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Department of the Treasury

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.

OMB No 1545-0047 2013 Open to Public

		information about Form 990 and its instructions is at www.iis	s.gov/ioiiiiaa0.		111092041011
<u>A_</u>	For the 2013	calendar year, or tax year beginning , and ending			
В	Check if applicable	C Name of organization		D Employ	ver identification number
	Address change	COMPASS COLLEGE OF CINEMATIC ARTS			
П	Name change	Doing Business As	_	38-	3336473
\equiv	ŭ	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telepho	one number
\sqcup	Initial return	41 SHELDON BOULEVARD, SE		616	-988-1000
	Terminated	City or town, state or province, country, and ZIP or foreign postal code		-	
П	Amended return	GRAND RAPIDS MI 49503		G Gross rece	expts 1,212,352
Ħ	Application pending	F Name and address of principal officer			
ш	Application pending		H(a) Is this a gro	up return for su	ibordinates? Yes X No
			H(b) Are all sub	ordinates inclu	ided? Yes No
			If "No,"	' attach a list ((see instructions)
<u> </u>	Tax-exempt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527			
J	Website >	WWW.COMPASS.EDU	H(c) Group exe	mption number	r >
<u>—</u>	Form of organization	n X Corporation Trust Association Other ►	Year of formation		M State of legal domicile
*****		ummary			
		describe the organization's mission or most significant activities			
ø.	1	SCHEDULE O			
ဦ		**			
'n					
Š			50/ -f.tt		
Ĝ		his box ▶ ☐ if the organization discontinued its operations or disposed of more than 2	5% of its net ass		1.0
රේ		r of voting members of the governing body (Part VI, line 1a)		3	10
ë	4 Numbe	r of independent voting members of the governing body (Part VI, line 1b)		4	10
Activities & Governance	5 Total n	ımber of ındıvıduals employed ın calendar year 2013 (Part V, line 2a)		5	
ţ	6 Total n	umber of volunteers (estimate if necessary)		6	
	7a Total u	related business revenue from Part VIII, column (C), line 12		7a	0
	b Net unr	elated business taxable income from Form 990-T, line 34		7b	0
	T -		Prior Yea		Current Year
a)	8 Contrib	utions and grants (Part VIII, line 1h)		6,879	80,696
Revenue	9 Prograi	n service revenue (Part VIII, line 2g)		0,306	1,115,852
: §	10 Investn	nent income (Part VIII, column (A), lines 3, 4, and 7d)		4,234	3,257
æ	11 Other r	evenue (Part VIII, column (A), lines 5, 6d, 8c 9c, 19c, and 11e)		7,903	10,965
		venue – add lines 8 through 11 (must equal Part VIR colon (A) (ipens)	1,44	9,322	1,210,770
<u> </u>		and similar amounts paid (Part IX, column (A) lines 1=3)			0
ა ე	44 564	s paid to or for members (Part IX, column (A) The 4) 9 1 2014			0
	15 Salarie	s, other compensation, employee benefits (Part IX, column (A), lines 5–10)	52	0,822	736,194
enses	16a Profess				0
ĕ	l .	indraising expenses (Part IX, column (D), line 11e OGDEN,1d5, 376	`		
Expe		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	36	7,593	407,415
	1 0 0	expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		8,415	1,143,609
				0,907	67,161
<u></u>	g Revent	le less expenses Subtract line 18 from line 12	Beginning of Cu		End of Year
ets c	ži 20 Totala	ssets (Part X, line 16)		9,116	1,377,752
ASSE	21 Total lu	abilities (Part X, line 26)		0,059	351,533
Net Assets or	22 Net 25	sets or fund balances Subtract line 21 from line 20		9,057	1,026,219
	Part II	Signature Block		<i>-,</i> -, ₁	
		of perjury, I declare that I have examined this return, including accompanying schedules and statem	onto and to the h	oot of my ka	outodes and halist it is
tr	under penaities (complete Declaration of preparer (other than officer) is based on all information of which preparer	has any knowled	esi or my kn ie	owieuge and belief, it is
	1 1	The state of the s		17	2 11
٥:		Signature of officer		Date	3.17
	gn	· '	- Dayen	Dato	
He	ere	KERI LOWE PRESI	DENT		
		Type or print name and title		<u> </u>	
_	l l	ype preparer's name Preparer's signature A	Date	Check	L If PTIN
Pa	0000	PH KUIPER DE LUCY	06/04	/14 self-em	
	eparer Firm's			ım's EIN	38-2157876
Us	e Only	P.O. BOX 280			
	Firm's	eddress > ZEELAND, MI 49464-0280	,	Phone no	616-772-4615
Ma	y the IRS disc	uss this return with the preparer shown above? (see instructions)			Yes No
	<u> </u>	duction Act Notice, see the separate instructions.			Form 990 (2013)

			3336473	Page
<u></u>	tatement of Program Servi	ice Accomplishments a response or note to any line in this f	Part III	X
Briefly descri	ibe the organization's mission	<u> </u>		
	nization undertake any significant p	program services during the year which were no	ot listed on the	Yes X No
	cribe these new services on Scheonization cease conducting, or make	dule O e significant changes in how it conducts, any pr	rogram	Yes X No
Describe the expenses Se	• , •	ecomplishments for each of its three largest prog anizations are required to report the amount of g	-	
Code FEACHING	F PROGRAM	94,833 including grants of \$) (Revenue \$	
VIDEO F STUDEN NECESS PREPAR WILL C	PRODUCTION AND CINTS ENROLLED IN TEARY TO WORK IN TEARD TO INITIATE TOULTIVATE THE CRI	STUDENTS MAJOR ASPECTS NEMATIC MEDIA ARTS PROG HE PROGRAM WILL ACQUIRE HE FILM INDUSTRY. THEY HEIR OWN PROJECTS OR WO TICAL THINKING SKILLS N SCHOOL OFFERS 2 PROGRA	RAMS: THE KNOWLEDGE AND A WILL FEEL COMFORTABL PRK FOR A COMPANY. ST JECESSARY TO INTELLIG	BILITIE: E AND UDENTS ENTLY
o (Code) (Expenses \$	including grants of \$) (Revenue \$	
c (Code) (Expenses \$	including grants of \$) (Revenue \$	
c (Code) (Expenses \$	including grants of \$) (Revenue \$	
Ic (Code) (Expenses \$	including grants of \$) (Revenue \$	
	am services (Describe in Schedule	e O)) (Revenue \$	

DAA

b_ If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	1 990 (2013) COMPASS COLLEGE OF CINEMATIC ARTS 38-3336473		P	age 3
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		x	
2	complete Schedule A	1 2	X	
3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
J	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	1-1		
•	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		X
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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable		;	1
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	<u> </u>	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			7.5
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			.
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
а	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	امما	x	!
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e	X	
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116	<u> </u>	
'	the organization's separate of consolidated finalical 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		x
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	'''		-
124	Schedule D, Parts XI and XII	12a	x	i
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	124		
-	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		X
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		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	ł		l
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
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		X
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		ł

Form 990 (2013) COMPASS COLLEGE OF CINEMATIC ARTS 38-3336473 Page 4 Part IV **Checklist of Required Schedules** (continued) Yes No 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States X on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 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 X employees? If "Yes," complete Schedule J 23 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 Х through 24d and complete Schedule K If "No," go to line 25a 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 24c to defease any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction X with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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? 25b X If "Yes," complete Schedule L, Part I 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 X disqualified persons? If so, complete Schedule L, Part II 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 X 27 entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions). a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b Schedule L, Part IV 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 X 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X complete Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X 33 sections 301 7701-2 and 301 7701-3? If "Yes." complete Schedule R. Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 or IV, and Part V, line 1 X 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a 35b controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 X 36 related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,

19? Note. All Form 990 filers are required to complete Schedule O

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

X Form 990 (2013)

X

37

38

Part VI

Senior the number reported in Box 3 of Form 1096. Enter -0- flinot applicable 1a 5	Fa	Charlet if Cabadula O contains a response or note to any line in this Port V			
14 Extra the number reported in Box 3 of Form 1096 Eater 3-0 find applicable Describe the unitary of Forms W2-0, included in line is Eater 3-0 find applicable Describe the unitary of Forms W2-0, included in line is Eater 3-0 find applicable Describe the unitary of Forms W2-0, included in line is Eater 3-0 find applicable Describe the unitary of the eater 3-0 find with the provided payments to vendors and reportable gament (gambling) withough so preventing the prevention of the find with the find with the find with the find with the prevention of the find with the find wi		Check if Schedule O contains a response or note to any line in this Part V		V	N ₁ -
be Enter the number of Forms W-2G included in line 1a Enter-G-1 find applicable Of the organization comply with beauty withholding unles for reportable payments to vendors and reportable gaming (gambling) witnings to prize witnings? Statements, filed for the calendar year ending with or within the year covered by the return If at least one is reported on Form W-2G, framewhated of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by the return If at least one is reported on Iner 2a, did the organization file all required federal employment tax returns? Note. If the sun of lines 1 and 25 as greater than 25, you may be required to e-file (see institutions) 3 Did the organization have unrelated business gross income of \$1,000 or more demand to e-file (see institutions) 3 Did the organization about in a fort file or \$20,000 or more demanded to e-file (see institutions) 4 A vary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a filtenancial account in a foreign country (such as a bank account, securities account, or other financial accountry over, a filtenancial accountry in a foreign country to the same an interest in, or a signature or other authority over, a filtenancial accountry in a foreign country to the same an interest in, or a signature or other authority over, a filtenancial accountry of the organization that it was or as a party to a prohibited tax shelter transaction? See instructions for filting requirements for form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Was the organization an periphent with the organization file form B8867? By the complex of the properties of the properties that are normally greater than \$100,000, and did the organization may annual gross receipts that are normally greater than \$100,000, and did the organization may annual gross receipts that are normally greater than \$100,000, and did the organization may be a solid the properties of the properti	4.	Enter the number constant in Poy 2 of Form 4000 Fater 0 of antiparties		res	NO
De the organization comply with backup withholding niles for reportable payments to vendors and eportable garging (gambling) withings to prize winners? 26 Einter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, Ried for the calendary year ending with or within the year covered by the return 27 If a least one is reported on line 23, did the organization file all required federal employment tax returns? 28 Note. If the sum of lines it and 2 as greater than 250, you may be required to e-file (see instructions) 39 Did the organization have unrelated becames gross income of \$1,000 rome douring the year? 30 If Yes, has at filed a Form 90CT for this year? If YeS to line 35, provide an explanation in Schedule O 30 If Yes, a file of Form 90CT for this year? If YeS to line 35, provide an explanation on Schedule O 30 If Yes, a filed in the name of the foreign country 41 If Yes, a filed in the name of the foreign country 42 If Yes, a filed in the name of the foreign country 43 If Yes, a filed in the name of the foreign country 44 If Yes, a filed in the name of the foreign country 45 If Yes, a filed the party northy the organization for Form 15 90-22 1, Report of Foreign Bank and Financial Accounts 45 Was the organization a party to a prohibeted tax shelter transaction of Yes and year? 46 If Yes, a filed in the specific promitted that shelter transaction of Yes and year 47 If Yes, a filed the organization that was not tax deductable as characted contributions or gifts were not tax deductable on the prohibet tax shelter transaction? 47 If Yes, did the organization and years except that are normally greater than \$100,000, and did the organization shelt with every the year 48 If Yes, did the organization that was necessed \$15 files departy as a contribution on application and years and years are years		· · · · · · · · · · · · · · · · · · ·			
reportable garming (gambled) winnings to prize winners? Either 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 Note. If the sum of lines is and 2 as greater than 250, you may be required for e-file (see instructions) 13 Did the organization have unrelated business gross incorned 31,000 or more during the year? 14 A 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, securings account, or other financial account in a foreign country (such as a bank account, securings account, or other financial account. 15 Year, "enter the name of the foreign country No." Is the sum of lines as bank account, securings account, or other financial account in a foreign country (such as a bank account, securings account, or other financial account in a foreign country (such as bank account, securings account, or other financial account in a foreign country No.			<u></u>		
2a Effect the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or warfun the year covered by this return 2	С		10		x
Statements, filed for the calendar year ending with or within the year covered by this return 2 2 2 X Note. If the sum of lines 14 and 22 is greater than 250, you may be required to e-file (see instructions) 3a X bit if vest, has thid a Form 990-T for this year? "Tho' to line 35, provide an explanation in Schedule O 3b If vest, has thid a Form 990-T for this year? "Tho' to line 35, provide an explanation in Schedule O 3b If vest, has thid a Form 990-T for this year? "Tho' to line 35, provide an explanation in Schedule O 3countil?" 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 accounts of the foreign country (such as a bank account, securities account, or other financial accounts of the foreign country in the securities and the securities accounts of the foreign country over, a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities accounts) accountry. See instructions for filing requirements for form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 4a Vas the organization sole of the promote of the securities and accounts of the securities of	20		10		
Mote If the sum of lines 1 and 2 as greater than 250, you may be required to 6-file (see methochors) 3a	za	1 1 2)3		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? All A lary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a filancial account in a foreign country type over, a filancial account in a foreign country type over, a filancial account in a foreign country type over, a filancial account in a foreign country ≥ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Was the organization on the property on 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 on the organization that was or is a party to a prohibited tax shelter transaction? See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Was the organization on the organization that was or is a party to a prohibited tax shelter transaction? See instructions for filing requirements for Form 808-77 66 Does the organization nature and the was or is a party to a prohibited tax shelter transaction? See if Yes's did the organization has the was received aductions that the report organization shelt any receive deductible as charitable contributions? See if Yes's did the organization nature was not tax deductible as charitable contributions or gifts were not tax deductible? See if Yes's did the organization nature was not appropriate to a party for goods and services provided to the payor? The property of the organization shell any receive deductible contributions under section 170(c). See if Yes's did the organization na	_			v	
38 Did the organization have unrelated trusiness gross income of \$1,000 or more during the year? 49 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 banik account, securities account), or other financial Accounts account? 50 If "Yes," enter the name of the foreign country 51 See instructions for filing requirements for Form TD F 80-22 1, Report of Foreign Bank and Financial Accounts 52 See instructions for filing requirements for Form TD F 80-22 1, Report of Foreign Bank and Financial Accounts 53 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 54 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 55 Was the organization in Programation file Form 8886-17 66 Dose the organization have an anual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 56 Uniform the file of the organization include with every solicitation an express statement that such contributions or girls were not tax deductible as charitable contributions or girls were not tax deductible as a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 57 Organizations that may receive deductible contributions under section 170(c). 58 Different excess to the enganization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 58 If "Yes," and the organization excess a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 59 If "Yes," and the organization excess and anothly the donor of the value of the goods or services provided? 50 If "Yes," and the organization excess an excess of \$75 made payment in excess of \$75 made payment	D		20	22	
bit 11 Yes,* That if filled a Form 990-T for this year? If 11No' to line 3b, provide an explanation in Schedule O 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 in a foreign country Such as a bank account, securities account, or other financial account in a foreign country Such as a bank account, securities account, or other financial account in a foreign country Such as a bank account, securities account, or other financial account in the financial account in the financial account in a foreign country Such as a bank account, securities account, or other financial accounts See instructions for filing requirements for Form TD F90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F90-22 1, Report of Foreign Bank and Financial Accounts See the organization has a contribution of possible for form Bank and Financial Accounts See the See of See of See organization and see organization and see organization seed of the organization for seed of the decidence of the See organization See of the organization seed of the organization in excess of \$75 made partly as a contribution on a foreign the see organization filing form seed of the organization filing form 900 and see organization filing form 900 in lieu of F	20	·	32		x
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 in a foreign country (such as a bank account, securities account), or other financial Accounts 5a					 -
over, a financial account in a foreign country (such as a bank account, secunties account, or other financial accounts If "Yes," enter the name of the foreign country 1	_	·	- JD		
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a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a 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) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 13b c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O					
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a 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) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 13b 13b 13b 2 Enter the amount of reserves any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		11			
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b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 200	11	Section 501(c)(12) organizations. Enter			
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12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	b	Gross income from other sources (Do not net amounts due or paid to other sources			
b 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		,			
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Note. See the instructions for additional information the organization must report on Schedule O b	13			 	
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 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	а	-	<u>13a</u>	 	
the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	_				
c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b 1	b				
14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b 100		·			
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			140	 	Y
- 000					 ^
	DAA			m 99	0 (2013)

Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website X Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

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

participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the

COMPASS COLLEGE OF CINEMATIC ARTS organization 🕨

organization's exempt status with respect to such arrangements?

41 SHELDON BLVD SE

MI 49503

616-458-4238

16b

GRAND RAPIDS

(11)

(10)

	rt VII Section A. Officers								and Highest Compensated					ige (
	. (A) Name and title	(B) Average hours per week (list any	(d bo	o not x, un! ficer a	Pos check ess pe	C) sition more erson	than o	one n an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estimate amount other empensar	of tion	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-21035-HISO)	6	irganizati and relati rganizati	ion ed	
(12)														
(13)	· · · · · · · · · · · · · · · · · · ·		i							-			-	
(14)	<u> </u>													
(15)														
(16)														
(17)			<u> </u>											
(18)			-											
(19)														
1b	Sub-total Total from continuation she	ets to Part VII.	Sect	ion .	 A	<u> </u>	1	<u> </u>	116,558					
<u>d</u>	Total (add lines 1b and 1c) Total number of individuals (if reportable compensation from	ncluding but not	limite	ed to		se lis	sted a	▶ abov	116,558 ve) who received more than					
3	Did the organization list any for employee on line 1a? If "Yes,	ormer officer, di " complete Sche	recto dule	r, or J fo	r suc	h in	dıvıdı	ual				3	Yes	No X
4	For any individual listed on lin organization and related orga individual	nizations greate	r tha	n \$1	50,0	00?	lf "Y∈	es," (complete Schedule J for su	ch		4		x
5	Did any person listed on line for services rendered to the o	rganization? If "								r individual		5		X
Sect 1	tion B. Independent Contracte Complete this table for your fi	ive highest comp	ens	ated	ınde	pen	dent	cont	tractors that received more	than \$100,000 of				
	compensation from the organ	(A) d business address	comp	ensa	<u>ation</u>	tor	he c	<u>alen</u>	ndar year ending with or with	nin the organization's tax y (B) bloom of services	ear	Con	(C) npensat	
	- Name dis	- Dadinood dadi ood	-										.,	
							•		,					
								T						
														
2	Total number of independent								ose listed above) who					
	received more than \$100,000	or compensation	n fro	ın th	e or	yanı	zatioi			0				

Pa	rt VI	II Stateme Check if	nt of Reve Schedule (tains a r	esponse o	r note to any line i	in this Part VIII		
		233111					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
इइ	1a	Federated campa	aigns	1a						
iz i		Membership due	•	1b						
Ą,	С	Fundraising even	its	1c	-					
i i		Related organiza		1d						
S,E		Government grants (con		1e		3,800				
<u>Pisi</u>	f	All other contributions, g	ıfts, grants,							
캻		and similar amounts not	included above	1f		76,896				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions in	ncluded in lines 1a-	1f	\$					
<u> </u>	ħ	Total. Add lines	1a-1f			•	80,696			
Program Service Revenue						Busn Code				
š	2a	TUITION I	NCOME				1,086,341	1,086,341		···
8	b	CURRICULU	M FEES				20,965	20,965		
اچ	C	TEACHING :	SERVICES				8,546	8,546	· ··	
Sel	d									····
ra	е									
5 g		All other program		nue		L	4 445 050			
-		Total. Add lines					1,115,852			
	3	3 Investment income (including dividends, interest,				St,	4,589	4,589		
		and other similar amounts)Income from investment of tax-exempt bond pi				4,509	4,509			
	4		estment of tax	(-exem	pt pona p	roceeds		*		<u>-</u> .
	5	Royalties	(ı) Real		/u\ E	Personal				
	6-	Cross ronto	(I) Real		(11) F	ersorial				
	6a	Gross rents								
	b	Less rental exps		_						
	c Rental inc or (loss) d Net rental income or (loss)									
		Gross amount from	(i) Securities	 -	T (11)	Other				
		sales of assets other than inventory	(,, 0002		\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	250				
	h	Less cost or other			1					
	_	basis & sales exps				1,582				
	С	Gain or (loss)				-1,332				
	1	Net gain or (loss)		<u> </u>	•	-1,332	-1,332		
		Gross income from		ents						
nue		(not including \$	Ū							
eve		of contributions rep	orted on line 1c	:)						
Other Revenue		See Part IV, line 18		a						
the	b	Less direct expe	enses	b						
0	С	Net income or (le	oss) from fund	draisin	g events	<u> </u>				,
	9a	Gross income from	gaming activities	es	İ					
		See Part IV, line 19	}	а						
		Less direct expe		b						
		Net income or (le		-	tivities	•	·····i			
	10a	Gross sales of ir								
		returns and allow		а						
		Less cost of go		b						
	<u> </u>	Net income or (le		es of in	ventory	<u> </u>				
			laneous Revenue			Busn Code	10 005	10.005		
	11a	OTHER REVE	NUE				10,965	10,965		
	b									
	C	A.11	_			 				
	ď	All other revenue					10,965			
	e	Total. Add lines					1,210,770		0	0
	12	Total revenue.	see mstructio	1115			1,210,770	1,130,074	<u>. </u>	

COMPASS COLLEGE OF CINEMATIC ARTS 38-3336473 Form 990 (2013) Page 10 Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (C) Management and (A) Total expenses (B) Program service Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the US See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 580,404 446,269 25,525 108,610 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 102,681 77,305 12,183 13,193 Other employee benefits 6,302 6,823 53,109 39,984 Payroll taxes 10 Fees for services (non-employees) a Management b Legal 19,550 500 19,050 c Accounting Lobbying e Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column 964 162 301 501 (A) amount, list line 11g expenses on Schedule O) 1,033 1,033 12 Advertising and promotion 14,671 4,844 9,827 13 Office expenses Information technology Royalties 8,550 62,775 71,325 16 Occupancy 18,303 27,527 9,183 41 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 764 764 20 Interest Payments to affiliates 21 36,541 36,541 22 Depreciation, depletion, and amortization 6,043 6,043 23 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) 138,088 9,568 147,656 MARKETING AND RECRUITING REPAIRS AND MAINTENANCE 21,774 21,869 95 b 9,624 35 STUDENT PROJECT EXPENSES 9,659 C 9,342 9,342 TEXTBOOKS AND MATERIALS 11,974 28,289 40,471 208 All other expenses 1,143,609 894,833 119,400 129,376 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs

from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ following SOP 98-2 (ASC 958-720)

Page 11

Form 990 (2013) COMPASS COLLEGE OF CINEMATIC ARTS 38-3336473

Part'X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 756,061 828,056 Cash-non-interest bearing 105,691 105,911 2 2 Savings and temporary cash investments 25,000 75,000 3 Pledges and grants receivable, net 22,407 26,533 4 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 8 Inventories for sale or use 2,177 2,426 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 348,689 other basis Complete Part VI of Schedule D 10a 10b 183,304 136,381 10c 165,385 b Less accumulated depreciation 11 11 Investments—publicly traded securities 12 12 Investments—other securities See Part IV, line 11 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 221,150 15 224,690 15 Other assets See Part IV, line 11 1,377,752 1,319,116 16 Total assets. Add lines 1 through 15 (must equal line 34) 17,636 3,505 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 356,554 333,897 25 of Schedule D 360,059 26 351,533 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ or Fund Balances complete lines 27 through 29, and lines 33 and 34. 809,057 914,940 Unrestricted net assets 150,000 111,279 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Net Assets 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 959,057 1,026,219 33 33 Total net assets or fund balances

> 1,377,752 Form 990 (2013)

1,319,116

Total liabilities and net assets/fund balances

orn	1990 (2013) COMPASS COLLEGE OF CINEMATIC ARTS 38-3336473			<u>Pa</u>	ge 12
Pa	Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10,	
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>609</u>
3	Revenue less expenses Subtract line 2 from line 1	3		67,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9	59,	<u>057</u>
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			1
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	1,0	26,	219
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			1	Ì
	the Single Audit Act and OMB Circular A-133?		3a	x	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	X	
		-	Fo	m 99	0 (2013)

SCHEDULE,A (Form 990 or 990-EZ) **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Form 990 or 990-EZ.

COMPASS COLLEGE OF CINEMATIC ARTS

Employer identification number 38-336473

P	art I	Reaso	on for Public Charity	Status (All organizations	must co	mplete	this pa	rt) Se	e instr	uction	ns		
The	orga	nization is not	a private foundation becaus	e it is (For lines 1 through 11, c	heck only	one box)						
1		A church, con	vention of churches, or ass	ociation of churches described i	n section	170(b)(1)(A)(i).						
2	П		cribed in section 170(b)(1)(
3	П			ce organization described in sec	ction 170	b)(1)(A)(i	ii).						
4	Ħ	•	•	d in conjunction with a hospital o			•)(1)(A)(ii	i). Ente	r the ho	spital's name),	
		city, and state	•				•		•		·		
5		• •		of a college or university owned	or operate	ed by a go	vernme	ntal unit	descrit	oed in			
·	LJ	-	b)(1)(A)(iv). (Complete Part		o. opo.a	, a s, a g.							
6				overnmental unit described in s	ection 17	0/h\/1\/A	W)						
7	X			substantial part of its support fro				rom the	nenera	Loublic			
•		_	section 170(b)(1)(A)(vi). (C		Jiii a gove	c.	G 0. 1	10111 1110	90	. pase			
8	\Box			i70(b)(1)(A)(vi). (Complete Part	шл								
9	H			1) more than 33 1/3% of its supp		contributio	ne mai	mharchu	n faas	and are	ce		
9				npt functions—subject to certain							33		
				nd unrelated business taxable in									
			=	0, 1975 See section 509(a)(2).				,, 110111 0	usiness	,63			
40			•	exclusively to test for public safe	•								
10	-			exclusively to test for public sale exclusively for the benefit of, to	•				out the				
11	Ш			ed organizations described in se							ì		
				he type of supporting organizati						3000.011			
		— — — — — — — — — — — — — — — — — — —		c Type III–Function		-	d [_		n_funct	ionally integra	tod	
_			<u> </u>	janization is not controlled direc								illou	
е	Ш			er than one or more publicly sup									
		or section 509		than one of more publicly sup	ported of	janizatioi	13 40301			300(u)(''		
				ermination from the IRS that it is	a Type I	Type II	or Type	III sunna	artina				
f			check this box	mination nom the into that it is	a Type I,	Type II,	л турс	ш заррс	, ting				
_		•		tion accepted any gift or contrib	ution from	any of th							ш
g		_		tion accepted any girt of contrib	ution non	any or a							
		following per		antrolo other clans or together	with parac	ana danar	bod in (u\ and				Yes	No
				ontrols, either alone or together	with beist	ilis desci	in bed iii (ii) and			11g(i)	163	-110
		` '	w, the governing body of the								11g(ii)	·	_
			member of a person described antity of a person								11g(iii		
			• •	described in (i) or (ii) above?							[118(11	/	<u> </u>
<u></u>				the supported organization(s)	(iv) to the o	organization	(v) Did v	rou notify	(vi)	c tha	(vii) Amount	of monat	
(•	e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–9	1 1 1	sted in your		nization in	organizat		supp		aı y
		y		above or IRC section		document?		of your port?		zed in the S ?			
				(see instructions))	Yes	No	Yes	No	Yes	No			
/43			<u> </u>		1 .69	 	133	 			_		
(A)						!							
/P\					 			 -				-	
(B)													
(C)					 						· · ·		
(C)													
<u></u>					1								
(D)													
/E\					 	 			 				
(E)													
					1	<u> </u>	-						
Tot	al					1							
	_	erwork Reduc	tion Act Notice, see the Ir	structions for	.1	+	·····	4	Schedu	ıle A (F	orm 990 or 9	90-EZ	2013
	ap												,

38-3336473

Page 2

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

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

Sec	tion A. Public Support							
Calen	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	\rightarrow	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	243,441	192,798	114,157	276,879	80,	696	907,971
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	243,441	192,798	114,157	276,879	80,	696	907,971
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.							907,971
Sec	tion B. Total Support			-				
Caler	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
7	Amounts from line 4	243,441	192,798	114,157	276,879	80,	696	907,971
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,714	14,355	12,492		<u> </u>		28,561
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)	2,731	150	18				2,899
11	Total support. Add lines 7 through 10							939,431
12	Gross receipts from related activities, etc	(see instructions)			-		12	1,131,406
13	First five years. If the Form 990 is for the		, second, third, for	urth, or fifth tax yea	ar as a section 501	(c)(3)		
	organization, check this box and stop her	e						<u> </u>
Sec	tion C. Computation of Public Su	ipport Percent	tage					
14	Public support percentage for 2013 (line 6	, column (f) divided	by line 11, colum	ın (f))			14	96.65%
15	Public support percentage from 2012 Scho	edule A, Part II, line	e 14			L	15	95.90%
16a	33 1/3% support test—2013. If the organ	zation did not che	ck the box on line	13, and line 14 is 3	33 1/3% or more, o	heck this		
	box and stop here. The organization qual							▶ X
b	33 1/3% support test—2012. If the organ	ization did not che	ck a box on line 13	3 or 16a, and line 1	5 is 33 1/3% or m	ore,		. \Box
	check this box and stop here. The organic	•	• •	-				▶ ∐
17a	10%-facts-and-circumstances test—201							
	10% or more, and if the organization meet							
	Part IV how the organization meets the "fa organization	icts-and-circumsta	nces" test. The org	ganization qualifies	as a publicly supp	oorted		▶ []
b	10%-facts-and-circumstances test—20°	•		· ·				
	15 is 10% or more, and if the organization							
	Explain in Part IV how the organization me	eets the "facts-and	-cırcumstances" te	est. The organization	on qualifies as a pu	ublicly		. —
	supported organization							▶ ∐
18	Private foundation. If the organization de	d not check a box	on line 13, 16a, 16	b, 17a, or 17b, che	eck this box and se	ee		, n
	instructions							<u> </u>

Part III

Pa	Support Schedule for Or (Complete only if you ched If the organization fails to	ked the box o	n line 9 of Part	I or if the organ	nization failed t		Part II.
Sec	tion A. Public Support	quality under tr	ie tests listeu t	below, please c	omplete Part II	·)	
	ndar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513		_				
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from]

	line 6)						_
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
4.4	First five years If the Form 900 is for the	organization's fire	t second third fo	outh or fifth tay ve	ar as a section 50	1(c)(3)	

Section C. Computation of Public Support Percentage 15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2012 Schedule A, Part III, line 15 % 16 Section D. Computation of Investment Income Percentage 17 17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2012 Schedule A, Part III, line 17 18 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support tests—2012. 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

organization, check this box and stop here

Schedule A (Form 990 or 990-EZ) 2013 COMPASS COLLEGE OF CINEMATIC ARTS 38-3336473

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part IV Part III, line 12. Also complete this part for any additional information (See instructions)

PART II, LINE 10 - OTHER INCOME DETAIL

STUDENT PROJECT INCOME

2,899

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

b Assets included in Form 990, Part X

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

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.

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

OMB No 1545-0047 Open to Public

Schedule D (Form 990) 2013

Inspection Employer identification number Name of the organization COMPASS COLLEGE OF CINEMATIC ARTS 38-3336473 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year <u>2a</u> Total number of conservation easements 2b Total acreage restricted by conservation easements 2c 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ▶ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes No (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 \$ \$ (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1

<u> </u>	dule D (Form 990) 2013 COMPASS	COLLEGE OF	CINE	MATIC A	AKIS	<u> </u>	3304/3		<u> </u>	'age ⊿
Pa	at III Organizations Maintain	ing Collections of	Art, Hi	storical Tr	easures,	or Othe	r Similar Asse	ts (contin	ued)	ı
3	Using the organization's acquisition, acce collection items (check all that apply)	ssion, and other record	s, check	any of the foll	lowing that a	re a signif	icant use of its			
а	Public exhibition	d 🗌	Loan or e	exchange prog	grams					
b	Scholarly research	е 🗌	Other							
С	Preservation for future generations									
4	Provide a description of the organization's	collections and explain	n how the	y further the o	organization'	s exempt	purpose in Part			
	XIII									
5	During the year, did the organization solic	it or receive donations	of art, his	torical treasur	res, or other	sımılar			_	_
	assets to be sold to raise funds rather tha	n to be maintained as p	oart of the	organization	's collection'	>		Y	es	No
Pa	Complete if the organizations of Part X, line 21		" to For	m 990, Par	t IV, line 9	, or repo	orted an amoun	t on Form	1	
1a	Is the organization an agent, trustee, cust	odian or other intermed	lary for c	ontributions o	r other asse	ts not			_	
	included on Form 990, Part X?		•					☐ Y	es 「	No
b	If "Yes," explain the arrangement in Part >	(III and complete the fo	llowing ta	ıble					_	_
	. ,	·	•					Amour	nt	
С	Beginning balance						1c			
	Additions during the year						1d			
	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount or	Form 990 Part X line	217				<u> </u>		es	No
	If "Yes," explain the arrangement in Part >			n has been or	rovided in Pa	rt XIII				7
	ert V Endowment Funds.									
	Complete if the organizat	on answered "Yes	" to For	m 990, Par	t IV, line 1	0.				
		(a) Current year) Prior year	(c) Two ye		(d) Three years bac	k (e) Fou	ır years	back
1a	Beginning of year balance			•						
h	Contributions									
C	Net investment earnings, gains, and	-								
	losses		ļ							
d	Grants or scholarships					·				
е	Other expenditures for facilities and									
	programs		1							
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the o	current year end balanc	e (line 1g	, column (a))	held as					
а	Board designated or quasi-endowment ▶	%								
b	Permanent endowment ▶	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c s	hould equal 100%								
3a	Are there endowment funds not in the pos	ssession of the organiza	ation that	are held and	administere	d for the				
	organization by								Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
b	If "Yes" to 3a(ii), are the related organizat	ions listed as required of	on Sched	ule R?				3b		
4	Describe in Part XIII the intended uses of									
Pi	art VI Land, Buildings, and Ed									
- 7	Complete if the organizat		" to For	m 990, Par	t IV, line 1	1a See	Form 990, Par	t X, line 1	0.	
	Description of property	(a) Cost or other	ĭ	(b) Cost or o			Accumulated	(d) Bool		
		(investment)	,	(other	er)	d	epreciation			
	l d									
12	Land				· · · · ·					
	Land Buildings						ı			
b	Buildings						-			
c	Buildings Leasehold improvements			3-	48.689		183.304	1	65.	381
b d	Buildings			3	48,689		183,304	1	65,	385

	(Form 990) 2013 COMPASS COLLEGE OF C	INEMATIC ARTS	38-3336473	Page 3
Part'VII		E 000 B (B(E	441 O E 000 D. 4	V 15- 40
	Complete if the organization answered "Yes" to			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	
/1\ Financia			Cost of Cha of year in	and raids
` '	al derivatives -held equity interests		<u> </u>	
(3) Other	-new equity interests			
				
(A)				
(B)				
(C)				
(D)				<u> </u>
(E)				· · · · · · · · · · · · · · · · · · ·
(F)				
(G)			-	
(H)	man (h) must sevel Form 000 Port V set (P) line 42)			
Part VIII	mn (b) must equal Form 990, Part X, col (B) line 12) ▶ Investments—Program Related.		I	
FRII. VIII	Complete if the organization answered "Yes" to	Form 000 Part IV line	11c See Form 990 Part	Y line 13
	(a) Description of investment	(b) Book value	(c) Method of val	
	(a) Description of Myosument	(b) book value	Cost or end-of-year m	
(1)				
(2)				
(3)				
(4)		-		
(5)				
(6)			· · · · · · · · · · · · · · · · · · ·	
(7)	<u> </u>			
(8)			-	
(9)	· · · · · · · · · · · · · · · · · · ·			
	ımn (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.	<u> </u>	<u> </u>	
	Complete if the organization answered "Yes" to	Form 990, Part IV, line	e 11d. See Form 990, Parl	t X, line 15.
	(a) Description			(b) Book value
(1)	RESTRICTED CASH - STUI	DENT LOAN PROG.	•	224,690
(2)				
(3)				
(4)				
(5)				
(6)		<u> </u>		
(7)				
(8)				
(9)				
	ımn (b) must equal Form 990, Part X, col. (B) line 15.)		<u> </u>	224,690
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" to	o Form 990, Part IV, line	e 11e or 11f. See Form 99	0, Part X,
	line 25.		·····	
1.	(a) Description of liability	(b) Book value	4	
	ral income taxes			
	- STUDENT LOAN PROGRAM	205,860	4	
	ERRED REVENUE	59,429		
	RUED WAGES	55,502		
	RUED LIABILITIES	7,550		
	- NETWORK LOAN	5,556	-	
	E PAYABLE		-	
(8)			-	
(9)			4	
Total. (Colu	ımn (b) must equal Form 990, Part X, col_(B) line 25) ▶	333,897		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2013 COMPASS COLLEGE OF CINEMATIC A	ARTS	38-333647	3	Page 4
	Reconciliation of Revenue per Audited Financial Statemen			turn.	
•	Complete if the organization answered "Yes" to Form 990, Part	t IV, I	ine 12a		
1	Total revenue, gains, and other support per audited financial statements	1	1,203,910		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a		+	
b	Donated services and use of facilities	2b	<u>.</u>		
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	1,203,910
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	į		.	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		į l	
b	Other (Describe in Part XIII)	4b	6,860	i	
C	Add lines 4a and 4b			4c	6,860
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	1,210,770
Pŧ	art XII Reconciliation of Expenses per Audited Financial Stateme			leturn	1.
	Complete if the organization answered "Yes" to Form 990, Part	t IV, I	ine 12a		
1	Total expenses and losses per audited financial statements			1	1,136,748
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2с			
d	Other (Describe in Part XIII)	2d	·		
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	1,136,748
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	6,861		
C	Add lines 4a and 4b		;	4c	6,86
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		·	5	1,143,60
Pá	art XIII Supplemental Information				
Prov	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, I	lines 1	b and 2b, Part V, line 4, P	art X, lı	ne
	art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide an				
P	ART XI, LINE 4B - REVENUE AMOUNTS INCLUDED (ON	RETURN - OTHE	R	
_	AND DESCRIPTION OF THE SECOND	57 /	a 6		6 060
S	CHOLARSHIPS NETTED WITH TUITION REVENUES ON	F/	S \$	*	6,860
P	ART XII, LINE 4B - EXPENSE AMOUNTS INCLUDED	ON	RETURN - OTH	ER	
	·				
S	SCHOLARSHIPS NETTED WITH TUITION REVENUES ON THE F/S				6,860
_					
В	OOK / TAX DEPRECIATION DIFFERENCE		\$	•	1

Schedule D (Form 990) 2013 COMPASS COLLEGE OF CINEMATIC ARTS

Part XIII Supplemental Information (continued) 38-3336473

Page 5

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No 1545-0047 **2013**

Department of the Treasury Internal Revenue Service

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.

Open to Public inspection

Name of the organization

COMPASS COLLEGE OF CINEMATIC ARTS

Employer identification number 38 - 3336473

FORM 990 - ORGANIZATION'S MISSION

COMPASS COLLEGE OF CINEMATIC ARTS (CCCA) IS A PREMIER, FAITH-BASED FILM COLLEGE SET IN A UNIQUE, CONSERVATORY-LIKE ENVIRONMENT. CCCA IS A 501(C)3 NON-PROFIT ORGANIZATION AND IS ACCREDITED BY THE ACCREDITING COMMISSION OF CAREER SCHOOLS AND COLLEGES (ACCSC). DEGREES AUTHORIZED TO BE CONFERRED ARE AS FOLLOWS:

ASSOCIATES OF APPLIED SCIENCE IN FILM AND MEDIA PRODUCTION.

ASSOCIATES DEGREE PROGRAMS MUST CONSIST OF AT LEAST 60 SEMESTER CREDIT HOURS OR EQUIVALENT OF COLLEGIATE LEVEL STUDY.

BACHELOR OF FINE ARTS IN CINEMATIC AND MEDIA ARTS.

BACHELOR DEGREE PROGRAMS MUST CONSIST OF AT LEAST 120 SEMESTER CREDIT HOURS OR EQUIVALENT OF COLLEGIATE LEVEL STUDY.

FORM 990, PART I, LINE 6

ALL BOARD MEMBERS ARE VOLUNTEERS. CERTAIN SERVICES AND FUNDRAISING ACTIVITIES ARE PERFORMED BY VOLUNTEERS AS WELL.

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT OBJECTIVE:

RECRUIT STUDENTS WHO MAY BE LOOKING FOR A FILM SCHOOL FOLLOWING THEIR GRADUATION FROM HIGH SCHOOL.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE ORGANIZATION'S BOARD PRESIDENT, TREASURER AND FINANCE DIRECTOR REVIEWED
THE FORM 990 AND COPY OF THE AUDITED FINANCIAL STATEMENTS PRIOR TO FILING.

Name of the organization

COMPASS COLLEGE OF CINEMATIC ARTS

Employer identification number 38-3336473

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
UPON REQUEST, THESE DOCUMENTS ARE MADE AVAILABLE AT THEIR OFFICES OR ARE
MAILED TO THE PERSON MAKING THE REQUEST.

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

SCHOLARSHIPS NETTED WITH TUITION REVENUES ON F/S \$ -6,860

SCHOLARSHIPS NETTED WITH TUITION REVENUES ON THE F/S \$ 6,860

BOOK / TAX DEPRECIATION DIFFERENCE \$ 1

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No 179

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

(99)

COMPASS COLLEGE OF CINEMATIC ARTS

Identifying number 38-3336473

	ss or activity to which this form relates NDIRECT DEPRECIAT	CION				_		
	rt I Election To Expe	nse Certain Prop	•			D-41		
1	Note: If you have a Maximum amount (see instruction		, complete Part v	before you c	ompiete	Рап І.	1	500,000
2	Total cost of section 179 property	•	e instructions)				2	300,000
3	Threshold cost of section 179 property	•	•	tructions)			3	2,000,000
4	Reduction in limitation Subtract		•	iruciions)			4	2,000,00
5	Dollar limitation for tax year Subtract I		· ·	d filma senarately s	ee instructio	nne	5	
6		on of property	_	b) Cost (business use		(c) Elected co		
	(4) 2000,		· · · ·	(-, -, -, -, -, -, -, -, -, -, -, -, -, -		(0) 2.0000		
7	Listed property Enter the amoun	t from line 29			7			
8	Total elected cost of section 179		s in column (c) lines	6 and 7	<u>'</u>		8	
9	Tentative deduction Enter the sr		• • •	o and ,			9	
10	Carryover of disallowed deductio						10	
11	Business income limitation Ente	•		han zero) or line !	5 (see inst	ructions)	11	- · · · · · · · · · · · · · · · · · · ·
12	Section 179 expense deduction		•	•	o (000 ii.ot	100.01.07	12	
13	Carryover of disallowed deduction	•		•	13			
	: Do not use Part II or Part III belo				<u> </u>			
	rt II Special Deprecia			iation (Do no	ot include	e listed pro	perty)	(See instructions.)
14	Special depreciation allowance for		•	•		s motor pro	1	
	during the tax year (see instruction		and than noted prope	ity, placed iii eei			14	
15	Property subject to section 168(f	•					15	
16	Other depreciation (including AC						16	36,541
	rt III MACRS Deprecia		ide listed property	/.) (See instru	ctions.)			
			Section			•		
17	MACRS deductions for assets pl	aced in service in tax	vears beginning befor	e 2013			17	0
18	If you are electing to group any assets place	``			here	▶ [7	······································
		Assets Placed in Ser				Depreciation	n System	<u></u>
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment us only-see instructions)	se (a) record	(e) Conve	ntion (f) M	lethod	(g) Depreciation deduction
19a	3-year property							
b	5-year property							
С	7-year property		_					
d	10-year property							
е	15-year property							
f	20-year property							
g	25-year property			25 yrs			S/L	
h	Residential rental			27 5 yrs	MM		S/L	
	property			27 5 yrs	MM		S/L	
i	Nonresidential real			39 yrs	MM		S/L	
	property				MM		S/L	
	Section C—A	ssets Placed in Serv	ice During 2013 Tax	Year Using the	Alternativ	e Depreciation	on Syste	m
20a	Class life					;	S/L	
b	12-year			12 yrs	ļ		S/L	
С	40-year			40 yrs	MM		S/L	
P	art IV Summary (See in	structions.)	<u> </u>					
21	Listed property Enter amount fro	om line 28					21	
22	Total. Add amounts from line 12		lines 19 and 20 in col	umn (g), and line	21 Enter	here		
	and on the appropriate lines of your return. Partnerships and S corporations—see instructions					22	36,541	
23	For assets shown above and pla				T			
	portion of the basis attributable t	o section 263A costs			23			
Fami	Panenwork Reduction Act Notice	a con constate instru	.ationa				· <u></u>	Form 4562 (2012

Form 8868

Application for Extension of Time To File an **Exempt Organization Return**

Rev January 2014	ey January 2014)								
epartment of the			•	application for each return. its instructions is at www.ir	s.gov/form8	868.		ł	
enternal Revenue S		tomatic 3-Month Extension, comple							▶ X
	_	Iditional (Not Automatic) 3-Month Ex			 2 of this form	۸	•		
		less you have already been granted an					8.		
•									
		u can electronically file Form 8868 if yo							
		Form 990-T), or an additional (not auto							
•		n of time to file any of the forms listed in					n		
		ted With Certain Personal Benefit Con					. £1.		
Part I		Is on the electronic filing of this form, vi				vonpro	mis.		
		c 3-Month Extension of Time.							
Part I only	required to life	Form 990-T and requesting an automa	auc o-monui	extension - check this box at	ia complete				▶ []
•	rations (includ	ing 1120-C filers), partnerships, REMIC	Ce and true	te must use Form 7004 to rea	uest an exten	eion o	f time		
o file income t		ing 1120-0 illers), partnerships, REMIK	os, and musi	is must use Form 7004 to req	uest all exten	151011 0	i uiiie		
o ille lilcoitle (iax returns.			Fn	ter filer's Ide	entifyi	na nu	mhor sea i	nstruction
ype or	Name of exe	empt organization or other filer, see ins	tructions			Identifying number, see instruction r identification number (EIN) or			
orint		p. 0.9222				A Identification Humber (Elly) of			, •
	COMPAS	S COLLEGE OF CINEMA	ATIC A	RTS	38-333	336473			
ile by the		eet, and room or suite no. If a P.O. box				ocial security number (SSN)			
ue date for		LDON BOULEVARD, SE	•			_	_ `		
ling your eturn See	City, town or	post office, state, and ZIP code. For a	foreign add	Iress, see instructions.					
nstructions	GRAND	RAPIDS MI	49503	<u> </u>					
Enter the Retu	rn code for the	e return that this application is for (file a	separate a	pplication for each return)					0
Application			Return	Application					Return
ls For			Code	Is For		Code			
Form 990 or	Form 990-EZ		01	Form 990-T (corporation)		07			
Form 990-Bl	L		02	Form 1041-A		08			
Form 4720 (individual)		03	Form 4720 (other than indiv		09			
Form 990-PI	F		04	Form 5227		10			
Form 990-T	(sec 401(a) o	r 408(a) trust)	05	Form 6069					11
Form 990-T	(trust other tha		06	Form 8870					12
		COMPASS COLLEGE OF C	INEMATI	C ARTS					
		41 SHELDON BLVD SE						WT 405	^^
 The books a 	are in the care of	▶ GRAND RAPIDS						MI 495	J3
-	u. b. 61	6 450 4330	EAV No	▶ 616-458-4238	.				
•		6-458-4238			•				□
_		not have an office or place of business			. If this	ie	•		- L
	ra Group Red group, check th	urn, enter the organization's four digit G nis box			and attach	13			
-	• • •	As of all members the extension is for	the group, t	Silicon allo box	and attach				
		3-month (6 months for a corporation re	equired to fil	le Form 990-T) extension of til	me				
		, to file the exempt organization retur							
	rganization's r	· ·	.,	,					
	calendar year								
ٔ سے ،									
▶ 🗍 1	tax year begin	ning , and ending		•					
_		in line 1 is for less than 12 months, chi	eck reason [.]	Initial return Fin	al return				
	hange in accou								
		Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, ent	ter the tentative tax, less any					
		See instructions				3a	\$		(
b If this ap	pplication is for	Forms 990-PF, 990-T, 4720, or 6069,	enter any re	efundable credits and					

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

EFTPS (Electronic Federal Tax Payment System). See instructions

estimated tax payments made. Include any prior year overpayment allowed as a credit.

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using

Form 8868 (Rev 1-2014)

3b

38-3336473

Year Ended: December 31, 2013

Compass College of Cinematic Arts 41 Sheldon Boulevard, SE Grand Rapids, MI 49503

Electing out of Bonus Depreciation Allowance for All Eligible Depreciable Property

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