



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 For the 2012 calendar year (or tax year beginning 01/01/13, and ending 06/30/13)

B Check if applicable:

☐ Address change☐ Name change☐ Initial return☐ Terminated☐ Amended return☐ Application pending

C Name of organization

Walnut Grove Christian School

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

1036 Maxwell Mill Road

Room/suite

City, town or post office, state, and ZIP code

Fort Mill

SC 29708

F Name and address of principal officer

Kyle Boyd

3240 Bannock Drive

Fort Mill

SC 29715

D Employer identification number

57-1119849

E Telephone number

803-835-2001

G Gross receipts \$

428,413

H(a) Is this a group return for affiliates? ☐ Yes ☒ NoH(b) Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527J Website www.walnutgrovechristianschool.com

H(c) Group exemption number

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation 2003

M State of legal domicile SC

Part I Summary

1 Briefly describe the organization's mission or most significant activities:

K-12 Non-profit religious institute

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)

3

6

4 Number of independent voting members of the governing body (Part VI, line 1b)

4

2

5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)

5

0

6 Total number of volunteers (estimate if necessary)

6

45

7a Total unrelated business revenue from Part VIII, column (C), line 12

7a

0

b Net unrelated business taxable income from Form 990-T, line 34

7b

0

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶

1,468

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

STATUTE UNIT
RECEIVED

OCT 13 2016

PIT BRANCH
OGDEN

Prior Year	Current Year
795,356	596
535,981	427,817
	0
10,185	0
1,341,522	428,413
	71,912
	0
353,754	218,687
	0
198,981	241,235
552,735	531,834
788,787	-103,421
Beginning of Current Year	End of Year
1,743,581	1,629,657
804,561	794,058
939,020	835,599

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

Date

Kyle Boyd

Headmaster

Type or print name and title

Paid

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if

PTIN

David M. Knoble

David M. Knoble

11/15/13

self-employed

P00961378

Preparer Use Only

Firm's name ▶ David Knoble, CPA

Firm's EIN ▶

114 E Main St Ste 101

Firm's address ▶ Rock Hill, SC 29730-5195

Phone no

803-324-8880

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

DAA

4

SCANNED OCT 27 2016

No state filing

0136053102071716