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## Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Α	For t	he 2013 cale	ndar year, or tax y	ear beginn	ing		, 2013, an	d endin	g			,		
В	Check	ıf applicable	C Name of organiza	tion LEAI	RNING TO SE	RVE, I	NC			D Er	nployer I	Identification N	ımber	
	∏ <sub>A</sub>	ddress change	Doing Business A			•				2	6-41	96119		
	$\prod_{N}$	ame change	Number and stree	et (or PO box	f mail is not delivered to	street addres	is)	Room/s	suite		elephone			
	$\mathbf{H}$	itial return	12460 ALPH	ΔΡΕΨΨΔ	SТ			127		-   '	4041	867-33	65	
	$\mathbf{H}$	erminated			ountry, and ZIP or foreig	n postal code	<del></del>	1121		<del></del>	101/	007 33	<del>55</del>	
	Н	mended return			,,,,,,	,		0004		ء ۾		\$ 140	705	
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	∟_^	pplication pending		, ,			m	0004	1				Yes	ANO NO
					PHARETTA ST AL			0004	i if	'No,' attach a	list (see	luded? instructions)	□,63	□,,,
<u> </u>		-exempt status	X 501(c)(3)	501(c) (	) ◀ (insert no	1) 4	947(a)(1) or	527						
<u>J</u>		bsite: ►	1721					<del></del>		roup exempti	T			
<u>K</u> _		n of organization	X Corporation	Trust	Association Other	er -	L Year	of formation	on 2	009	M State	e of legal domicil	e GA	
Pa		Summa		<del> </del>										
ŀ	1	•	be the organization		_			:				-12 UNDER THE AU		
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င္ပ	3		oting members of t									3		5
≪	4		dependent voting	-	• • •	•						4		<del></del>
ië.	5		r of individuals em									5		
Activities & Governance	6	Total numbe	r of volunteers (est	timate if ned	essary)						[	6		1
왕	7a	Total unrelat	ed business reven	ue from Pai	t VIII, column (C),	line 12 .					[	7a		
	b	Net unrelate	d business taxable	income fro	m Form 990-T, line	e 34 🕠					[	7b		
- 1										Prior Y	'ear	Cui	rent Ye	ar
اها	8		s and grants (Part '							16	7,20	7.	146,	785.
Revenue	9	_	vice revenue (Part	_	•				·					
je K	10		ncome (Part VIII, c		•			سنسنب	-					
ш.	11	Other reveni	ue (Part VIII, colum	ın (A), lines	5, 6d, 8c, 9c, 10c,	, and 11e)	13/	ED.	·					
	12	l otal revenu	e – add lines 8 thi	rough 11 (m	iust equal Part VIII	column	B) line 124	منسب	<del>181</del>		7,20			785.
	13		imilar amounts pa	-		(3)	The state of the s		/≱I	12	4,80	0.	<u>172,</u>	700.
	14	Benefits paid	to or for members	s (Part IX, c	olumn (A), line 4)	151.	LINY 19	2014 -	18t					
S	15		er compensation, o			old By (A),	uines 5-10)	مستنست						
Expenses	16 a	Professional	fundraising fees (f	Part IX, colu	ımn (A), lıne 11e)	1.7.	ÖGDEN	I: U:I		<u> </u>				
, pe	b	Total fundra	sing expenses (Pa	ırt IX, colum	ın (D), line 25) 🟲		0000	0.						!
	17	Other expen	ses (Part IX, colum	nn (A), lines	11a-11d, 11f-24e	) · Exercise					37	7.	2,	928.
to of LW (Fig.)	18	Total expens	ses Add lines 13-1	7 (must equ	ual Part IX, column	n (A), line :	25)		. 🗀	12	5,17	7.		628.
<u>`</u>	19	Revenue les	s expenses Subtra	act line 18 f	rom line 12						2,03			843.
200 C					-	· · · -			Beo	inning of C			d of Yea	
alar	20	Total assets	(Part X, line 16) .								7,18		18,	342.
7.55 E	21	Total liabilitie	es (Part X, line 26)						.		2,74			740.
-x-2	22	Net assets of	r fund balances S	ubtract line	21 from line 20 .				. 🗀	4	4,44	5.	15.	602.
Ψa	rt II	Signatu	re Block				· · · · ·		•	<u>-</u> -	.,	<u> </u>	,	
				ed his return, i	ncluding accompanying	schedules ar	d statements, an	d to the be	st of my	knowledge a	nd belief.	it is true, correct	and	
~comt	olete D	eclaration of prep	eclare that I have examinate are fother than officer) is	based on all in	formation of which prep	arer has any	knowledge				1	1 .		
(2)		<b>.</b> . /	Vander:	Huasi						5	1151	12014	_	-
Šię	ın	Signa	ture of officer	1						Date	7			
He	re	► MAI	NDV D HUDSON	N										
		Туре	or print name and title		A									
		Print/Type	preparer's name		Preparer's signature	$\mathcal{U}(0)^{-}$		Date		Check		if PTIN		
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			Atlant			G <i>P</i>		-6244		Phone				
May	/ the	IRS discuss ti	nis return with the p		own above? (see i			· · · ·				X Y	es	No
			Reduction Act No					TE	EA0101	11/08/13				(2013)

	LEARNING TO SI		26-4196119 Pa	<u> </u>
Ьa	Statement of Program			
	Check if Schedule O contains	a response or note to any line in this Part III		<u>. Ll</u>
1	Briefly describe the organization's mis	ssion		
	AWARDING SCHLOLARSHIPS	TO CHILDREN IN GRADES K-12 UNDER THE A	UTHORTITY OF HB 1133	
2	Did the organization undertake any si	gnificant program services during the year which were not listed or	the prov	
-			· — —	
			Yes X	No
_	If 'Yes,' describe these new services of			
3		g, or make significant changes in how it conducts, any program ser	rvices? Yes X	No
	If 'Yes,' describe these changes on So			
4	Describe the organization's program s	service accomplishments for each of its three largest program servi	ices, as measured by expenses	
	others the total expenses and reven	nizations and section 4947(a)(1) trusts are required to report the an ue, if any, for each program service reported	nount of grants and allocations to	
	outloto, the total expendes, and reven	do, ii arry, for each program service reported		
	10.1		<del></del>	
4 8	a (Code) (Expenses \$		_)(Revenue \$ 146,78	<u>5.</u> )
	AWARDED SCHLOLARSHIPS	TO CHILDREN IN GRADES K-12 UNDER THE AU	THORTITY OF HB 1133	
•	*			
		<b></b>		
4 t	b (Code: ) (Expenses \$	including grants of \$	) (Revenue \$	<del></del>
				,
	c (Code) (Expenses \$			
40	c (Code) (Expenses \$	including grants of \$		
40	c (Code) (Expenses \$	Including grants of \$	) (Revenue \$	
40	c (Code) (Expenses \$	including grants of \$  Schedule O.) including grants of \$  (Revenue	) (Revenue \$	

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, 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	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
í	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a		х
l	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	11 b		х
(	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		х
(	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
1	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	11 f		х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	х	
1	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	12 b		x
	Is the organization a school described in section 170(b)(1)(A)(ii)? If Yes, complete Schedule E	13	<u> </u>	X
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
I	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	<u> </u>	х
	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	<u> </u>	х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	<u> </u>	X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	ol .	X

Checklist of Required Schedules (continued) Yes No 21 Х Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part Х 22 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 Х 23 Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . . . . . . 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c d Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year? . . . . 24d Х 25a 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 Х Schedule L, Part I 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II Х 26 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 Χ 27 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). 28a Х b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV . . Х 28b 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 X 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M . . . . . . . . . . 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Χ Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I . . . . . . . . Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 Х Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 Х 34 Χ 35a Х 35b Х 36 Х 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

BAA

Form 990 (2013)

	Cfleck if Schedule O contains a response or note to any line in this Part V		Yes	No
1 9	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		163	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	10		
h	ments, filed for the calendar year ending with or within the year covered by this return   2 a    If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-20		
2 2	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		
	If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O			
		3 b		
	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)?	4 a		Х
b	If 'Yes,' enter the name of the foreign country	- 1		
	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?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7 a		X
ь	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		-
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
d	If 'Yes,' indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
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		
a	Sponsoring organizations maintaining donor advised funds.	<b>-</b> Ŭ		
,	Did the organization make any taxable distributions under section 4966?	9 a		X
	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		X
	Section 501(c)(7) organizations. Enter	3.5		<del></del>
	Initiation fees and capital contributions included on Part VIII, line 12········ 10a			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
t	against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
t	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L		
a	Is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
ŧ	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			L
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	a If 'Yes' has it filed a Form 720 to report these payments? If 'No' provide an explanation in Schedule O	14 h		

FORT	26-4196119 (2013) LEARNING TO SERVE, INC			age o
Par	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes s Schedule O. See instructions.	in		[:]
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>	• • •	- X
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
t	Enter the number of voting members included in line 1a, above, who are independent   1 b   5			
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		
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		х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	<b></b>		,,
	members of the governing body?	7 a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	l <u>.</u>		.,
	stockholders, or other persons other than the governing body?	7 b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8 a	Х	
b	Each committee with authority to act on behalf of the governing body?	8 b	Х	
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		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.	)
			Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?	10 a		Х
	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?	10 b		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			<u> </u>
12 a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	х	ļ .
c	EDID the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	Х	
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14	X	<del>  ^</del>
15	Did the process for determining compensation of the following persons include a review and approval by independent	1.4		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	- <u>,-</u> -		l
	The organization's CEO, Executive Director, or top management official	15 a		X
t	Other officers of key employees of the organization	15 b		X
16 a	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			<u> </u>
t	taxable entity during the year?	16 a		X
<u> </u>	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		<u> </u>
<u>Sec</u>	tion C. Disclosure  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 Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available			
	Inspection Indicate how you make these available Check all that apply  Own website  Another's website  Upon request  Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available the public during the tax year.	ole to		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	on:		
	AMANDA HUDSON 12460 ALPHARETTA ST ALPHARETTA GA 30004 (4		867-	3365
BAA				2013)

Form 990 (2013) LEARNING TO SERVE, INC	26-4196119	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highe Independent Contractors	st Compensated Employe	ees, and
Check if Schedule O contains a response or note to any line in this Part VII		L
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compens	sated Employees	
1 a Complete this table for all persons required to be listed. Report compensation for the calendar year end organization's tax year	ing with or within the	_
• List all of the organization's current officers, directors, trustees (whether individuals or organizations) compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.	, regardless of amount of	

- List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title  (B) Average hours per hour	
Comparison   Com	her
EXECUTIVE DIRECTOR X 0. 0. (2) (3) (4) (5) (6) (7) (7) (7)	n d
(2) (3) (4) (5) (6) (7)	
(3) (4) (5) (6) (7)	0
(6) -(7)	
_(7)	
(8)	
(9)	
(10)	
(11)	_
(12)	-
(13)	
(14)	

Part VII   Section A. Officers, Directors	, Trustees,	Key	Em			es, a	anc	Highest Con	pensated Emp	loyees	(conti	nued)
• (A) Name and title	Average hours	box	, unles	s per	, Ition More Ison i	than on s both a or/truste	an I	(D)  Reportable compensation from	(E)  Reportable compensation from	Es	(F) timated nt of other	or.
	week (list any hours for related organize - tions below dotted line)	Individua or direct	r <del> =</del> r			Highest compensated employee		the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	com fr orga and	nt or othe pensation om the inization related inization	n
(15)											-	
(16)												
(17)												
(18)												
(19)							-					<u>.                                    </u>
(20)												
(21)												
(22)												
(23)												<del></del>
(24)		-										
(25)												
1 b Sub-total		• • •	• •		• •	• •	-	0.	0.			0.
c Total from continuation sheets to Part VII,							•					
d Total (add lines 1b and 1c)							ive	0 . d more than \$100,0	0. 000 of reportable cor	npensat	ion	0.
from the organization									· · ·			
3 Did the organization list any former officer, di										. 3	Yes	No
<ul> <li>on line 1a? If 'Yes,' complete Schedule J for s</li> <li>For any individual listed on line 1a, is the sum the organization and related organizations green</li> </ul>	of reportable of	ompe	nsati	on a	and	other	roo	mpensation from				X
such individual			• •		• •	• • •	٠			. 4		X
for services rendered to the organization? If '	es,' complete	Sched	lule J	l for	suc	h per	son		· · · · · · · · · · · · · · · · · · ·	. 5		Х
Section B. Independent Contractors  1 Complete this table for your five highest comp	ensated indep	enden	t con	ntrac	ctors	that	rece	eived more than \$	100.000 of			
compensation from the organization Report of	ompensation f	or the	cale	nda	r yea	ar end	ling	with or within the	organization's tax ye			
(A) Name and business	address							Description of	f services	Compe	C) nsatio	n
									<del></del>			
											_	
2 Total number of independent contractors (incl	<del>-</del>	mited	to th	ose	liste	ed abo	ove	) who received mo	re than	<del></del>		
\$100,000 of compensation from the organizat	ion 💆											

		Check if Schedule O contains a respoi	nse or note to any lin	e in this Part VIII			
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
₹ <u>₹</u>		Federated campaigns 1a					
폴죍		Membership dues 1 b					
S, G		Fundraising events 1 c					
띩		Related organizations 1 d					
S, [	е	Government grants (contributions) 1 e					
RIBUTION OTHER S		All other contributions, gifts, grants, and similar amounts not included above	146,785.				
	_	Noncash contributions included in lines 1a-1f \$					
<u> </u>	<u>h</u>	Total. Add lines 1a-1f	<del></del>	146,785.			
2	•		Business Code				
	2 a						
꺴	b						
爰	С						
SE	d						
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS.	е						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f	,				
	3	Investment income (including dividends,	interest and				
		other similar amounts)	1				
	4	Income from investment of tax-exempt be					
	5	Royalties					
	_	(ı) Real	(ii) Personal				
-		Gross rents					
		Less rental expenses					
		Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Secunties	(ii) Other				
		assets other than inventory .					
	b	Less cost or other basis					
		and sales expenses					
- 1		Gain or (loss)					<u> </u>
	d	Net gain or (loss)					
щ	8 a	Gross income from fundraising events					Ì
OTHER REVENUI		(not including. \$					1
Æ		of contributions reported on line 1c).					
쯦	_	See Part IV, line 18					
ĕ		Less direct expenses					
		Net income or (loss) from fundraising even	ents	<del> </del>			
	9 a	Gross income from gaming activities.					
		See Part IV, line 19	. ————				
			p				
	С	Net income or (loss) from gaming activiti	es •				
	10 a	Gross sales of inventory, less returns and allowances	_				1
			a				
		•	p[				
	С	Net income or (loss) from sales of invent  Miscellaneous Revenue	<del></del>				
	44 -	······································	Business Code	<del></del>			<del> </del>
	11 a						
	b			<del>_</del>	<del> </del>	<del> </del>	
	C	All other manage				<del></del>	
		All other revenue		<del></del>	<u> </u>		
		Total. Add lines 11a-11d					
	12	Total revenue. See instructions		146,785.	L	<u> </u>	

## Form 990 (2013) LEARNING TO SERVE, INC Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns	All other organizations must complete column (A)	

Do r 6b, 7	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21			g 2. 3.po.1000	
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	172,700.	172,700.		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16		1		
4 5	Benefits paid to or for members				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages			·	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				· · · · · · · · · · · · · · · · · · ·
а	Management				
	Legal		-		
	Accounting	1,875.	1,875.	0.	0.
	Lobbying	1,073.	1,075.	· · · · · · · · · · · · · · · · · · ·	
-	Professional fundraising services See Part IV, line 17				· ·
	Investment management fees	·			
9					
12	Advertising and promotion	250.	250.	0.	0.
13	Office expenses	264.	264.	0.	0.
14	Information technology	228.	228.	0.	0.
15	Royalties				
16	Occupancy		1		
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	-			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				<u>.</u>
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
ē	BANK_CHARGES	29.	29.	0.	0.
	REGISTRATION FEE	30.	30.	0.	0.
	P.O. BOX	252.	252.	0	0.
	1		2.72.	<u> </u>	
	e All other expenses	· ·· · · · ·			
25	Total functional expenses Add lines 1 through 24e.	175,628.	175,628.	0.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	2.0,020.	2,0,020.		· ·
	Check here ► if following SOP 98-2 (ASC 958-720)				

Form 990 (2013) LEARNING TO SERVE, INC.
Part X Balance Sheet

	`		(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	47,185.	1	18,342.
	2	Savings and temporary cash investments		2	
ı	3	Pledges and grants receivable, net		3	
Ì	4	Accounts receivable, net		4	
	•	ľ			
1	5	Loans and other receivables from current and former officers, directors,			
1		trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	<del></del>
ŀ	6	Loans and other receivables from other disqualified persons (as defined under			····
	•	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
İ		employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	· · · · · · · · · · · · · · · · · · ·
Αl	7	Notes and loans receivable, net		7	
A S E T S		Inventories for sale or use		8	
E	8		· · · · · ·	<del></del>	
s	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation 10 b		10 c	
-	11	Investments – publicly traded securities		11	
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	18,342.
-	17	Accounts payable and accrued expenses	47,105.	17	10,542.
	18	Grants payable		18	····
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Ļ	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ABILITIES	22	Loans and other payables to current and former officers, directors, trustees.			
Ļ		key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	·····		
ţ			2,740.	22	2,740.
Ė	23	Secured mortgages and notes payable to unrelated third parties		23	
S	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	2,740.	26	2,740.
Ē		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete			
1		lines 27 through 29, and lines 33 and 34.			
ASSETS	27	Unrestricted net assets	44,445.	27	15,602.
Ĕ	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
R		Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
F		and complete lines 30 through 34.			
#DZD	30	Capital stock or trust principal, or current funds		30	
B	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ĺ	32	Retained earnings, endowment, accumulated income, or other funds		32	
BALANCES	33	Total net assets or fund balances	44,445.	33	15,602
Š	34	Total liabilities and net assets/fund balances	47,185.	34	18,342.
BA				·	Form <b>990</b> (20

Form	990 (2013) LEARNING TO SERVE, INC 26-4	4196119		Pa	ge <b>12</b>
Par	t XI Reconciliation of Net Assets		-		
	Check if Schedule O contains a response or note to any line in this Part XI				$\cdot \square$
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	46,7	85.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	75,6	28.
3	Revenue less expenses Subtract line 2 from line 1	3	_	28,8	43.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		44,4	45.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
<u> </u>	column (B))	10		15,6	<u>.02.</u>
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	· · · · · ·			·П
				Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	Χ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
t	Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both				
	X   Separate basis		L		
C	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?	t, 	2 c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a		Х
t	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required au	ıdıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b		
BAA			Form	990 (	2013)

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Open to Public Inspection

Employer Identification number

Schedule A (Form 990 or 990-EZ) 2013

LEARNING TO SERVE, INC 26-4196119 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross 9 investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h 11 Type III - Functionally integrated Type III - Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) 11 g (i) A family member of a person described in (i) above? . . . . 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . . 11 g (iii) Provide the following information about the supported organization(s). h (ii) EIN (Iv) Is the organization in column (i) listed in (i) Name of supported organization (ill) Type of organization (described on lines 1-9 above or IRC section (vii) Amount of monetary (v) Did you notify organization in he organization in support column (i) of your support? column (I) organized in the US? your governing document? (see instructions)) Yes Yes No Yes (A) (B) (C) (D) (E) **Total** 

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

Schedule A (Form 990 or 990-EZ) 2013 LEARNING TO SERVE, INC 26-4196119

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

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

Sec	tion A. Public Support						
Cale: egir	ndar year (or fiscal year nning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	0.	14,500.	7,500.	167,207.	146,785.	335,992.
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	0.	14,500.	7,500.	167,207.	146,785.	335,992.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4		· · · · ·		<u>.</u> <u></u>		335,992.
Sec	tion B. Total Support					1	<del></del>
	ndar year (or fiscal year nning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	0.	14,500.	7,500.	167,207.	146,785.	335,992.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10		1				335,992.
12	Gross receipts from related activit	ies, etc (see instru	ctions)			12	0.
	First five years. If the Form 990 a organization, check this box and s	top here		third, fourth, or fifth	tax year as a sec	tion 501(c)(3)	▶ X
	tion C. Computation of Pu				<del></del>		
14	Public support percentage for 201 Public support percentage from 20	3 (line 6, column (l	r) divided by line 1°	i, column (f))		15	%
	a 33-1/3% support test 2013. If	the organization di	id not check the bo	x on line 13, and t	he line 14 is 33-1/3	3% or more, check	this box
	and stop here. The organization of	•	,				
(	b 33-1/3% support test — 2012. If the and stop here. The organization	the organization die qualifies as a publi	d not check a box of cly supported orga	on line 13 or 16a, a Inization	and line 15 is 33-1/	/3% or more, check	this box
17 8	a 10%-facts-and-circumstances to or more, and if the organization m the organization meets the 'facts-a	eets the 'facts-and	-circumstances' te	st, check this box a	and stop here. Ex	plaın ın Part IV hov	٧
	b 10%-facts-and-circumstances to or more, and if the organization m organization meets the 'facts-and	eets the 'facts-and -circumstances' tes	i-circumstances' te st. The organization	st, check this box a n qualifies as a put	and <b>stop here.</b> Ex blicly supported or	plain in Part IV hov ganization	v the · · · · · · ▶ □
18	Private foundation. If the organiz	zation did not chec	k a box on line 13,	16a, 16b, 17a, or	17b, check this bo	x and see instruction	ons · · · · ▶ ∐
BA/	· · · · · · · · · · · · · · · · · · ·				80	hadula A (Form 90	0 or 990-EZ) 2013

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the	box on line 9 of Part I or if the organiza	ation failed to qualify under Pa	irt II If the organization fails
to qualify under the tests listed hel	ow please complete Part II )		

<u>Section A. Public S</u>	upport						
Calendar year (or fiscal yr be		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
Gifts, grants, contrit and membership fer received (Do not in any 'unusual grants)	es clude		·	<del>-</del> .			·
2 Gross receipts from sions, merchandise services performed furnished in any act	admis- sold or or facilities						
related to the organ tax-exempt purpose	ization's						
3 Gross receipts from that are not an unre or business under s	lated trade						
4 Tax revenues levied organization's bene either paid to or exp	fit and ended on		i				
tts behalf	es or ly a o the						
6 Total. Add lines 1 tl 7 a Amounts included c 2, and 3 received fr disqualified persons	n lines 1, om						
b Amounts included of and 3 received from disqualified persons exceed the greater 1% of the amount of for the year	other than that of \$5,000 or n line 13						
c Add lines 7a and 7b							
8 Public support (S 7c from line 6)	ubtract line						
Section B. Total Su	pport						
Calendar year (or fiscal yr be	ginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line (	3						
10a Gross income from dividends, payment on securities loans, royalties and incom similar sources	s received rents, e from						
b Unrelated business income (less sectio taxes) from busines acquired after June	n 511 ses 30, 1975						
c Add lines 10a and 3  11 Net income from unrela activities not included in whether or not the busing regularly carried on	ted business line 10b, ness is						
12 Other income. Do gain or loss from th capital assets (Expl Part IV)	e sale of ain in						
13 Total Support. (Add	Ins 9,10c, 11 and 12)				1		
14 First five years. If organization, check	the Form 990 is this box and s	for the organization	on's first, second,	third, fourth, or fift	h tax year as a sec	tion 501(c)(3)	▶ □
Section C. Comput	ation of Pu	blic Support F	Percentage				
15 Public support perc	entage for 201	3 (line 8, column (f	) divided by line 13				*
16 Public support perc	entage from 20	112 Schedule A, Pa	art III, line 15	<u> </u>		16	ક
Section D. Comput							
17 Investment income			• • •				8
18 Investment income							8
19 a 33-1/3% support to is not more than 33	-1/3%, check tl	his box and stop h	ere. The organiza	tion qualifies as a	publicly supported	organization	
b 33-1/3% support t line 18 is not more	than 33-1/3%,	check this box and	stop here. The o	rganization qualifi	es as a publicly su	oported organizatio	n ▶
20 Private foundation	If the organiz	ation did not check	ca box on line 14,	19a, or 19b, chec	k this box and see	instructions	<u></u> .▶ [
BAA			TEEA0403	06/28/13	S	chedule A (Form 9	90 or 990-EZ) 2013

## SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service
Name of the organization

LΕλ	ARNING TO SERVE, INC	26-4196119
	例盤 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Ac	counts.
	Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.	
	(a) Donor advised funds (b)	Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3		
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used on for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	ġ <u> </u>
Pa	Till Conservation Easements.	
•	Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	ally important land area
	Protection of natural habitat Preservation of a certified to	nistoric structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a cons	servation easement on the
	last day of the tax year	<del></del>
		Held at the End of the Tax Year
	a Total number of conservation easements	
	b Total acreage restricted by conservation easements	
	c Number of conservation easements on a certified historic structure included in (a)	
	d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organiz tax year	ation during the
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations	
	and enforcement of the conservation easements it holds?	ليبيا ليبيا
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the	year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	
_		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statem include, if applicable, the text of the footnote to the organization's financial statements that describes the organization easements.	ization's accounting for
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Other Si Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.	milar Assets.
1	a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance in Part XIII, the text of the footnote to its financial statements that describes these items.	d balance sheet works of of public service, provide,
	b if the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and ba historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of p following amounts relating to these items	
	(i) Revenues included in Form 990, Part VIII, line 1	▶\$
	(II) Assets included in Form 990, Part X	▶\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, particular amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
	a Revenues included in Form 990, Part VIII, line 1	▶\$
	<b>b</b> Assets included in Form 990, Part X	▶\$

	NING TO SERV			26-41 <u>9</u>	
Partilla Organizations Mainta	aining Collectio	ns of Art, Hist	orical Treasures, o	r Other Similar Ass	ets (continued)
<ol> <li>Using the organization's acquisition items (check all that apply).</li> </ol>	on, accession, and ot	her records, check	any of the following that	are a significant use of its	s collection
a Public exhibition		d Loan	or exchange programs		
b Scholarly research		e Other	•		
c Preservation for future genera	ations				
4 Provide a description of the organ Part XIII		and explain how the	ey further the organizatio	on's exempt purpose in	
5 Dunng the year, did the organizat to be sold to raise funds rather that	ion solicit or receive on to be maintained a	donations of art, his	storical treasures, or othe	er similar assets	Yes No
Escrow and Custodian line 9, or reported an a	al Arrangements amount on Form	s. Complete if t 990, Part X, lin	he organization ans e 21.	wered 'Yes' to Form	990, Part IV,
1 a Is the organization an agent, trust on Form 990, Part X?	ee, custodian, or oth	er intermediary for	contributions or other as	sets not included	
<b>b</b> If 'Yes,' explain the arrangement i					Yes No
					Amount
<b>c</b> Beginning balance				1 c	
d Additions during the year				1 d	
e Distributions during the year				1 e	
f Ending balance				1f	
2 a Did the organization include an ar	mount on Form 990, I	Part X, line 21?			Yes No
<b>b</b> If 'Yes,' explain the arrangement i					
Part V Endowment Funds.	Complete if the o	rganization ans	swered 'Yes' to Form	n 990, Part IV, line 1	0.
	(a) Current year	(b) Prior yea	r (c) Two years back	k (d) Three years back	(e) Four years back
1 a Beginning of year balance			·		
<b>b</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					<del></del>
2 Provide the estimated percentage	of the current year e	end balance (line 1	g, column (a)) held as:		<u></u>
a Board designated or quasi-endow		% %	91 (-// ====		
b Permanent endowment ►	96	<del></del> •			
c Temporarily restricted endowmen		%			
The percentages in lines 2a, 2b, a					
3 a Are there endowment funds not in	·		t are held and administer	red for the	
organization by					Yes No
(i) unrelated organizations					. 3a(i)
(ii) related organizations	<i></i> .				. 3a(ii)
b If 'Yes' to 3a(II), are the related or	ganizations listed as	required on Sched	ule R?		. 3b
4 Describe in Part XIII the intended	uses of the organiza	tion's endowment f	funds		· · · · · · · · · · · · · · · · · · ·
Part VII Land, Buildings, and	Equipment.				
Complete if the organi		'Yes' to Form 9	990, Part IV, line 11	a. See Form 990, Pa	ırt X, line 10.
Description of property		ost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land					
<b>b</b> Buildings					
c Leasehold improvements					
d Equipment					· · · · · · · · · · · · · · · · · · ·
e Other					
Total. Add lines 1a through 1e (Column		n 990 Part X colu	mn (B) line 10(c) )		<del></del>
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26-4196119

(b) Book value	(c) Method of valuation Cost or end-of-year market value
· · · · · · · · · · · · · · · · · · ·	
-	
-	
-	
-	
-	
<u> </u>	
'Ves' to Form 990 P	Part IV, line 11c. See Form 990, Part X, line 13.
	(c) Method of valuation. Cost or end-of-year market valu
(b) book value	(c) Method of Variation Cost of end-or-year market value
<del>                                     </del>	
· · · · · · · · · · · · · · · · · · ·	
165 to Folli 330. F	
escription	Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value
escription	
line 15)	(b) Book value
line 15)	(b) Book valu
line 15)	(b) Book valu
line 15)	(b) Book value
line 15)	(b) Book value
	'Yes' to Form 990, F (b) Book value

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Schedule **D** (Form 990) 2013

Schedule D	(Form 990) 2013	LEARNING TO SERVE, al Information (continued)	INC		26-4196119	Page 5
Part XIII	Supplementa	I Information (continued)				
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# SCHEDULE I

Department of the Treasury Internal Revenue Service Name of the organization

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

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

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OMB No 1545-0047

Employer identification number Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

2 \_\_\_\_ (h) Purpose of grant or assistance X Partil Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to 26-4196119 (g) Description of non-cash assistance 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 valuation (book, FMV, appraisal, other) 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance?... (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant (c) IRC section if applicable Partilla General Information on Grants and Assistance (p) EIN 1 (a) Name and address of organization or government 111111 LEARNING TO SERVE, 1111111 1 1 1 1 11111 1 E ন্ত্ৰ 5 3 গ্ৰ ପ୍ର

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

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TEEA3901 07/12/13

Schedule I (Form 990) (2013).

Page 2

Schedule I (Form 990) (2013) LEARNING TO SERVE, INC [Parity of 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.

#### SCHEDULE L (Form 990 or 990-EZ)

#### **Transactions With Interested Persons**

at www.irs.gov/form990.

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

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

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

► Information about Schedule L (Form 990 or 990-EZ) and its instructions is

Open to Public

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

LEARNING TO SERVE, INC

Employer identification number

26-4196119

4	(a) Name of disqualified person	(b) Relationship between disqualified	(c) Description of transaction	(d) Cor	rected?
<u>'</u>		person and organization		Yes	No
(1)					
(2)					
(3)					
(4)	_				Ţ
(5)					
(6)					

Enter the amount of tax incurred by the organization managers or disqualified persons during the year under

#### Part II Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990-EZ, Page V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			То	From			Yes	No	Yes	No	Yes	No
(1) AMANDA HUDSON	DIRECTOR	START UP COSTS	Х		2,740.	2,740.		Х	Х		Х	
(2)												i
(3)												
(4)		,										
(5)												
(6)												
(7)												i
(8)												
(9)												
(10)												
Total					▶\$	2,740.				<u></u>		

#### Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of Assistance	(e) Purpose of assistance
(1)		-		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990 or 990-EZ) 2013

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization	Employer Identification number
LEARNING TO SERVE, INC	26-4196119
Pt_VI,_Line_12cNO_OFFICER_OR_BOARD_MEMBER_ALLOWED_TO_AWARD_SCHOLE	ARSHIPS TO FAMILY MEMBERS
Pt VI, Line 11b REVIEW RETURN WITH CPA	
Pt VI, Line 15a NOBODY IS COMPENSATED	
Pt_VI, Line 15b NOBODY IS COMPENSATED	
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