g) In default? (h) Approved (ı) Written or from the principal amount by board or agreement? with organization org ? To From Yes No Yes No Yes No (9) (10)Total ▶ \$ Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance (a) Name of interested person (b) Relationship between interested person and the organization (1) (2) (3) (4) (5) (6) (7) (8) (9)

Schedule L (Form 990 or 990-EZ) 2012	-			Page
Part IV Business Transactions Invol Complete if the organization answered	ving Interested Persons. 1 "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	(e) Sharing of org revenues? Yes No
(1) LISA GRIFFITH	DIRECTOR	8,500	PAID TUITION	X
(2) ELIZABETH GILMAN	DIRECTOR		PAID TUITION	x
(3) DUNCAN MORTON	TREASURER		PAID TUITION	X
(4) SCOTT FULLER	DIRECTOR		PAID TUITION	x
(5) BAS VERHEIJEN	VICE PRESIDENT		PAID TUITION	x
(6) LEE GILMAN BUILDERS, INC.	SPOUSE OF DIREC	15,000		x
(7)	Broods or Bridge		DOLLDING INCOLCI	
(8)				+ + -
(9)				- -
(10)		-		+
Complete this part to provide additional	ar imornidadir for responses to queetic	and on Concade E (or		
				-
				
<u> </u>				
				-
	- 			

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.

2012 Open to Public Inspection

OMB No 1545-0047

THE SAGE SCHOOL, INC.

Employer identification number 27-0273042

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

THE SAGE SCHOOL IS A SMALL, INDEPENDENT SCHOOL LOCATED IN HAILEY, IDAHO.

WE ARE DEDICATED TO ADOLESCENTS. THE TRANSITION TO ADULTHOOD IS A CRITICAL

TIME IN DEVELOPING ENGAGED CITIZENS WHO ARE COMFORTABLE IN THE WORLD AND

WITH THEMSELVES, AND WHO STRIVE TO REALIZE THEIR FULL AND POSITIVE HUMAN

POTENTIAL. WE ARE COMMITTED TO EDUCATIONAL EXCELLENCE, TO HIGHLY

PERSONALIZED INSTRUCTION, AND TO CREATING A RESPECTFUL ENVIRONMENT IN WHICH

STUDENTS CAN THRIVE.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

A DRAFT OF THE 990 IS PROVIDED TO EACH BOARD MEMBER ALLOWING THEM

SUFFICIENT TIME TO REVIEW AND COMMENT BEFORE IT IS FILED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
MEMBERS WITH A CONFLICT REFRAIN FROM VOTING IN POTENTIAL CONFLICT OF
INTEREST CASES. WHEN HIRING, WE SOLICIT BIDS FOR WORK. POTENTIAL CONFLICT
OF INTEREST PARTIES COMPETE IN THIS PROCESS TO ENSURE THAT IT IS FAIR.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL COMPENSATIONS ARE BASED ON COMPARATIVE DATA FROM SCHOOLS IN OUR ASSOCIATION (THE NORTHWEST ASSOCIATION OF INDEPENDENT SCHOOLS), THE PUBLICS SCHOOLS IN OUR DISTRICT AND SCHOOLS IN THE NATIONAL ASSOCIATION OF INDEPENDENT SCHOOLS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

Name of the organization

THE SAGE SCHOOL, INC.

Employer identification number 27-0273042

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9 - RECONCILIATION OF CHANGES - OTHER

BOOK / TAX DEPRECIATION DIFFERENCE \$ -9,091

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

BOOK/TAX DIFF IN NET ASSETS \$ 350

Depreciation and Amortization

(Including Information on Listed Property)

OMR No 1545-0172

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

See separate instructions.

► Attach to your tax return

Identifying number

27-0273042

THE SAGE SCHOOL, INC. Business or activity to which this form relates INDIRECT DEPRECIATION **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I 500,000 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 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 separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2013 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 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 tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 21.163 16 MACRS Depreciation (Do not include listed property) (See instructions) Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2012 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (e) Convention (f) Method (a) Classification of property (business/investment use (g) Depreciation deduction period service only-see instructions) 19a 3-year property 17,093 5.0 200DB 3,418 b 5-year property HY 4,033 7.0 HY 200DB 7-year property d 10-year property 15-year property 20-year property S/L q 25-year property 25 yrs S/L Residential rental 27 5 yrs MM property MM 27 5 yrs S/L MM Nonresidential real 39 yrs S/L property S/I Section C-Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L b 12-year 12 yrs 40-year 40 yrs MM S/L Summary (See instructions) Part IV 21 1,000 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 26,157 and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

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Pa	art V	entertainmen 'Note: For any von 24b, columns (a	it, recreation, ehicle for which	or amuse	ement.)	ındard ı	mileage	rate or d	eductino	lease (·	•			or	
_			—Depreciation								ımıts for	passeno	er autoi	mobiles :	<u> </u>	
24a	Do you ha	ve evidence to support th				Ť	Yes	No	T			evidence			Yes	∏ _{Nc}
	(a) of property ehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d Cost or ot		(e) (f) Basis for depreciation Recov			(f) Recover period		(g)		(h) Depreciation deduction		Elected s	section 179 ost
25		depreciation allow						_	_	•	2	5				·
26	Property	used more than 5	0% ın a qualifie	d business t	ıse											
2	000 C	HEVROLET					-									
		10/22/12	100.00%		5,00	0	5	,000	5.	0 20)ODBI	IY	1	,000		
27	Property	used 50% or less	n a qualified bi	ısıness use		_ <u></u>			<u> </u>	<u> </u>	·············			-		·
			%			+				S/	<u>L-</u>	-				
28	Add am	ounts in column (h	% lines 25 through	nh 27 Enter	here an	d on line	- 21 na			S/	L- 2			,000		
29		ounts in column (i)		-			c 2 1, pa	ge i				<u> </u>		7 29		
				·			ation on	Use of	Vehicles			-		1 20		
Com	plete this	section for vehicle	s used by a sole	proprietor,	partner,	or othe	r "more t	than 5%	owner,"	or relate	ed perso	n If you	provide	d vehicle	s	
to yo	ur employ	vees, first answer t	he questions in	Section C to									•			
30	Total bu	siness/investment	miles driven du	rıng		(a) (b) Vehicle 1 Vehicle 2			(c) (d) Vehicle 3 Vehicl		-			. ''		
	the year (do not include commuting miles))												
31		mmuting miles driv		еаг							<u> </u>	_				
32	,															
22	miles dr										ļ					
33		les driven during th through 32	ne year Add													
34		vehicle available t	for personal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use duri	ng off-duty hours?	·												, , ,	
35		vehicle used prim														
26		owner or related p		-0			-					-				
36	is anoth	er vehicle available	e for personal us Section C—Que			\A/b.	Descrie	la Mahial	f l		The size For			L		
Answ	er these	questions to deteri								-						
		owners or related	-								Jp.10 y 0					
37		maintain a written p ployees?	policy statement	that prohibit	ts all per	sonal u	se of ve	hicles, in	cluding	commut	ing, by				Yes	No
38	•	maintain a written p	oolicy statement	that prohibit	ts persor	al use	of vehic	les, exce	pt comm	nuting, b	y your					
	employe	es? See the instru	ctions for vehicl	es used by o	corporate	officer	s, direct	ors, or 1°	% or mo	re owne	rs					
39		reat all use of vehi														
40		provide more than ie vehicles, and rei				ıın ınfor	mation f	rom youi	employ	ees abo	out the					
41		neet the requireme				demon	stration	use? (Se	e instru	ctions)						
		your answer to 37,	-					-			es					
Pa	rt VI	Amortization	1		_											
		(a) Description of costs		(b) Date amor begii	tization		Amortiz	(c) able amoun	t	(d Code s		(e) Amortizat period i percenta	or	Amortiza	(f) tion for this	s year
42	Amortiza	ition of costs that t	pegins during yo	ur 2012 tax	year (se	nstru	ctions)									
43	Amodica	tion of ocate that t	nogan before	ur 2012 tarre		Д							42	 .		
43 44		ition of costs that t dd amounts in colu	-			e to ren	ort						43	-	_	
DAA			(.)		.0. 111101		<u> </u>								orm 450	62 (2012)

Year Ended: June 30, 2013

27-0273042

THE SAGE SCHOOL, INC. THE SAGE SCHOOL, INC. P.O. BOX 30 HAILEY, ID 83333-0030

Electing out of Bonus Depreciation Allowance for All Eligible Depreciable Property

The taxpayer elects out of first-year bonus depreciation allowance under IRC Section 168(k) for all eligible asset classes of depreciable property acquired after December 31, 2007. This election applies to all eligible depreciable property placed in service during the tax year.