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DLN: 93493035013504

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

Open to Public

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

A Fo	or the	2012 cal	endar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-	2013				
		pplicable	C Name of organization	2015	D Employe	er identi	fication number	
_	dress ch		Out-Of-Door Academy of Sarasota Inc		59-173	1857		
– _{Na}	me cha	nae	Doing Business As		33-173	1037		
_	tıal retu	-						
_	rminate		Number and street (or P O box if mail is not delivered to street address) Room/suite 444 Reid Street		E Telephone	e numbe	r	
_					(941)3	49-32	23	
_	nended		City or town, state or country, and ZIP + 4 Sarasota, FL 34242					
Ap	plication	pending			G Gross rec	eipts \$ 3	4,903,542	
			F Name and address of principal officer Angel R Cappar		nis a group re	eturn fo		
			Aliger K Cappai	affili	ates?		┌ Yes 🗸 No	
				H(b) Are	all affiliates	ınclude	ed?	
				If"N	lo," attach a	lıst (s	ee instructions)	
: Ta	ax-exem	npt status	▼ 501(c)(3)	u(a) Gro	up exemptio	n numh	ner 🕨	
W	ebsite	e: 🕨 ww	w oda edu	H(c) Gro	ap exemptio	II II III II	,ei F	
€ For	m of or	ganization	✓ Corporation Trust Association Other ►	L Year of fo	ormation 1924	M St	ate of legal domicile FL	
	rt I		mary					
			escribe the organization's mission or most significant activities					
			dependent college preparatory school, our mission is to provide an enviro	nment in w	hıch studen	ts strıv	e to achieve their	
υ.	<u> </u>	highest	academic goals and to build character through a balanced program of aca	demics, the	e arts and at	thletics		
Governance	-							
Ĭ								
<u> </u>	2 (Check tl	his box দ if the organization discontinued its operations or disposed of	more than :	25% of its n	et ass	ets	
o O			of voting members of the governing body (Part VI, line 1a)		⊢	3	19	
₽			of independent voting members of the governing body (Part VI, line 1b)		⊢	4	19	
ACIIVIIIES &			mber of individuals employed in calendar year 2012 (Part V, line 2a) .		· ·	5	199	
Ť.			mber of volunteers (estimate if necessary)		· ·	6	100	
			related business revenue from Part VIII, column (C), line 12	· ·	7a	84,716		
	Ь	Net unre	elated business taxable income from Form 990-T, line 34	1	• •	7b	79,335	
				Pri	or Year		Current Year	
a)	8		butions and grants (Part VIII, line 1h)	2,352,098		2,301,379		
Revenue	9	_	am service revenue (Part VIII, line 2g)		11,406,88		12,216,907	
瓷	10		tment income (Part VIII, column (A), lines 3, 4, and 7d)		546,403 1,039,27			
	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	390,74	463,757			
	12		· · · · · · · · · · · · · · · · · · ·		14,696,12	23	16,021,314	
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)		1,605,17	7 3	1,606,297	
	14	Benef	ts paid to or for members (Part IX, column (A), line 4)				0	
46	15		es, other compensation, employee benefits (Part IX, column (A), lines				7.245.520	
Expenses		5-10			6,782,80) 5	7,365,528	
₹	16a		ssional fundraising fees (Part IX, column (A), line 11e)				0	
ठ	Ь		indraising expenses (Part IX, column (D), line 25) \blacktriangleright 617,910					
	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,206,839 5,519,39			
	18		expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		13,594,81		14,491,222	
פים	19	Reven	ue less expenses Subtract line 18 from line 12	.	1,101,30	_	1,530,092	
8 00 10 00 10 00				_	ig of Current Year		End of Year	
7 TE	20	Total	assets (Part X, line 16)		38,596,52	26	41,629,743	
net Assets or Fund Balances	21		liabilities (Part X, line 26)		17,306,40		18,257,061	
25	22		ssets or fund balances Subtract line 21 from line 20		21,290,12	_	23,372,682	
Pa	rt II		ature Block				· · ·	
ny k	nowled	dge and	perjury, I declare that I have examined this return, including accompanyl belief, it is true, correct, and complete $$ Declaration of preparer (other than nowledge					
		L		I -	014.61.71			
21	•	**** Signa	** ature of officer		2014-01-31 Date			
Sigı Ter		<u>'</u>						
•	-		el R Cappar CFO e or print name and title					
			Print/Type preparer's name Preparer's signature Date	e Ch	CCKI II I	PTIN		
⊃ai	d	F	Robert E Stanell	sel	f-employed P	0136217	73	
	pare	, f	Firm's name	Fin	m's EIN 🟲			
	On!		Firm's address 🟲 1001 3rd Ave W Suite 700	Pho	one no (941)	748-104)	
J J (, OIII	۱.	Bradenton, FL 34205					
			•	1				

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

✓ Yes ☐ No

Part		atement of Program Serveck if Schedule O contains a res				
1	Briefly d	escribe the organization's mission	1			
		ent college preparatory school, o and to build character through a				chieve their highest
2		rganization undertake any signific Form 990 or 990-EZ?			which were not listed on	┌ Yes ┌ No
	If "Yes,"	describe these new services on S	chedule O			
3	services	rganization cease conducting, or		anges in how it cor	nducts, any program	┌ Yes ┌ No
	If "Yes,"	describe these changes on Sched	ule O			
4	expenses	the organization's program servion Section 501(c)(3) and 501(c)(4) expenses, and revenue, if any, for	l) organizations are	required to report		
4a	(Code) (Expenses \$	12,181,870 ıncl	uding grants of \$	1,606,297) (Revenue \$	12,541,825)
	lower sche education across the	sarasota, florida, the out-of-door acader bol (grades pre k-6) on siesta key, and t al leader in the greater sarasota commur nation ranked by the cum laude society that inspires students to reach their true	he collegiate-style uihlei nity for over 85 years w v in the top 1% of all se	n campus at lakewood e continue to set a sta condary schools in the	d ranch (grades 7-12) the out-of-doo undard of excellence recognized by the	r academy has been the best colleges and universities
4b	(Code) (Expenses \$	ınclu	ding grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	ınclu	ding grants of \$) (Revenue \$)
	-					
4d	O ther p	ogram services (Describe in Sch	edule O)			
	(Expens	es \$ inc	luding grants of \$) (Revenue \$)
4e	Total pr	ogram service expenses ►	12,181,870			

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		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</i> "Yes," complete Schedule C, Part II	4		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? If "Yes," complete Schedule C, Part III	5		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? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		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? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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? If "Yes," complete Schedule D, Part VII	11b		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? If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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? If "Yes," complete Schedule F, Parts I and IV	14b		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? If "Yes," complete Schedule F, Parts II and IV	15		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? If "Yes," complete Schedule F, Parts III and IV	16		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? If "Yes," complete Schedule G, Part I (see instructions)	17		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? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t 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? If "Yes," complete Schedule I, Parts I and II	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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		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</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	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 $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	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	
		F	orm 990	(2012)

	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 1a 23		res	INC
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
·	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1		
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
		_		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
62	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		N
	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			IN .
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	 	V	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		l _N
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		N
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		N
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		l I N
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		ΙN
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		N
.0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		N
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?	12-		
	Note. See the instructions for additional information the organization must report on Schedule O	13a		N
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	 14a		l I n
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14a 14b		

	· · · · · · · · · · · · · · · · · · ·			
_Se	ction 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	Yes	
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
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	<u> </u>		
/ a	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			
а	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
Se	ction B. Policies (This Section B requests information about policies not required by the Internal	Reven	ue Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
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	
С	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	<u> </u>
b	Other officers or key employees of the organization	15b	Yes	
	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		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
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)			

Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of

 $State\ the\ name,\ physical\ address,\ and\ telephone\ number\ of\ the\ person\ who\ possesses\ the\ books\ and\ records\ of\ the\ organization$

interest policy, and financial statements available to the public during the tax year

►Angel Cappar 444 Reid Street Sarasota, FL (941) 349-3223

Form	990	(2012)
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

	1	(C)								
(A) Name and Title	(A) Name and Title Average hours per week (list any hours for related					heck unless officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	MISC)	related related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours	Posi more t perso and a	tion (han d in is l	ne l both	oox, an d	fficer	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	Estii amount compe fron	F) mated of other nsation n the
		for related organizations below dotted line)	Officer Institutional Trustee Individual trustee or director		Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	rela	ation and ated zations	
1b	Sub-Total											
C	Total from continuation sheet	s to Part VII, S	ection A	٠.				Þ				
d	Total (add lines 1b and 1c) .							Þ	875,546			420,595
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received more th	an		
											Yes	No
3	Did the organization list any fc on line 1a? If "Yes," complete S					key •	emplo	yee,	or highest compen		3	No
4	For any individual listed on line organization and related organ individual									on from the uch	4 Yes	
5	Did any person listed on line 1 services rendered to the organ									or individual for	5	No
Se	ction B. Independent Co	ntractors										
1	Complete this table for your five compensation from the organization	e highest comp										 ar

		/
(A)	(B)	(C)
Name and business address	Description of services	Compensation
Willis A Smith 5001 Lakewood Ranch Blvd N Sarasota FL 34240	Construction manager	233,510
Unique Air 4515 19th Street Court East Bradenton FL 34203	Air Conditioning/Rep	119,128
Shaw Contract Flooring Services PO Box 402143 Atlanta GA 30384	Flooring Contractors	101,226
Janı-Kıng of Tampa Bay 2469 Sunset Point Road Suite 250 Clearwater FL 33765	Janıtorıal Services	143,475

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶4

Form 99		<u> </u>						Page 9
Part V	/##1		of Revenue ule O contains a respor	nse to any question i	ın this Part VIII			
		Check if Sched	ale o comanis a respon	ise to uny question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
gg	1a	Federated cam	paigns 1a					
ant	ь	Membership du	ıes 1b					
ي ق	С	Fundraising ev	ents 1c	199,179				
ffs, ⊩A	d	Related organiz	zations 1d					
:5 ≣	e	Government grant						
ns, Sin		_						ļ
utic ier	f	similar amounts no	ons, gifts, grants, and 1f ot included above	2,102,200				
ē	g	Noncash contributi 1a-1f \$	ions included in lines	823,766		İ	İ	j
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add line:	s 1 a - 1 f		2,301,379			
				Business Code				
Ĭ	2a	TUITION		611600	11,881,300	11,881,300		
Program Serwoe Revenue	ь	TRANSPORTATION		611600	116,737	116,737		
	c	SUMMER PROGRA	MS	611600	169,044	169,044		
ž	d	CLASS TRIPS		611600	44,402	44,402		
ૐ ⊆	e	after school	_	611600	5,424	5,424		
in a	f	All other progra	am service revenue					
Š	g	Total Add lines	s 2a-2f		12,216,907			
	3		come (including dividen		·			
		and other simil	ar amounts)		386,873			386,873
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨	0			
	5	Royalties .			0			
	6a	Gross rents	(ı) Real	(II) Personal 84,716				
	Ь	Less rental		5 1,7 25				
	_c	expenses Rental income		84,716				
		or (loss)		ŕ	84,716		84,716	
	d	Net rental inco	me or (loss) (ı) Securities	· · · · · · · · · · · · · · · · · · ·	84,716		64,716	
	 7a	Gross amount	(i) Securities	(II) O ther				
		from sales of assets other than inventory	19,064,517	259,461				
	Ь	Less cost or other basis and sales expenses	18,408,936	262,644				
	С	Gain or (loss)	655,581	-3,183				
	d	Net gain or (los	ss)		652,398			652,398
une	8a	events (not inc	from fundraising luding),179					
Other Revenue		of contributions See Part IV, lir	s reported on line 1c) ne 18					
<u>.</u>	١.		a .	264,771				
툿	c b		penses b (loss) from fundraising	210,648	54,123			54,123
_			from gaming activities	events p	5 1,225			
			ne 19					
			a					
	b c		rpenses b (loss) from gaming acti	vities F	0			
		Gross sales of	i	vicies :				
		returns and allo	owances .					
	١.		a					
	b		oods sold b (loss) from sales of inve	entory b	0			
	<u> </u>	Miscellaneous		Business Code				
	11a	year books		611600	9,924	9,924		
	ь	other		611600	269,342	269,342		
	c	fees		611600	45,652	45,652		
	d	All other reven	ue					
	e	Total. Add lines			224.040			
	12	Total revenue	See Instructions .		324,918			
			· · •		16,021,314	12,541,825	84,716	1,093,394

	IX Statement of Functional Expenses				
ectio	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al				
	Check if Schedule O contains a response to any question in this Pa		(B)		
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			· ·
2	Grants and other assistance to individuals in the United States See Part IV, line 22	1,606,297	1,606,297		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0	-,,		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,296,141		1,197,641	98,50
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	5,159,392	5,049,142		110,25
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	313,477	245,183	58,157	10,13
9	Other employee benefits	117,861	92,184	21,866	3,81
10	Payroll taxes	478,657	374,378	88,801	15,47
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
c	Accounting	0			
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on				
	Schedule O)	0			
L2	Advertising and promotion	0			
L3	Office expenses	0			
L4	Information technology	0			
L5	Royalties	0			
L6	Occupancy	454,913	454,913		
17	Travel	0			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
L9	Conferences, conventions, and meetings	0			
20	Interest	354,757	354,757		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,249,434	1,249,434		
23	Insurance	0			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Other Expenses	314,512	64,985	108,466	141,06
Ь	department	390,634	390,634		
С	school activities	548,778	548,778		
d	general insitutional	1,889,371	1,672,860	216,511	
e	All other expenses	316,998	78,325		238,67
25	Total functional expenses. Add lines 1 through 24e	14,491,222	12,181,870	1,691,442	617,91
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)	11,171,222	12,101,070	1,001,777	317,310

Part X Balance Sheet

Ра	τχ	Check if Schedule O contains a response to any question in thi	s Part	x			
					(A)		(B)
	-	Cook was interest heaving			Beginning of year 950		End of year 950
	1	Cash—non-interest-bearing			3,455,423		4,575,946
	2	Savings and temporary cash investments			1,068,142		586,564
	3	Pledges and grants receivable, net			17,636		
	4	Accounts receivable, net			17,636	4	120,605
	5	Loans and other receivables from current and former officers, cemployees, and highest compensated employees. Complete P. Schedule L	of		5	0	
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contril mploy	outing employers		6	0
88	7	Notes and loans receivable, net				7	0
ď	8	Inventories for sale or use			9,237	8	9,090
	9	Prepaid expenses and deferred charges			157,801	9	178,742
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		33,332,080	,		
	Ь	Less accumulated depreciation	10b	9,287,688	24,378,202	10c	24,044,392
	11	Investments—publicly traded securities	<u> </u>		8,953,952	11	11,122,856
	12	Investments—other securities See Part IV, line 11				12	0
	13	Investments—program-related See Part IV, line 11				13	0
	14	Intangible assets			437,201	14	490,235
	15	Other assets See Part IV, line 11			117,982	15	500,363
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			38,596,526	16	41,629,743
	17	Accounts payable and accrued expenses			1,003,427	17	1,390,064
	18	Grants payable			, ,	18	
	19	Deferred revenue			3,064,282	19	4,184,030
	20	Tax-exempt bond liabilities			12,910,000	20	12,600,000
	21	Escrow or custodial account liability Complete Part IV of Sch			, ,	21	, .
Ilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali	ors, tr				
Liabiliti		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s.		41,073	23	28,267
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	ırt X of	Schedule	227 224		
		D			287,621	25	54,700
	26	Total liabilities. Add lines 17 through 25			17,306,403	26	18,257,061
S)		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	, and	complete			
Ë	27	Unrestricted net assets			19,414,589	27	22,112,372
<u>छ</u>	28	Temporarily restricted net assets			1,759,535	28	1,144,311
<u> </u>	29	Permanently restricted net assets			115,999	29	115,999
Fund Balance	29	Organizations that do not follow SFAS 117 (ASC 958), check h			110,099	23	110,009
		complete lines 30 through 34.	icic F	, and			
s or	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
455	32	Retained earnings, endowment, accumulated income, or other				32	
Net /	33	Total net assets or fund balances			21,290,123	33	23,372,682
Ź	34	Total liabilities and net assets/fund balances			38,596,526	34	41,629,743
	<u>. </u>	. 112. Habilities and het abbets/land balances	- •		33,300,020		41,020,740

Par	t XI Reconcilliation of Net Assets			<u> </u>	-5
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		16,0	21,314
2	Total expenses (must equal Part IX, column (A), line 25)	2		14,4	191,222
3	Revenue less expenses Subtract line 2 from line 1	3		1,5	30,092
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		21,2	290,123
5	Net unrealized gains (losses) on investments	5		2	290,566
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		2	261,901
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		23,3	372,682
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	ırate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

Software ID: 12000229 **Software Version:** 2012v2.0

EIN: 59-1731857

Name: Out-Of-Door Academy of Sarasota Inc

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	Name and Title A verage hours per week		(C n (do than pers office ctor/i	not one on is ran trust	box s bot d a tee)	th		(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	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations	
Gerd Petrik Ementus	0 00 0 00	х						0	0	0	
Brenda Uihlein Emeritus	0 00	х						0	0	0	
Reed Savidge Emeritus	0 00	х						0	0	0	
Ann Grano Secretary	2 00 0 00	х		х				0	0	0	
Celeste Dockery - Chadwick Treasurer	2 00 0 00	х		х				0	0	0	
Mitzie Henson Vice Chair	2 00 0 00	х		х				0	0	0	
Mıchael Von Waldner Chaırman	2 00 0 00	х		х				0	0	0	
David Mason Trustee	1 00 0 00	х						0	0	0	
Mary McCabe Peirce Trustee	1 00 0 00	х						0	0	0	
Thomas Buffett Trustee	1 00 0 00	х						0	0	0	
Tally Harris Trustee	1 00 0 00	х						0	0	0	
Julie Luhrsen Trustee	1 00 0 00	х						0	0	0	
Ron Gelbman Trustee	1 00 0 00	х						0	0	0	
Terrı Vitale Trustee	1 00 0 00	х						0	0	0	
Ann Kittle Trustee	1 00 0 00	х						0	0	0	
Rhonda Deems Trustee	1 00 0 00	х						0	0	0	
Larry Thompson Trustee	1 00 0 00	х						0	0	0	
John Cranor Trustee	1 00 0 00	х						0	0	0	
John Cannon Trustee	1 00 0 00	х						0	0	0	
Lisa Grain Trustee	1 00 0 00	х						0	0	0	
Tracee Murphy Trustee	1 00 0 00	х						0	0	0	
Ken Pendery Trustee	1 00 0 00	х						0	0	0	
Brett Timmons Athletic Dir	40 00 0 00			х				54,500	0	6,713	
Laura Murphy Dir Admissions	40 00 0 00			×				72,250	0	31,731	
Noel Dougherty Head Upper Sch	40 00 0 00			х				65,083	0	39,092	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

0 00 40 00

0 00 40 00

0 00

David V Mahler

Head of School

Joseph Runge

Dır College Coun

(A) Name and Title	(B) Average hours per week (list	(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
	any hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former			related organizations
Wendy Pearre Head Lwr School	40 00 0 00			Х				52,500	0	6,530
Bruce Latta Head Middle Sch	40 00 0 00			х				88,000	0	43,544
Dennis Chapman Head of Advance	40 00 0 00			х				98,500	0	11,130
Angel R Cappar CFO	40 00			х				105,500	0	38,633

Х

Х

231,838

107,375

194,659

48,563

0

0

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As Filed Data -

DLN: 93493035013504

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Out-Of-Door Academy of Sarasota Inc

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.

Inspection

									59-17318		
	rt I			blic Charity Sta						struction	ıs.
The	organı:			e foundation becaus			= -				
1	Γ	A chur	ch, conventi	on of churches, or a	ssociation of	churches d	lescribed in s e	ection 170(b)(1)(A)(i).		
2	굣	A scho	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Sched	ule E)				
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descr	ıbed ın sectio	n 170(b)(1)(A)(iii).		
4	Γ	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in se	ction 170(b)(1)(A)(iii).	. Enter the
	_			ty, and state							
5	ı	_	•	erated for the benefi	_	or universi	ty owned or o	perated by	a government	al unit des	scribed in
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)						
6	Г	A feder	al, state, or	local government or	government	al unit desc	rıbed ın secti	on 170(b)(1)(A)(v).		
7	Γ	_		at normally receives		•	support from	a governm	ental unıt or fı	om the ge	neral public
8	Г			on 170(b)(1)(A)(vi). described in sectior			mplete Part II	:)			
9			-	at normally receives			•	-	butions, mem	bership fe	es, and gross
	·	_		ities related to its ex					·	· ·	=
				oss investment inco	•	=					
				janızatıon after June						,	
10	Г	•	,	ganized and operated	•			•	•		
11	<u></u>	_		ganized and operated						o carry ou	t the nurnoses of
	'			ly supported organiz							
				bes the type of supp							
		a	Type I	b	∏ Туре II	I - Function	ially integrate	d d	Type III - No	n-functio	nally integrated
e	Γ		_	ox, I certify that the	-		,		, ,		•
				on managers and ot	her than one	or more pul	olicly support	ed organiza	tions describ	ed in secti	ion 509(a)(1) or
f			1509(a)(2)	received a written de	etermination	from the IR	S that it is a	Tyne I Tyr	e II or Tyne	III sunno	rtına oraanızatıon
•			this box	received a milecon a		mom che in	io chache io a	. , pc -, . , p	,c 11, 01 1 , pc	III Suppo	
g		Since A	ugust 17, 2	2006, has the organi	zation accep	ted any gift	or contributi	on from any	of the		
			ng persons?								
				rectly or indirectly o	•		-	persons de	scribed in (ii)		Yes No
				governing body of th		_	n?				1g(i)
				er of a person descr							lg(ii)
		• •		lled entity of a perso						11	g(iii)
h		Provide	the followi	ng information about	the supporte	ed organizat	:ion(s)				
	i) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is t	he	(v) Did you	notify	(vi) Is	the	(vii) A mount of
	suppor		(3.)	organization	organizati		the organiz		organizati		monetary
o	rganiza	ation		(described on	col (i) list		ın col (i) o	•	col (i) org		support
				lines 1 - 9 above	your gove	_	suppor	t?	ın the U	S?	
				or IRC section (see	docume	nt/					
				instructions))		ı	1	1		T	\dashv
				,	Yes	No	Yes	No	Yes	No	
											1

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	<u>iplete Pa</u>	rt III.)	
	ection A. Public Support endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(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							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	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							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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						
11	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)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493035013504

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Open to Public

	me of the organization t-Of-Door Academy of Sarasota Inc			loyer identification number
	W.T. Overniestiene Maintainine Doney Ad	wined France or Other Circles I		1731857
Ρœ	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		-unas	or Accounts. Complete if the
	organization anowered Tes to Form 330	(a) Donor advised funds		(b) Funds and other accounts
L	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
ı	Aggregate value at end of year			
5	Did the organization inform all donors and donor advis- funds are the organization's property, subject to the or	-	nor advi	sed Yes No
5	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the bene	_ _		r purpose
	conferring impermissible private benefit?	the everywhere annuared "Vee"	to Form	
	rt II Conservation Easements. Complete if		to Forn	11 990, Part IV, line 7.
L	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation		n histor	ically important land area
	Protection of natural habitat			d historic structure
	Preservation of open space	,		
			tha farm	o of a concentration
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a quaimed conservation contribution in	the form	n or a conservation
	,			Held at the End of the Year
a	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
c	Number of conservation easements on a certified histo	oric structure included in (a)	2c	
d	Number of conservation easements included in (c) accomistoric structure listed in the National Register	quired after 8/17/06, and not on a	2d	
3	Number of conservation easements modified, transferi	red, released, extinguished, or terminat	ted by th	ne organization during
	the tax year F			
ŀ	Number of states where property subject to conservat	ion easement is located ►		
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hai	ndling of	violations, and Yes No
5	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation ease	ements o	luring the year
,	Amount of expenses incurred in monitoring, inspecting	a and enforcing conservation easemen	ts durini	the year
	► \$	g, and emoreing conservation easemen	es dumm,	g tile , ca.
3	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ection 17	7 0 (h)(4)(B)(ı)
•	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the organization's financia		
'a i	t III Organizations Maintaining Collection Complete if the organization answered "Y		or Ot	her Similar Assets.
la	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote to	ets held for public exhibition, education	, or rese	arch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to thes	ets held for public exhibition, education		
	(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, histor following amounts required to be reported under SFAS			
а	Revenues included in Form 990, Part VIII, line 1			▶ \$

b Assets included in Form 990, Part X

Part	UII Organizations Maintaining Co	liections of Art	t, HIS	storic	allr	'eası	ires, or C	tne	r Similar As	ssets (c	continued)
	Using the organization's acquisition, access collection items (check all that apply)	on, and other reco	rds, cl	heck a	ny of t	he foll	owing that	are a	significant use	e of its	
а	Public exhibition		d	Γ	Loan	orexc	hange prog	rams			
b	Scholarly research		е	Г	Other	-					
c	Preservation for future generations										
	Provide a description of the organization's co	ollections and expla	ain hov	w thev	furthe	rthe	organization	1'S EX	cempt purpose	ın	
	Part XIII						-				
	During the year, did the organization solicit cassets to be sold to raise funds rather than t								nılar	┌ Yes	□ No
Part									es" to Form	·	
	Part IV, line 9, or reported an an										
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	edıary	for co	ntrıbu	tions	or other ass	ets	not	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing ta	ble		_				
									Aı	nount	
С	Beginning balance						-	1 c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?	•						┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatioi	n has l	oeen n	rovided in F	art :	XIII		Γ
Par											
		(a)Current year	(b)	Prior ye	ear	b (c) T	wo years back	(d)	Three years back	(e)Four	years back
1a	Beginning of year balance	115,999		1	15,999		115,999	9	115,999		115,999
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	115,999		1	15,999		115,999	9	115,999		115,999
2	Provide the estimated percentage of the curi	ent year end balan	ce (lır	ne 1g,	colum	n (a))	held as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment ► 100 000 %										
С	Temporarily restricted endowment F										
	The percentages in lines 2a, 2b, and 2c show	ıld equal 100%									
За	Are there endowment funds not in the posses	ssion of the organiz	ation	that a	re held	d and a	admınıstere	d for	the		
	organization by									Yes	_
	(i) unrelated organizations					•		•	3a		No
L	(ii) related organizations							•	3a	_	No
	Describe in Part XIII the intended uses of the	•						•	3	D	No
Part						<u> </u>					
ren	Description of property	int. See roini 3.	70, FE	(a)	Cost or	other	(b)Cost or o	ther	(c) Accumulated	(d) B	ook value
				basis	(invest	ment)	basıs (othe	er)	depreciation		
	and		_				8,697	7.730			8,697,730
	uildings						20,586		6,830,25	51	13,756,073
	easehold improvements						· · · · · · · · · · · · · · · · · · ·	,234	205,57	+	151,656
	quipment	· · · ·	•	-					1,495,24		707,005
	quipilient						2.202	.,249	1,493.74	14	707,003
e 0	ther						2,202 1,488				731,928

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.
(a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		13
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	1	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	
(a) Descrip	otion	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	<i>.</i>)	
Part X Other Liabilities. See Form 990, Part X	(, line 25.	
1 (a) Description of liability	(b) Book value	
Federal income taxes		
Interfund payable	54,700	
Theoriana payable	31,700	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	54,700	
2 Fin 48 (ASC 740) Footnote In Part XIII, provide the tex		nization's financial statements that reserves the

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	16,295,303
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	290,566
3	Subtract line 2e from line 1	3	16,004,737
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII) 4b 16,577		
c	Add lines 4a and 4b	4c	16,577
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	16,021,314
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	14,212,744
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	-278,478
3	Subtract line 2e from line 1	3	14,491,222
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)..............4b		
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	14,491,222

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 ınformatıon

Identifier	Return Reference	Explanation				
Part XI, Line 4b	Part XI, Line 4b Other revenue amounts included on 990 but not included in F/S	Recognized lease fee \$19760 Loss on Fixed Asset Disposal \$-3183				
Part X	Part X FIN48 Footnote	The School adopted guidance issued by the Financial Accounting Standards Board (FASB) on accounting for uncertainty in tax positions. Management believes the School has no material unrecognized income tax liabilities, including any potential loss of its tax exempt status. The School has no ongoing federal, state or local tax audits, however, the School's tax returns for fiscal year 2009 and subsequent years remain open to examination.				
Part V, Line 4 Part V, Line 4 Intended uses of the endowment fund		TO PROVIDE FUTURE FINANCIAL STABILITY FOR THE SCHOOL				

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DLN: 93493035013504

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 Out-Of-Door Academy of Sarasota Inc

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

 ${\bf Employer\ identification\ number}$

	59-1731857			
Pa	rt 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	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
			. 00	
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II	-		
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
е	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	O ther extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		Νo
		-		
	Does the organization receive any financial aid or assistance from a governmental agency?	6a		Νo
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

Part II 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)

ldentifier	Return Reference	Explanation			
Schedule E, Line 3 - Racially Nondiscriminatory Policy Publicized		Non-discrimination policy is included in the organizations admission materials			

Schedule E (Form 990 or 990-EZ) 2012

DLN: 93493035013504

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Employer identification number

ut-Of-Door Academy of Sara	asota Inc						59-1731857	
Part I Fundraising A	ctivities. Complete	e if the o	rganızatı	ion .	answered "Yes" i	to Form	n 990, Part IV	, line 17.
Indicate whether the org	anızatıon raısed funds	through a	ny of the 1	follo	wing activities Che	eck all t	hat apply	
a Mail solicitations			е	Γ	Solicitation of non	-goverr	ment grants	
b Internet and emails	olicitations		f	Γ	Solicitation of gov	ernmen	t grants	
c			g	굣	Special fundraisin	g event	s	
d In-person solicitation	ns							
2a Did the organization hav or key employees listed								Γ _{Yes} Γ Ν
b If "Yes," list the ten high to be compensated at lea			undraiser	rs)p	ursuant to agreeme	ents und	ler which the fur	ndraiser is
(i) Name and address of individual	(ii) Activity) Dıd ser have	(iv	') Gross receipts from activity		mount paid to retained by)	(vi) A mount paid to (or retained by)
or entity (fundraiser)		cust cont	custody or control of		,		col (i)	organization
		Yes	No No					
 otal			.					
3 List all states in which th	ne organization is regis	stered or lı	censed to	sol	ıcıt funds or has be	en notıf	ied it is exempt	I from registration or
· · · · · · · · · · · · · · · · · · ·								

		more than \$15,000 of fundr events with gross receipts o		ions and gross income	e on Form 990-EZ, III	ies I and 6D. List
			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through
			BANYAN BASH (event type)	(event type)	(total number)	col (c))
Φ_3	1	Gross receipts	463,950)		463,950
Revenue	2	Less Contributions	199,179			199,179
8	3	Gross income (line 1	199,179	7		199,179
		minus line 2)	264,77			264,771
	4	Cash prizes				
ses	5	Noncash prizes				
euse.	6	Rent/facility costs				
Expenses	7	Food and beverages .				
Direct	8	Entertainment				
Δ	9	Other direct expenses .	210,648	3		210,648
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	(d)		(210,648)
	11	Net income summary Combine I	ine 3, column (d), and line	210		54,123
Par	t II			"Yes" to Form 990, Pa	irt IV, line 19, or rep	orted more than
	I	\$15,000 on Form 990-EZ, li	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) Billyu	bingo/progressive bingo		col (a) through col
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
E E	4	Rent/facility costs				
百	5	Other direct expenses				
			┌ Yes	┌ Yes	┌ Yes	•
	6	Volunteer labor	┌ No	┌ No	┌ No	
	7	Direct expense summary Add line	s 2 through 5 in column (d)		
	8	Net gaming income summary Con	nbine lines 1 and 7 in coli	ımn (d)		
		Tree gaming meetic baninary con		(4)		
9		ter the state(s) in which the organiz				「Yes 「No
a b		the organization licensed to operate No," explain				I fes I No
-						,
10-	····		licances revoked suche			
10a b		re any of the organization's gaming Yes," explain				· · I Yes I No

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address ►			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
	<u> </u>	activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

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

DLN: 93493035013504

Open to Public Inspection

Name of the organization Employer identification number Out-Of-Door Academy of Sarasota Inc 59-1731857 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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. (f) Method of (a) Name and address of **(b)** EIN (d) A mount of cash (g) Description of (h) Purpose of grant (c) IRC Code (e) A mount of nonvaluation non-cash assistance or assistance organization section grant cash or government if applicable assistance (book, FMV, appraisal, other) Enter total number of section 501(c)(3) and government 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	(c)A mount of	(d)A mount of	(e)Method of valuation (book	(f)Description of non-cash assistance
	recipients	cash grant	non-cash assistance	FMV , appraisal, other)	
(1) Financial Assistance/Remission	147	1,606,297		fmv	tuition assistance

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
Grantmaker's Description of How Grants are Used		financial assistance is awarded based on need families are required to complete the following application components 1) income tax return with W-2 forms2) SSS parent financial statement (pfs)3) out-of-door supplementary financial assistance form (sfaf)the pfs is a third party form which collects financial data, used in part, to determine financial aid eligibility the pfs uses a multitude of financial factors that include family income, assets, liabilities, age of parents and extraordinary expenses the combination of results from the pfs and sfaf are used to determine need a final award is determined by the out-of-door financial assistance committee additionally, full-time faculty and staff are eligible for tuition remission which is provided as an important employee benefit this discount is provided at a level of 50% to 75% depending upon hire date

DLN: 93493035013504

OMB No 1545-0047

Schedule J (Form 990)

Internal Revenue Service

Department of the Treasury

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Compensation Information

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public **Inspection**

Employer identification number Name of the organization Out-Of-Door Academy of Sarasota Inc 59-1731857 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, 2 directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo 4b Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? **4**c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Νo 5b Any related organization? Νo If "Yes," to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Νo 6b Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

Νo

Νo

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of (i) Base compensation	W-2 and/or 1099-MIS (ii) Bonus & incentive compensation	C compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits (E) Total of columns (B)(1)-(D)		(F) Compensation reported as deferred in prior Form 990
(1)Joseph Runge Dir College Coun	(i) (ii)	107,375				48,563	155,938	
(2)David V Mahler Head of School	(i) (ii)	231,838			120,000	74,659	426,497	

Schedule J (Form 990) 2012

Part IIII Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier	Return Reference	Explanation
, ,	ın regards to selections on 1a	The organization's written employment contract includes an annual travel allowance of \$1,000 for the head of the school and his family. The head of the school's wife is also expected to participate in certain professional growth opportunities that may involve travel expense. None of these benefits are taxable compensation to the employee

Schedule J (Form 990) 2012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule K

(Form 990)

DLN: 93493035013504

OMB No 1545-0047

2012

Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

► Attach to Form 990. ► See separate instructions.

Internal Revenue Service Name of the organization

Open to Public Department of the Treasury Inspection Employer identification number Out-Of-Door Academy of Sarasota Inc 59-1731857 Part I **Bond Issues** (h) On (i) Pool (g) Defeased behalf of financing (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose ıssuer Yes No Yes No Yes No florida dvlp finance corp 59-3270584 34061SAA1 08-28-2008 13,500,000 refi , acquisition & construction Х Χ Part II **Proceeds** В С D Α Amount of bonds retired Amount of bonds legally defeased 2 Total proceeds of issue 3 13.500.000 Gross proceeds in reserve funds 4 5 Capitalized interest from proceeds Proceeds in refunding escrows 6 7 Issuance costs from proceeds 426,845 Credit enhancement from proceeds 8 Working capital expenditures from proceeds 9 Capital expenditures from proceeds 10 11,461,028 Other spent proceeds 11 1,612,127 Other unspent proceeds 12 Year of substantial completion 13 2011 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Χ 14 Were the bonds issued as part of an advance refunding issue? Χ 15 Has the final allocation of proceeds been made? Χ 16 Does the organization maintain adequate books and records to support the final 17 Χ allocation of proceeds? Part III **Private Business Use** Α В C D Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned Χ

Are there any lease arrangements that may result in private business use of bond-

property financed by tax-exempt bonds?

financed property?

Χ

Sche	dule K (Form 990) 2012									Page 2
Par	Private Business Use (Continued)									
						В		<u>c</u>		D
			Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private of bond-financed property?			Х						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?									
С	Are there any research agreements that may result in private business us financed property?	e of bond-		Х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper		Х							
4	Enter the percentage of financed property used in a private business use be other than a section $501(c)(3)$ organization or a state or local government			%		%		%		%
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anothe (c)(3) organization, or a state or local government			%		%		%		%
6	Total of lines 4 and 5			%		%		%		%
7	Does the bond issue meet the private security or payment test?									
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?									
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?									
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under									
Do	Regulations sections 1 141-12 and 1 145-2?									
Par	t IV Arbitrage	Α		В			С		D	
		Yes	No	Yes		No Yes		No	Yes	No
1	Has the issuer filed Form 8038-T?		Х							
2	If "No" to line 1, did the following apply?									
 а	Rebate not due yet?	X							I	
b	Exception to rebate?									
c	No rebate due?									
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed			-					Į.	
3	Is the bond issue a variable rate issue?									
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	Х								
b	Name of provider Northern Tr									
С	Term of hedge		2 2000							
d	Was the hedge superintegrated?		Х							
e	Was a hedge terminated?		Х							
				•						

Part IV Arbitrage (Continued)

Identifier

Return Reference

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	Х							
b	Name of provider	ambac							
С	Term of GIC		3 0000						
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	Х							
6	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?		×						
Pa	rt V Procedures To Undertake Corrective Action								
		Δ.	1	В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	Х							

Schedule K (Form 990) 2012

Explanation

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As Filed Data -

DLN: 93493035013504

Schedule L

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

Open to Public Inspection

Out-Of-Door Academ		a Inc						En	npioye	r Identii	rication	i numbei	ſ
	,							59	-173	1857			
						nd section 5							
						Part IV, line 25							
1 (a) Name o	of disquali	fied pers			between dis		(c) Descrip	otion o	f trans	saction	<u> </u>	(d) Corr	ected?
				person ar	nd organizati	on						Yes	No
											-		
						<u> </u>							
2 Enter the am	ount of ta	x incurre	d by organiza	ition man	agers or dis	qualified perso	ns during the	yearı	under	section • +			
									•	- > .			
3 Enter the am	ount of ta	x, ii aliy,	on line 2, ab	ove, reiiii	bursed by th	e organization			•	• э			
Part II Loar	ns to an	d/or F	rom Inter	ested F	ersons.								
						-EZ, Part V, I	ine 38a, or Fo	rm 99	0, Par	t IV, lın	e 26, o	r ıf the	
			n amount on l				(6) 5 1	Ι,		1		T 23334	
(a) Name of interested	with orga		(c) Purpose of loan	(d) Loa		(e)Original principal	(f)Balance due) In ault?	(h Appro	-	(i)Wr agreer	
person	With orga	111124 (1011	or roun	organiza		amount	""	"	auic	by boa		lagice:	
										commi	ttee?		
				То	From			Yes	No	Yes	No	Yes	No
												_	
										-	<u> </u>	_	
												_	
										-	1	_	
										-	-	_	
				L .						+		_	
Total			D61	<u>► \$</u>									
			ce Benefit			rersons. rm 990, Part	+ TV line 27						
(a) Name of inte			ationship bet			of assistance	(d) Type of		tanco	(0)	Purnos	e of ass	ıctance
person	ilesteu		ted person ar		C) Amount c	n assistance	(u) Type of	1 05515	cance	(6)	ruipos	e 01 a55	istance
,			organization										
·													
							-						

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.								
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?				
				Yes	No			
(1) Elizabeth Mahler	Family Mbr	15,000	Indep Contractor		Νo			

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Ident if ier	Return Reference	Explanation
		Schedule I (Form 990 or 990-F7) 2012

Schedule L (Form 990 or 990-EZ) 2012

Department of the Treasury

Internal Revenue Service

OMB No 1545-0047

SCHEDULE M (Form 990)

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Inspection

Name of the organization Out-Of-Door Academy of Sarasota Inc

Employer identification number

art I Types of Property	1			
	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
Art—Works of art	Χ	1	4,800	fmv
Art—Historical treasures .				
Art—Fractional interests				
Books and publications				
Clothing and household goods				
Cars and other vehicles				
Boats and planes				
Intellectual property				
Securities—Publicly traded .	Χ	10	797,602	FMV
Securities—Closely held stock .				
Securities—Partnership, LLC, or trust interests				
Securities—Miscellaneous				
Qualified conservation contribution—Historic structures				
Qualified conservation contribution—Other				
Real estate—Residential .				
Real estate—Commercial				
Real estate—Other				
Collectibles				
Food inventory				
Drugs and medical supplies .				
Taxidermy				
Historical artifacts				
Scientific specimens				
Archeological artifacts				
Other►(OtherMisc)	Χ	1	2,500	
Other ► (Merchandise)	Х	8	5,800	fmv
Other►(<u>Wine</u>)	Х	125	4,512	fmv
Other ► (AC System) Sporting	X	1	6,500	fmv
Other►(<u>Events</u>)	Х	1	1,600	
Other►(<u>Jewelry</u>)	Χ	3	452	FMV
Number of Forms 8283 received befor which the organization completed				29

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

OMB No 1545-0047

OMB NO 1545-00

2012

Open to Public Inspection

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.

Name of the organization
Out-Of-Door Academy of Sarasota Inc

Employer identification number

59-1731857

ldentifier	Return Reference	Explanation
	schedule k, part iv, line 4c	the organization invested in a gic contract in september of 2008, the contract expired in april, 2010, and was not renewed
	form 990, part v, line 2a & 2b	the organization uses a payroll leasing company and does not actually file a form w-3 however, in the state of florida, the organization and the leasing company are considered co-employers the number of employees listed in part v is the number of employees providing services to the organization but the employees are actually included on the w-3 of the leasing company the leasing company files all payroll tax returns related to these employees
Form 990, Part XI, Line 9	Other Changes In Net Assets Or Fund Balances - Other Decreases	Recognized lease fee = -\$19760
Form 990, Part XI, Line 9	Other Changes In Net Assets Or Fund Balances - Other Increases	change in value of interest rate swap = \$281661
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	the organization makes its financial statements, conflict of interest policy and governing documents available to the public upon request copies of the organization's tax returns can also be found at www guidestar org
Form 990, Part VI, Line 15a	Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	benchmarking data from index (formerly msbp), nais and fcis are used to determine appropriate compensation for all employees. In addition to this benchmarking data, the board chair and executive committee are involved in determining the compensation plan for the head of the school. Top management compensation plans are determined by the head of the school.
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	the current policy covers all trustees the executive committee makes the determination of whether a reported trustee conflict would be detrimental to a person's continued service on the board
Form 990, Part VI, Line 11b	Form 990, Part VI, Line 11b Form 990 Review Process	Form 990 is reviewed by the cfo and the finance committee. Following approval by the finance committee, the 990 is distributed to the full board of TRUSTEES for discussion prior to finalization and submission to the irs
Form 990, Part VI, Line 4	Form 990, Part VI, Line 4 Description of Significant Changes to Organizational Documents	The organization has made the following significant changes to its bylaws on 5/21/2013 1 Special meetings may now be called by a vote of at least two-thirds (2/3) of the entire Board of Trustees, while previously, they could be called upon receipt of the written request of only one third (1/3) of the Board 2 Previously, committee members were allowed to receive expense reimbursements and special compensation for unusual or exceptional services provided to the organization by resolution of the Board. The amended bylaws allow no compensation to be received by any committee members.