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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)	OMB No 1545-0047 2012
	The organization may have to use a copy of this return to satisfy state reporting requirements	Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013

B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization EVANGELICAL CHRISTIAN SCHOOL INC		D Employer identification number 59-1484745
	Doing Business As		E Telephone number (239) 936-3319
	Number and street (or P O box if mail is not delivered to street address) 8237 BEACON BOULEVARD SE	Room/suite	
	City or town, state or country, and ZIP + 4 FORT MYERS, FL 33907		G Gross receipts \$ 6,946,309
	F Name and address of principal officer DR JOHN HUNTE 8237 BEACON BOULEVARD SE FORT MYERS, FL 33907		
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ☐ (insert no) ☐ 4947(a)(1) or ☐ 527		H(a) Is this a group return for affiliates? ☐ Yes ☒ No	
J Website: ☒ WWW.GOECS.ORG		H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions)	
		H(c) Group exemption number ☐	

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ☐ **L** Year of formation 1973 **M** State of legal domicile FL

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE ORGANIZATION OPERATES A PRIVATE, NONSECTARIAN SCHOOL FOR CHILDREN FROM PRESCHOOL TO GRADE TWELVE WITH EMPHASIS ON CHRISTIAN TEACHINGS		
	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	9
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	9
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	158
	6 Total number of volunteers (estimate if necessary)	6	200
	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	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 247,631	Current Year 285,731
	9 Program service revenue (Part VIII, line 2g)	6,703,274	6,571,529
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-27,715	17,972
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-124,051	55,434
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,799,139	6,930,666
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	243,694
14 Benefits paid to or for members (Part IX, column (A), line 4)			0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		3,409,816	3,435,345
16a Professional fundraising fees (Part IX, column (A), line 11e)			0
b Total fundraising expenses (Part IX, column (D), line 25) ☐ 123,425			
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		2,791,329	2,937,024
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		6,444,839	6,593,900
19 Revenue less expenses Subtract line 18 from line 12		354,300	336,766
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	11,772,546	11,447,888
	21 Total liabilities (Part X, line 26)	6,192,503	5,531,079
	22 Net assets or fund balances Subtract line 21 from line 20	5,580,043	5,916,809

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			2013-12-06 Date	
	DR JOHN HUNTE HEADMASTER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name ANGELINE K CHOO CPA		Preparer's signature		Date 2013-12-09
	Check ☐ if self-employed			PTIN	
	Firm's name  MYERS BRETT HOLTZ & COMPANY PA			Firm's EIN 	
	Firm's address  12671 WHITEHALL DR FORT MYERS, FL 339073626			Phone no (239) 939-5775	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

THE ORGANIZATION OPERATES A PRIVATE, NONSECTARIAN SCHOOL FOR CHILDREN FROM PRESCHOOL TO GRADE TWELVE WITH EMPHASIS ON CHRISTIAN TEACHINGS

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

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 services?

If “Yes,” describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 4,998,297 including grants of \$ 221,531) (Revenue \$)

THE MISSION IS TO PROVIDE STUDENTS IN PRESCHOOL THROUGH GRADE TWELVE AN EXCELLENT ACADEMIC EDUCATION IN AN ENVIRONMENT THAT HONORS GOD AND TO CHALLENGE STUDENTS TO REACH THEIR HIGHEST POTENTIALS MENTALLY, PHYSICALLY, AND SPIRITUALLY ENROLLMENT IS 845 STUDENTS CONSISTING OF 205 STUDENTS IN PRESCHOOL AND 640 STUDENTS IN GRADES K5 TO 12

4b

(Code) (Expenses \$ including grants of \$) (Revenue \$)

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses 4,998,297

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)? <i>If "Yes," complete Schedule A</i> 	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
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? <i>If "Yes," complete Schedule C, Part II</i>		No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		No
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? <i>If "Yes," complete Schedule D, Part I</i> 		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 		No
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 debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> 		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 		No
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? <i>If "Yes," complete Schedule D, Part VI</i> 	Yes	
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? <i>If "Yes," complete Schedule D, Part VII</i> 		No
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? <i>If "Yes," complete Schedule D, Part VIII</i> 		No
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? <i>If "Yes," complete Schedule D, Part IX</i> 		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 	Yes	
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)? <i>If "Yes," complete Schedule D, Part X</i> 		No
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> 		No
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> 		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> 	Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
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>		No
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		No
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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i> 		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> 	Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> 		No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
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? <i>If "Yes," complete Schedule J</i>	23		No
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a		No
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		
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? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	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	Yes	

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.	35	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c			
2a		158	
2b		Yes	
3a			No
3b			
4a			No
b			
5a			No
5b			No
5c			
6a			No
6b			
7 Organizations that may receive deductible contributions under section 170(c).			
7a			
7b			
7c			
7d			
7e			
7f			
7g			
7h			
8			
9 Sponsoring organizations maintaining donor advised funds.			
9a			
9b			
10 Section 501(c)(7) organizations. Enter			
10a			
10b			
11 Section 501(c)(12) organizations. Enter			
11a			
11b			
12a			
12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
13a			
13b			
13c			
14a			No
14b			

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	9	
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			
b	Enter the number of voting members included in line 1a, above, who are independent	9	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
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?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
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	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
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?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	No
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	No
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

17	List the States with which a copy of this Form 990 is required to be filed	FL
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization TARA SCHUSTERMAN 8237 BEACON BOULEVARD SE FORT MYERS, FL (239) 936-3319	

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, or 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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BILL LANPHER CHAIRMAN	25	X		X				0	0	0
(2) JAMES HOLBROOK VICE CHAIRMA	25	X		X				0	0	0
(3) BARBARA ESHBAUGH DIRECTOR	25	X						0	0	0
(4) RAY KINCAID DIRECTOR	25	X						0	0	0
(5) JEFF MALAVSKY DIRECTOR	25	X						0	0	0
(6) BOB JOHNS DIRECTOR	25	X						0	0	0
(7) LYNN BURDETTE DIRECTOR	25	X						0	0	0
(8) JANET SCHAPPELL DIRECTOR	25	X						0	0	0
(9) BRAD MILLER DIRECTOR	25	X						0	0	0
(10) JOHN HUNTE HEADMASTER	40 00			X				80,300	0	1,920

Part VII

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼	80,300		1,920

2 Total number of individuals (including but not limited to those \$100,000 of reportable compensation from the organization) ▶

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
LTR CATERING , 2980 CARGO STREET FORT MYERS FL 33907	CAFETERIA CATER	319,782
CROWTHER ROOFING SHEET METAL , 2543 ROCKFILL ROAD FORT MYERS FL 33916	NEW ROOF	180,499

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ➤2

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	209,859				
	d	Related organizations . . .	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	75,872				
	g	Noncash contributions included in lines 1a-1f \$						
	h	Total. Add lines 1a-1f		285,731				
Program Service Revenue	2a	TUITION		5,136,647	5,136,647			
	b	PRESCHOOL		1,144,481	1,144,481			
	c	OTHER		250,994	250,994			
	d	SPORTS		39,407	39,407			
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		6,571,529				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		17,972			17,972
4		Income from investment of tax-exempt bond proceeds . .						
5		Royalties						
6a		Gross rents	(i) Real	(ii) Personal				
		b	Less rental expenses					
		c	Rental income or (loss)					
		d	Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b	Less cost or other basis and sales expenses					
		c	Gain or (loss)					
		d	Net gain or (loss)					
8a		Gross income from fundraising events (not including \$ 209,859 of contributions reported on line 1c) See Part IV, line 18						
		a	60,283					
		b	Less direct expenses	b	15,643			
c		Net income or (loss) from fundraising events . .		44,640				
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						
	a							
	b	Less cost of goods sold . . .	b					
	c	Net income or (loss) from sales of inventory . .						
Miscellaneous Revenue		Business Code						
11a	RENTAL			10,794			10,794	
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d		10,794					
12	Total revenue. See Instructions		6,930,666	6,571,529			28,766	

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

☐

Do not include amounts reported on lines 6b, 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.				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	221,531	221,531		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	80,300	80,300		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	3,121,650	1,998,967	1,031,083	91,600
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9	Other employee benefits.				
10	Payroll taxes.	233,395	151,561	75,157	6,677
11	Fees for services (non-employees):				
a	Management.				
b	Legal.				
c	Accounting.	5,917		5,917	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	9,137	5,934	2,942	261
12	Advertising and promotion.				
13	Office expenses.	36,578	32,920	1,829	1,829
14	Information technology.	106,099	106,099		
15	Royalties.				
16	Occupancy.				
17	Travel.				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.				
20	Interest.	185,728	185,728		
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	469,638	428,459	36,604	4,575
23	Insurance.	325,433	249,945	69,045	6,443
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).				
a	BUILDING AND GROUNDS	800,814	730,597	62,415	7,802
b	ATHLETICS	248,006	248,006		
c	ACTIVITIES	219,819	219,819		
d	DEVELOPMENT AND MARKETING	173,683		171,160	2,523
e	All other expenses	356,172	338,431	16,026	1,715
25	Total functional expenses. Add lines 1 through 24e.	6,593,900	4,998,297	1,472,178	123,425
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).				

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
Assets	1	Cash—non-interest-bearing		901,048	1	595,317
	2	Savings and temporary cash investments		1,201,318	2	1,002,314
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		57,719	4	102,277
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	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			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		76,553	9	6,828
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a15,952,366			
	b	Less accumulated depreciation	10b6,261,398	9,479,821	10c	9,690,968
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets		56,087	14	50,184
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		11,772,546	16	11,447,888
Liabilities	17	Accounts payable and accrued expenses		348,798	17	142,321
	18	Grants payable			18	
	19	Deferred revenue		1,001,787	19	978,297
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		4,829,057	23	4,407,176
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		12,861	25	3,285
	26	Total liabilities. Add lines 17 through 25		6,192,503	26	5,531,079
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		5,089,069	27	5,700,053
	28	Temporarily restricted net assets		490,974	28	216,756
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and 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			32	
	33	Total net assets or fund balances		5,580,043	33	5,916,809
	34	Total liabilities and net assets/fund balances		11,772,546	34	11,447,888

Part 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	6,930,666
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,593,900
3	Revenue less expenses Subtract line 2 from line 1	3	336,766
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,580,043
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	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5,916,809

Part 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 ☒ 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? 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	Yes	
2b	Were the organization's financial statements audited by an independent accountant? 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		No
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, 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	Yes	
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?		No
3b	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		

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

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

Name of the organization EVANGELICAL CHRISTIAN SCHOOL INC	Employer identification number 59-1484745
--	--

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).
4	☐	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
5	☐	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6	☐	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	☐	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)
8	☐	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)
9	☐	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)
10	☐	An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11	☐	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to 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 a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Non-functionally integrated
e	☐	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 section 509(a)(2)
f	☐	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g	☐	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (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? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above?
h	☐	Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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.)

Section A. Public Support						
Calendar 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						

Section B. Total Support						
Calendar 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)						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage						
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14					
15 Public support percentage for 2011 Schedule A, Part II, line 14	15					
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						▶
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						▶
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization						▶
b 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 meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization						▶
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions						▶

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.)

Section A. Public Support						
Calendar 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 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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support						
Calendar 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						
c 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's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15		
16 Public support percentage from 2011 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶			

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).

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Supplemental Financial Statements

Department of the Treasury
Internal Revenue Service

► 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 EVANGELICAL CHRISTIAN SCHOOL INC	Employer identification number 59-1484745
--	--

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds 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 donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	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? ☐ Yes ☐ No	

Part II

Conservation Easements. Complete if the organization answered "Yes" 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)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
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 historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4

Number of states where property subject to conservation easement is located ►

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8

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 ☐ No

9

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

► \$

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

Cat No 52283D

Schedule D (Form 990) 2012

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,621,207		2,621,207
b Buildings		11,840,468	5,091,259	6,749,209
c Leasehold improvements				
d Equipment		1,485,141	1,168,439	316,702
e Other		5,550	1,700	3,850
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				9,690,968

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	6,946,309
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	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	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	6,946,309
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	-15,643
c	Add lines 4a and 4b	4c	-15,643
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	6,930,666

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	6,609,543
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	15,643
e	Add lines 2a through 2d	2e	15,643
3	Subtract line 2e from line 1	3	6,593,900
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	6,593,900

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.

Identifier	Return Reference	Explanation
REVENUE AMOUNTS INCLUDED ON RETURN - OTHER	SCHEDULE D, PAGE 4, PART XI, LINE 4B	SPECIAL EVENTS DIRECT EXPENSES -15,643
EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	SCHEDULE D, PAGE 4, PART XII, LINE 2D	SPECIAL EVENTS DIRECT EXPENSES 15,643

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
EVANGELICAL CHRISTIAN SCHOOL INC

Employer identification number
59-1484745

Part I		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	Yes	
	2	Yes	
	3	Yes	
	4a	Yes	
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?	4b	Yes	
	4c	Yes	
	4d	Yes	
	5a		No
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	5b		No
	5c		No
	5d		No
	5e		No
4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II	5f		No
	5g		No
	5h		No
	6a		No
5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? b Admissions policies? c Employment of faculty or administrative staff? d Scholarships or other financial assistance? e Educational policies? f Use of facilities? g Athletic programs? h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	6b		No
	7	Yes	

Part III 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).

Identifier	Return Reference	Explanation
PUBLICATION OF NONDISCRIMINATORY POLICY IN MEDIA EXPLANATION	SCHEDULE E LINE 3	IT IS CLEARLY STATED ON THE SCHOOLS WEBSITE THAT THE SCHOOL IS A PRIVATE NONSECTARIAN ORGANIZATION DEVOTED TO THE EDUCATION OF CHILDREN WITHOUT REGARD TO RACE COLOR OR ETHNIC ORIGIN

59-1484745

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			AUCTION (event type)	VARIOUS (event type)	(total number)	(add col (a) through col (c))
Revenue	1	Gross receipts	68,583	201,559		270,142
	2	Less Contributions . . .	8,300	201,559		209,859
	3	Gross income (line 1 minus line 2)	60,283			60,283
Direct Expenses	4	Cash prizes				
	5	Noncash prizes . . .				
	6	Rent/facility costs . . .				
	7	Food and beverages .	5,568			5,568
	8	Entertainment				
	9	Other direct expenses .	10,075			10,075
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶				(15,643)
	11	Net income summary Combine line 3, column (d), and line 10 ▶				44,640

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Direct Expenses	1	Gross revenue				
	2	Cash prizes				
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses . . .				
	6	Volunteer labor	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13	Indicate the percentage of gaming activity operated in	
a	The organization's facility	13a
b	An outside facility	13b

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
EVANGELICAL CHRISTIAN SCHOOL INC

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2012

Open to Public
Inspection

Employer identification number
59-1484745

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

▶

3

Enter total number of other organizations listed in the line 1 table

▶

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) FINANCIAL AID	127	221,531			

Part IV

Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS INSIDE THE UNITED STATES	SCHEDULE I, PAGE 1, PART I, LINE 2	THE SCHOOL UTILIZES AN OUTSIDE FIRM TO DETERMINE NEEDS AND AWARD AMOUNTS, WHICH THEN IS FORWARDED TO THE SCHOOL'S FINANCIAL AID COMMITTEE FOR APPROVAL

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 to provide any additional information.
▶ Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2012**Open to Public
Inspection**Name of the organization
EVANGELICAL CHRISTIAN SCHOOL INC**Employer identification number**

59-1484745

Identifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	MANAGEMENT REVIEWS A DRAFT OF THE TAX RETURN FOR ACCURACY AND COMPLETENESS PRIOR TO SIGNING AND FILING THE APPROVED TAX RETURN IS MADE AVAILABLE FOR REVIEW BY MEMBERS OF THE BOARD OF DIRECTORS AT THEIR REQUEST
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	THE SCHOOL ROUTINELY EXAMINES FINANCIAL DEALINGS TO ENSURE A CONFLICT OF INTEREST DOES NOT EXIST
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	BOARD OF DIRECTORS REVIEWS AND DETERMINES THE COMPENSATION OF THE HEADMASTER ANNUALLY AND MAKES ADJUSTMENTS AS ALL MEMBERS AGREE
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST
RECONCILIATION OF CHANGES - OTHER	FORM 990, PART XI, LINE 9	SPECIAL EVENTS DIRECT EXPENSES 15,643 SPECIAL EVENTS DIRECT EXPENSES - 15,643

			BARRIER ISLAND GROUP FOR THE ARTS									
			Fixed Asset Schedule									
			Fiscal Year 2012/2013									
			-----Asset Basis-----				-----Depreciation Reserve-----				Balance	
	Date Acq	Life	Beginning	Additions	Deletions	Ending	Prior Yrs Deprec	Ann Deprec	Deletions	Tot Acc Deprec	Year End Net Val	
Leasehold improvements												
Outside lighting	2/11/03	5	7 676 71			7 676 71	7 676 78	-		7 676 78	(0 07)	
Lighting Timers	9/24/02	5	1 925 41			1 925 41	1 925 33	-		1 925 33	0 08	
Lattice	11/27/02	5	1 800 00			1 800 00	1 800 00	-		1 800 00	-	
Entrance	9/30/01	5	1 623 94			1 623 94	1 623 58	-		1 623 58	0 36	
Benchmark Roof Repair	11/3/2003	10	16 892 00			16 892 00	14 674 40	1 689 20		16 363 60	528 40	
Benchmark Roof Repair	11/3/2003	10	5 000 00			5 000 00	4 340 00	500 00		4 840 00	160 00	
Office Door Replacement	11/1/2005	5	1 750 00			1 750 00	1 680 00	70 00		1 750 00	-	
Emergency Lighting Upgrade Molnar Change to 10Y	9/22/2005	10	4 276 00			4 276 00	1 149 00	85 00		1 234 00	3 042 00	
Joseph St Cyr Deck Renovate Archt drawings	4/14/2006	10	3 600 00			3 600 00	2 250 00	360 00		2 610 00	990 00	
Public Bathroom Project Toilets 6	6/15/2006	10	2 004 00			2 004 00	1 224 00	204 00		1 428 00	576 00	
Boler Garden	12/15/07	10	38 744 00			38 744 00	21 276 00	3 874 40		25 150 40	13 593 60	
Storage enclosure back veradha McDonald	11/30/06	20	6 570 00			6 570 00	1 831 50	328 50		2 160 00	4 410 00	
Schein Hall AC redistribute Sanibel Air Condition	11/8/06	10	650 00			650 00	360 00	65 00		425 00	225 00	
Phillips Gallery Ceiling repair trusses lights tracks	12/30/06	20	7 615 00			7 615 00	2 089 75	380 75		2 470 50	5 144 50	
Signage	11/21/06	10	865 00			865 00	481 50	86 50		568 00	297 00	
Island Aire AC Phillips Gallery 2 systems	6/26/07	15	8 970 00			8 970 00	2 990 00	598 00		3 588 00	5 382 00	
Superior Falls 50% for Carpet in Schein Hall	6/26/07	5	3 849 50			3 849 50	3 655 60	194 00		3 849 60	(0 10)	
General Elevator Replace Motor 3/4 HP	6/26/07	10	796 00			796 00	398 00	79 60		477 60	318 40	
Bathroom Remodel Sinks Mirror Paint	10/31/07	5	5 838 00			5 838 00	5 440 40	398 00		5 838 40	(0 40)	
Schien Hall AC and reduct hall	11/25/07	10	62 891 54			62 891 54	28 824 62	6 289 15		35 113 77	27 777 77	
Office Building AC	10/31/07	10	3 503 00			3 503 00	1 633 20	350 30		1 983 50	1 519 50	
Upstairs Classroom AC Replace 24tons	1/30/08	10	14 723 23			14 723 23	6 599 29	1 472 32		8 071 62	6 651 62	
Surround Sound For Film Worship Molnar	11/30/07	10	19 026 13			19 026 13	8 723 45	1 902 61		10 626 07	8 400 07	
Renovate Stage Floor repair work done Gulf Coast	9/7/07	3	2 750 00			2 750 00	2 750 33	-		2 750 33	(0 33)	
Light Switch rewire Phillips Molnar	9/10/07	3	736 40			736 40	735 93	-		735 93	0 47	
Move Wall lania 1 & 2	8/15/08	5	6 231 00			6 231 00	4 882 60	1 246 20		6 128 80	102 20	
Lights in Gallery Phillips	7/1/08	5	795 40			795 40	795 51	-		795 51	(0 11)	
Decking Schein /Ramp	7/30/09	5	4 473 00			4 473 00	3 492 30	894 60		4 386 90	86 10	
Decking Phillips	5/26/09	5	1 955 00			1 955 00	879 67	391 00		1 270 67	684 33	
Molnar Electrical Work for Film Projector	7/30/08	5	974 00			974 00	748 07	194 80		942 87	31 13	
MacDonald Rob repair Schein Porch Ceiling	8/19/09	5	1 000 00			1 000 00	566 67	200 00		766 67	233 33	
John Grey Paint Schein Hall and Porch Ceiling	12/10/09	5	5 507 00			5 507 00	2 753 50	1 101 40		3 854 90	1 652 10	
MacDonald Rob Remove Flower Bed Boler Gard	8/31/09	10	4 078 65			4 078 65	1 107 40	407 87		1 515 26	2 563 39	
MacDonald Rob Schein Hall Dressing Room	10/16/09	5	1 800 00			1 800 00	960 00	360 00		1 320 00	480 00	
MacDonald Rob Phillips Circulation Under Bldg	12/31/09	5	3 500 00			3 500 00	1 750 00	700 00		2 450 00	1 050 00	
MacDonald Rob 2 Solid Doors Penwinkle	2/26/10	5	1 311 14			1 311 14	611 87	262 23		874 09	437 05	
Drinking Fountain/	6/15/10	3	878 00			878 00	584 67	292 67		877 33	0 67	
BOLER Light Track	6/24/2010	3	1 017 79			1 017 79	678 53	339 26		1 017 79	-	
BOLER Schein Hall Lighting Project/ Lightworks	8/30/10	3	33 780 00			33 780 00	20 640 00	11 260 00		31 900 00	1 880 00	
BOLER Light sheilds Schein Hall/ McDonald	10/29/10	3	657 00			657 00	363 00	219 00		582 00	75 00	
BOLER Electrical Light Project/Molnar	9/14/10	3	7 353 00			7 353 00	4 287 00	2 451 00		6 738 00	615 00	
BOLER 20 Amp Circuit Lanai 1 2/McDonlad	9/14/10	3	2 000 00			2 000 00	1 170 67	666 67		1 837 33	162 67	
Phillips Vent Panes/Pro Roof systems	11/10/10	5	1 365 00			1 365 00	457 00	273 00		730 00	635 00	
Fire Sprinkles Schein Hall/McDaniel Fie Protection	11/30/10	5	1 512 00			1 512 00	477 40	302 40		779 80	732 20	
Schein Hall New Condensors/Island Aire	6/22/11	10	10 700 00			10 700 00	1 160 00	1 070 00		2 230 00	8 470 00	
BOLER Garden Landscape Landgraphics	11/18/11	10	37 212 81			37 212 81	2 170 00	3 721 28		5 891 28	31 321 53	
Kennedy Constr Risers Phillips Stairs	8/10/11	5	1 920 00			1 920 00	384 00	384 00		768 00	1 152 00	
BOLER Brightlights Echo Phillips Fonders	7/30/11	3	6 263 04			6 263 04	1 914 00	2 087 68		4 001 68	2 261 36	
Wnght Flooring Wood Phillips	9/28/11	5	7 200 00			7 200 00	1 080 00	1 440 00		2 520 00	4 680 00	
McDonald R 2 Barn Doors Schein/elec	9/15/11	5	5 093 13			5 093 13	765 00	1 018 63		1 783 63	3 309 50	
Kennedy Construction Phillips Floor Mold	9/21/11	5	11 371 00			11 371 00	1 710 00	2 274 20		3 984 20	7 386 80	
Island air Duct Work for Ac Office	9/28/11	5	790 00			790 00	146 70	158 00		304 70	485 30	
Island Air Phillips Gallery	8/1/12	5		948 00		948 00	-	198 00		198 00	750 00	
Island Air Phillips Gallery	8/21/12	5		720 00		720 00	-	120 00		120 00	600 00	
Sanibel Glass Mirror Schien Door Repair	9/25/12	5		1 583 00		1 583 00	-	243 00		243 00	1 340 00	
Kennedy Construction back stairs Phillips	9/25/12	5		7 042 00		7 042 00	-	1 062 00		1 062 00	5 980 00	
Island Air T stat Schein Hall Wireless	10/24/12	5		980 00		980 00	-	136 00		136 00	844 00	
M&L Elevator Repair	4/22/13	3		2 500 00		2 500 00	-	138 88		138 88	2 361 12	
Prof WilldLife Phillips Raccoon Clean	6/15/13	3		10 500 00		10 500 00	-	-		-	10 500 00	
Island Air Duct Work for Raccoon Invest	6/21/13	3		990 00		990 00	-	-		-	990 00	
RMcDonlad Roof Repair Phillips	6/26/13	3		1 100 00		1 100 00	-	-		-	1 100 00	
Total			384 813 82	26 363 00	-	411 176 82	182 668 20	54 541 10	-	237 209 30	173 967 52	
Fixtures & Equipment												
Lectern sound folding	2/28/99	10	666 00			666 00	665 55			665 55	0 45	
Metal Blinds (Office area)	3/31/97	5	700 00			700 00	700 00			700 00	-	
PotteryWheels (3 ea)	7/31/97	5	2 340 00			2 340 00	2 340 00			2 340 00	-	
Slab Roller	10/31/98	10	532 00			532 49	532 49			532 49	-	
Emergency Lighting	11/20/01	5	723 00			722 80	722 80			722 80	-	
LVP-S490 Projector	4/18/02	5	4 950 00			4 949 50	4 949 50			4 949 50	-	
Donor Perfect Software 1	6/26/02	5	3 543 00			3 543 00	3 543 00			3 543 00	-	
Donor Perfect Software 2	8/20/02	5	2 922 00			2 921 30	2 921 30			2 921 30	-	
Long Lens Projector	1/13/03	5	2 587 95			2 588 15	2 588 00			2 588 00	0 15	
Sony Television Model KV36XBR250	1/31/03	5	1 000 00			1 000 33	1 000 00			1 000 00	0 33	
2 Outside Heaters	2/28/03	5	829 88			829 90	830 00			830 00	(0 10)	
Wireless microphone	1/31/03	5	813 00			813 15	813 00			813 00	0 15	
Sound System	5/5/2005	5	28 992 00			28 992 00	28 992 43			28 992 43	(0 43)	
Dell Computers 2 Flat Screen 3	6/30/2005	5	4 020 00			4 020 00	4 020 00			4 020 00	-	
2 Dell Office Computers 2 19 flat Monitor	5/24/2006	5	2 443 00			2 443 00	2 443 00			2 443 00	-	
1 Dell Server hardware extension and tapes	6/27/2006	5	1 568 00			1 568 00	1 568 00			1 568 00	-	
1 Dell Server all Hardware \$3995 plus install	9/15/2006	5	6 175 00			6 175 00	6 175 00			6 175 00	-	

			BARRIER ISLAND GROUP FOR THE ARTS										
			Fixed Asset Schedule										
			Fiscal Year 2012/2013										
			<-----Asset Basis----->				<-----Depreciation Reserve----->					Balance	
	Date Acq	Life	Beginning	Additions	Deletions	Ending	Prior Yrs Deprec	Ann Deprec	Deletions		Tot Acc Deprec		Year End Net Val
Windows Server 2003 software 5 Cal email antivir	9/15/2006	5	2 273 00			2 273 00	2 273 60				2 273 60		(0 60)
1Tower and 1 Flat screen monitor \$149 Intern	9/15/2006	5	722 00			722 00	722 00				722 00		-
Telephone System NEC	10/31/2006	10	6 700 00			6 700 00	3 819 33	670 00	-		4 489 33		2 210 67
16 Vista Tables for workshop rooms	1/8/2007	5	2 937 60			2 937 60	2 937 52				2 937 52		0 08
Kiln Bennett Pottery	1/27/2007	5	3 007 00			3 007 00	3 007 40				3 007 40		(0 40)
Sound System Upgrades Worship Media	1/31/2007	5	8 455 29			8 455 29	8 455 23				8 455 23		0 06
Equipment upgrades Radios	10/31/2006	5	1 198 60			1 198 60	1 198 16				1 198 16		0 44
10 Hearing Assistance devices Larry Congress		5	886 00			886 00	885 80				885 80		0 20
Laptop Computer Dell 17 Inch	7/20/2007	3	1 000 00			1 000 00	999 56				999 56		0 44
Wendy's Dell Computer workstation	7/20/2007	3	809 00			809 00	809 47				809 47		(0 47)
Rewire Computer network cables to Cat 5 box Molnar	7/30/2007	5	1 007 06			1 007 06	988 28	19 00			1 007 28		(0 22)
Lecturn New Forum	9/19/2007	10	6 352 00			6 352 00	2 966 80	624 93			3 591 73		2 760 27
Signage Easel Phillips Veranda	10/15/2007	5	6 960 00			6 960 00	6 496 00	464 00			6 960 00		-
Portable Projector	9/22/2007	5	940 00			940 00	884 00	56 00			940 00		0 00
Dell Server Terminal 2nd	1/25/2007	3	3 826 00			3 826 00	3 826 00				3 826 00		-
Bose Music Box	1/15/2007	5	971 00			971 00	823 55	147 00			970 55		0 45
Choral Risers	12/18/2007	5	3 200 00			3 200 00	2 885 50	314 00			3 199 50		0 50
New Media and Install	4/18/2008	3	2 780 25			2 780 25	2 780 46				2 780 46		(0 21)
Stools Classrooms	12/30/2008	5	599 00			599 00	529 95	69 00			598 95		0 05
Office Depot Stools 10	6/27/2008	3	971 00			971 00	970 94				970 94		0 06
Large Projector Film Workshop	7/15/2008	3	21 946 00			21 946 00	21 946 83				21 946 83		(0 83)
PYA GP CRM Software Project	7/1/2008	5	69 088 00			69 088 00	55 249 40	13 839 00			69 088 40		(0 40)
Box office equipment new system PYA DARCO	7/1/2008	3	1 871 00			1 871 00	1 871 00				1 871 00		-
Wegner Choral Risers	3/23/2009	5	1 195 00			1 195 00	1 192 00	3 00			1 195 00		-
Dell Laptop 15 Latitude D430 Core (Small)	7/30/2008	3	1 320 00			1 320 00	1 320 00				1 320 00		-
Dell Optioptex 755 Cathy marketing Heavy Graphics	10/30/2008	3	1 140 00			1 140 00	1 140 00				1 140 00		-
Adut Adjustment	6/30/2010		486 00			486 00	-				-		-
Conference Phone Polycom	5/26/2009	3	1 324 00			1 324 00	1 323 67				1 323 67		0 33
Muscians Friend	1/31/2009	3	689 00			689 00	496 00	132 00			628 00		61 00
Web Redesign 2009	6/30/2009	3	5 500 00			5 500 00	5 500 00	-			5 500 00		-
Commercial Voice 5 Phone Perwinkle	8/19/2009	3	2 600 00			2 600 00	2 454 22	146 00			2 600 22		(0 22)
Diskmakers Disc Machine	8/31/2009	3	1 514 00			1 514 00	1 513 56	-			1 513 56		0 44
Musicians Frien Headset wireless mic	12/31/2009	3	779 42			779 42	649 90	130 00			779 90		(0 48)
Eclipse Identity Concepts Perwinkle Sign	11/9/2009	5	2 195 00			2 195 00	1 134 14	439 00			1 573 14		622 36
DIGI Screen HDI Cinema Player	12/10/2009	3	2 000 00			2 000 00	1 720 89	279 00			1 999 89		0 11
Best Buy (Harder) 2 TV Boxoffice Per/Dun	1/13/2010	3	1 150 60			1 150 60	925 81	225 00			1 150 81		(0 21)
Marley Dance Floor	1/13/2010	5	3 954 62		3 955 00	(0 38)	1 977 31	790 92			2 768 23		(2 768 61)
MacDonald Robert Dolly for Dance Floor	2/26/2010	5	925 00			925 00	463 00	185 00			648 00		277 00
Dell 27 inc Monitor 2709W Marketing	1/28/2010	3	722 00		722 00	-	601 67	120 00			721 67		(721 67)
Brents Mic Deposit	1/31/2010	3	733 00			733 00	732 67				732 67		0 33
CRM Project/ Endeavour Solutions	3/9/2011	3	8 325 00			8 325 00	3 699 00	2 775 00			6 474 00		1 851 00
Conference Phone /Commercial Telephone	5/31/2011	3	790 00			790 00	285 33	263 33			548 67		241 33
Folding Tables/American Express	1/31/2011	3	552 00			552 00	259 00	184 00			443 00		109 00
Marketing Software 5 CS/Adobe	12/17/2010	3	3 165 38			3 165 38	1 582 13	1 055 13			2 637 25		528 13
Dell Maureen PC Marketing /Screen	11/30/2010	3	960 40			960 40	502 13	320 13			822 27		138 13
CRS Labor to Install Marketing Hardware	11/30/2010	3	1 040 00			1 040 00	549 67	346 67			896 33		143 67
BOLER Dell Chads Laptop	11/30/2010	3	1 401 40			1 401 40	740 13	467 13			1 207 27		194 13
TV for Classrooms 2	10/29/2010	3	3 005 45			3 005 45	1 665 82	1 001 82			2 667 63		337 82
TV Electrical Work MacDonald	10/20/2010	3	1 161 00			1 161 00	643 00	387 00			1 030 00		131 00
Compass User GP /Endeavour Solutions	8/20/2010	3	2 070 00			2 070 00	1 328 00	690 00			2 018 00		52 00
Mic Music Friend	12/10/2010	3	732 00			732 00	384 00	244 00			628 00		104 00
Altra Medical Ser# B11E-01168	7/27/2011	3	1 803 40			1 803 40	601 13	601 13			1 202 27		601 13
Musicians Frien! MF19621876 Amp	8/17/2011	3	598 00			598 00	181 50	199 33			380 83		217 17
Dell Computer XFFF4W/87 Iptules 390	8/31/2011	3	1 689 80			1 689 80	469 00	563 27			1 032 27		657 53
Endeavour 1 GP/Compass User	10/12/2011	3	3 399 04			3 399 04	755 00	1 133 01			1 888 01		1 511 03
Vendini Site Map/ Straussfor Online sales	12/31/2011	3	1 178 10			1 178 10	195 00	392 70			587 70		590 40
BOLER Projector Innovative Life	9/30/2012	10	87 729 29			87 729 29	6 687 00	8 772 93			15 459 93		72 269 36
MVA Material Phillip Accoustic Panels	1/20/2012	5	2 000 00			2 000 00	167 00	400 00			567 00		1 433 00
CRS Cisco 881 Wireless Router Perwinkle	7/24/2012	3		759 91		759 91		253 00			253 00		-
Total			363 133 03	759 91	4 677 00	359 215 73	235 969 54	38 702 44	-		274 671 98		5 031 51
Furniture													
Artist Mirror (Gift)	3/1/94	10	500 00			500 00	500 00	-			500 00		-
Artist Mirror	2/28/98	10	496 00			496 00	496 19	-			496 19		(0 19)
Chairs(57)Classroom	3/20/97	10	6 160 00			6 160 00	6 159 99	-			6 159 99		0 01
Chairs Upholstered 250	12/22/97	10	17 263 00			17 263 00	17 263 22	-			17 263 22		(0 22)
Curtains-Vinyl Rollup Lanai#2	1/3/01	10	3 675 00			3 675 00	3 675 00	-			3 675 00		-
Moveable wall panel	2/28/99	10	540 00			540 00	540 00	-			540 00		-
Table 4 chairs-Quiet Rm	3/20/97	10	793 00			793 00	792 67	-			792 67		0 33
Tables (18)"Falcon"	3/20/97	10	2 086 00			2 086 00	2 085 85	-			2 085 85		0 15
Veranda 4 IC sets	5/16/97	10	1 196 00			1 196 00	1 196 10	-			1 196 10		(0 10)
50 Tables(Folding/Gray)	9/30/02	10	661 50			662 00	662 20	-			662 20		(0 20)
Outdoor Furniture 2 Benches/	11/19/02	10	3 003 28			3 003 28	2 902 66	100 00			3 002 66		0 62
Office Remodel 10 Desk Computer Network Hubs	11/1/03	5	8 890 00			8 890 00	8 890 00	-			8 890 00		-
Gullys Gift Shop Display Cases 2	11/17/03	5	750 00			750 00	750 00	-			750 00		-
Molnar Fan Work 6 Remicraft Fans	11/24/03	5	1 558 81			1 558 81	1 558 97	-			1 558 97		(0 16)
National Fum 2 Desk Luz and Lee	7/1/04	5	1 139 00			1 139 00	1 139 00	-			1 139 00		-
Folding Tables	11/5/06	3	564 00			564 00	424 00	-			424 00		140 00
Park Benches Boler Garden 6	3/29/06	5	3 756 00			3 756 00	3 756 00	-			3 756 00		-
Total			53 031 59	-	-	53 032 09	52 791 85	100 00			52 891 85		140 24
Pianos													

BARRIER ISLAND GROUP FOR THE ARTS											
Fixed Asset Schedule											
Fiscal Year 2012/2013											
-----Asset Basis-----						-----Depreciation Reserve-----				Balance	
	Date Acq	Life	Beginning	Additions	Deletions	Ending	Prior Yrs Deprec	Ann Deprec	Deletions	Tot Acc Deprec	Year End Net Val
Piano Bench	12/26/99	10	543 00			543 00	453 60	89 00		542 60	0 40
Steinway Concert Grand 9	8/31/00	20	35 000 00			35 000 00	17 208 00	1 750 00		18 958 00	16 042 00
Steinway Con Gr 9 (upgrade)	2/28/01	20	10 000 00			10 000 00	4 667 00	500 00		5 167 00	4 833 00
Steinway Con Gr 9 (rework)	11/8/06	15	1 595 00			1 595 00	381 00	106 33		487 33	1 107 67
Keyboard #1 (Nordstrum)	3/31/00	10	899 00			899 00	891 72	7 00		898 72	0 28
Keyboard #2 (Robinson)	3/31/00	10	749 00			749 00	749 47	-		749 47	(0 47)
Piano Spinnet	6/4/04	10	1 900 00			1 900 00	1 140 00	-		1 140 00	760 00
Piano Stenway B / Tom Gillis	3/11/05	10	34 000 00			34 000 00	18 132 00	-		18 132 00	15 868 00
Repaint Piano find out which one	3/23/09	10	1 455 00			1 455 00	470 00	145 00		615 00	840 00
Rework Steinway	12/19/09	3	1 319 00			1 319 00	1 319 00	-	-	1 319 00	-
Total			87 460 00	-	-	87 460 00	45 411 79	2 597 33	-	48 009 12	39 450 88
Misc other											
Norcostco Ballet Floor	11/5/98	10	1 982 00			1 982 00	1 982 20			1 982 20	(0 20)
Total			1 982 00	-	-	1 982 00	1 982 20	-		1 982 20	(0 20)
2012 Audit							(1 443 00)			(1 443 00)	
TOTAL DUNLOP			923 196 44	27 122 91	4 677 00	945 642 64	517 380 58	95 940 87	-	613 321 45	332 321 19
Deletions						945,642 64		613,321 45			
Land											
2200 Perwinckle Way Herb Struass Theater	6/30/10		432 112 00			432 112 00	-			-	432 112 00
Building Herb Struass Theater	6/30/10	40	346 469 00			346 469 00	17 323 00	8 661 73		25 984 73	320 484 28
Total Land Building			778 581 00			778 581 00	17 323 00	8 661 73	-	25 984 73	752 596 28
Theater Lease Hold Improvements											
3 AC exsting	6/30/10	3	15 000 00			15 000 00	10 000 00	5 000 00		15 000 00	-
Presidents Garden Existing	6/30/10	10	30 956 00			30 956 00	6 191 20	3 095 60		9 286 80	21 669 20
Dimmer Pack Existing	6/30/10	10	20 968 00			20 968 00	4 193 60	2 096 80		6 290 40	14 677 60
AC Lift Station Repair BIG ARTS	6/30/10	20	16 001 00			16 001 00	1 600 10	800 05		2 400 15	13 600 85
Carpet for Theater Existing	6/30/10	3	7 304 00			7 304 00	4 869 33	2 434 67		7 304 00	-
Paint theater existing	6/30/10	2	4 860 00			4 860 00	4 860 00			4 860 00	-
BOLER Sound System Sweetwater Equip	1/31/11	3	9 851 00			9 851 00	4 648 67	3 283 67		7 932 33	1 918 67
BOLER Alex Anna Sound System Upgrade Install	12/17/10	3	1 831 00			1 831 00	916 33	610 33		1 526 67	304 33
BOLER Sound Apple Sound Light System	1/31/11	3	949 05			949 05	446 35	316 35		762 70	186 35
BOLER Lighting Project BMI	1/31/11	5	5 898 60			5 898 60	1 669 72	1 179 72		2 849 44	3 049 16
BOLER Light Canisters Theater 6	12/31/10	3	1 848 00			1 848 00	922 00	616 00		1 538 00	310 00
Water Fountain Nave Plumbing	6/30/11	7	1 247 00			1 247 00	193 14	178 14		371 29	875 71
AC Repair Theater Right Upstairs	11/30/10	10	7 950 00			7 950 00	1 264 00	795 00		2 059 00	5 891 00
AC carpenter work /MacDonald	12/17/10	3	2 045 51			2 045 51	1 023 84	681 84		1 705 67	339 84
Deck in Back of Theater storage	12/30/10	3	2 645 27			2 645 27	1 321 76	881 76		2 203 51	441 76
Fix Handicap Ramp	1/19/10	5	3 500 00			3 500 00	1 048 00	700 00		1 748 00	1 752 00
Repair Hole in Roof Leak	11/30/10	3	950 00			950 00	498 67	316 67		815 33	134 67
Island Air 10 Ton AC	8/31/11	10	15 180 00			15 180 00	1 260 00	1 518 00		2 778 00	12 402 00
McDonald Drywall repair Miles office	9/15/11	5	2 866 90			2 866 90	430 00	573 38		1 003 38	1 863 52
BOLER Online/ Lightworks grd pipe drape	9/30/11	10	4 091 28			4 091 28	306 00	409 13		715 13	3 376 15
4Wall Entertainment Light Canister	12/31/11	5	3 341 00			3 341 00	333 00	668 20		1 001 20	2 339 80
Hamilton Alarm system Theater	10/31/11	10	755 00			755 00	50 00	75 50		125 50	629 50
Molnar Electric for new Sound Booth SL	1/31/12	5	913 62			913 62	95 00	182 72		277 72	635 90
Home Depot New Stage Floor For Theater	1/15/12	7	1 301 23			1 301 23	93 00	185 89		278 89	1 022 34
Stage Equipment ETC20ADIM and Ushi Lamp	10/31/11	3	597 00			597 00	132 00	199 00		331 00	266 00
Sanibel Glass Mirror HS Dressing Rms	1/24/13	3		890 86		890 86	-	125 00		125 00	765 86
Sanibel Glass Mirror HS Front Door Repair	2/22/13	3		916 00		916 00	-	104 00		104 00	812 00
BMI Barber Marketing Light canisters	1/31/13	5		635 27		635 27	-	66 00		66 00	
Total Theater Building Improvements			162 850 46	2 442 13	-	165 292 59	48 365 71	27 093 41	-	75 459 12	89 264 20
Theater Furniture and Fixtures											
Patio Furniture Existing	6/30/10	5	4 644 00			4 644 00	1 857 60	928 80		2 786 40	1 857 60
Office and Misc Furniture Existing	6/30/10	3	5 800 00			5 800 00	3 866 67	1 933 33		5 800 00	-
Sound System Existing	6/30/10	3	5 000 00			5 000 00	3 332 00	1 668 00		5 000 00	-
Patio Benches Existing	6/30/10	3	680 00			680 00	453 33	226 67		680 00	-
Silver Rain Curtain Rose Brand Wipers	5/1/11	2	640 00			640 00	350 00	290 00		640 00	-
Curtains Red Rosebrand	12/17/10	3	943 10			943 10	470 37	314 37		784 73	158 37
Auto Quest Ford Van Cast Car	9/30/11	5	3 399 00			3 399 00	508 00	679 80		1 187 80	2 211 20
Vendm 3 Thermal Printer Theater Tickets	10/31/11	5	3 345 00			3 345 00	446 00	669 00		1 115 00	2 230 00
Guitar Center Yamaha MO 88 Key	10/31/11	3	1 525 92			1 525 92	344 00	508 64		852 64	673 28
Sweet Water 4 sennheiser body pack mic	10/31/11	5	2 399 80			2 399 80	320 00	479 96		799 96	1 599 84
BOLER Theater Road Sign Sabal Sign	4/30/12	7	7 535 00			7 535 00	180 00	1 076 43		1 256 43	6 278 57
Guitar Studio Equalizers/Speakers	10/31/11	3	1 059 95			1 059 95	240 00	353 32		593 32	466 63
PRG Lighting Fogger for shows	11/30/12	3		890 00		890 00	-	175 00		175 00	715 00
PGR Lighting Hazer Theater Prop	10/31/12	3		1 630 00		1 630 00	-	362 00		362 00	1 268 00
Sabal Signs extrs letters	10/31/12	3		390 49		390 49	-	87 00		87 00	303 49
Total Equipment Theater			36 971 77	2 910 49	-	39 882 26	12 367 97	9 752 31	-	22 120 28	17 761 98
Piano											
Piano Existing 1/04/04	6/30/10	3	5 369 00			5 369 00	3 580 00	1 789 00		5 369 00	-
			5 369 00			5 369 00	3 580 00	1 789 00	-	5 369 00	-
TOTAL STRAUSS			983 772 23	5 352 62		989 124 85	81 636 67	47 296 45		128 933 12	
GRAND TOTAL			1,906,968 67	32,475 53	4,677 00	1,934,767 49	599,017 25	143,237 32	-	742,254 57	