

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



Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

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. Internal Revenue Service and ending JUN 30, 2014 A For the 2013 calendar year, or tax year beginning JUL 1, 2013 C Name of organization D Employer identification number Check if applicable: GREATER TRINITY CHRISTIAN |Address |chango LEARNING ACADEMY Name change 91-1872298 Doing Business As Initial roturn Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-atod 11229 4TH AVE W 425-355-9871 Amended City or town, state or province, country, and ZIP or foreign postal code 446,965. G Gross receipts \$ Applica-EVERETT, WA 98204 H(a) Is this a group return pending for subordinates? ∐Yes LX No F Name and address of principal officer: PAUL A STOOT, SR H(b) Are all subordinates included? Yes No 11229 4TH AVE W. EVERETT, 98204 If "No." attach a list. (see instructions) Tax-exempt status: X 501(c)(3) 4947(a)(1) or 501(c) ()◀ (insert no.) J Website: ► N/A H(c) Group exemption number ▶ Other > Year of formation: 1999 M State of legal domicile: WA K Form of organization: X Corporation Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: THE GREATER TRINITY LEARNING Governance ACADEMY WAS ESTABLISHED TO PROVIDE A HIGH QUALITY PRE-SCHOOL Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 6 Number of independent voting members of the governing body (Part VI, line 1b) 22 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 168,848. 2,888. 340,721 323,213. Program service revenue (Part VIII, line 2g) 517 275. Investment income (Part VIII, column (A), lines 3, 4, and 7d) ... 10 28,356 120,589. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 446,965. 538,442 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 0 Benefits paid to or for members (Part IX, column (A), line 4) 181,780. 210,140 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 276,729 306,842. 17 488,622. 486,869 Total expenses. Add lines 19-17-(must-equal-Part-IX-column (A), line 25) 51,573 -41,657. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year 244,705 203,376. Total assets (Part X, line 16) 221,095. 220,767 Total liabilities (Part X, line 26) 23,938 -17.719. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Per. Signature of officer Date Sign PAUL A STOOT, SR, EXEC DIRECTOR Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature Paid sell-employed Preparer Firm's name Firm's EIN Use Only Firm's address 🛌 Phone no

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

No

Yes

orm	990 (2013) LEARNING ACADEMY 91-18/2296 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: THE GREATER TRINITY LEARNING ACADEMY WAS ESTABLISHED TO PROVIDE A HIGH
	OUALITY PRE-SCHOOL
	QOMITT THE DEMOGE
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code.) (Expenses \$ 109,545. including grants of \$) (Revenue \$ 101,424.)
70	PRE-SCHOOL EDUCATION TO STUDENTS IN A PREDOMINANTLY LOW-INCOME AREA OF
	SNOHOMISH COUNTY. SERVING APPROXIMATELY 20 STUDENTS.
4b	(Code) (Expenses \$ 68,352. including grants of \$) (Revenue \$ 63,285.)
	7 (0.000) (0.000)
	STATE CERTIFIED SCHOOL FOR KINDERGARTEN. SERVING APPROXIMATELY 10
	STUDENTS.
-	
4c	(Code) (Expenses \$ 171,195. including grants of \$) (Revenue \$ 158,504.)
	OPERATION LATCHKEY FOR A BEFORE AND AFTER SCHOOL PROGRAM FOR STUDENTS
	THROUGH 6TH GRADE, PROVIDING TRANSPORTATION TO AND FROM SCHOOL,
	HOMEOWRK ASSISTANCE, TUTORING, A COMPUTER LAB AND COVERED SPORTS COURT
	FOR PHYSICAL EDUCATION AND ACTIVITY. SERVING APPROXIMATELY 25 STUDENTS.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ mcluding grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 349,092.
	Form 990 (2013)

GREATER TRINITY CHRISTIAN Form 990 (2013) LEARNING ACADEMY Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	<u>X</u>	
2	is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	
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_		<u> </u>
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		<u>X</u>
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		<u>X</u>
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_		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u>X</u>
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		<u>X</u>
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, VIII, IX, or X			
	as applicable.			ļ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			İ
	Part VI	11a	X	
b	Did the organization report an amount for investments · other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			}
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	_X_	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	l		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			ŀ
	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		<u> </u>
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 Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	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_	ļ	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			1
	complete Schedule G, Part III	19		X
20a		20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
		Form	990	(2013)

Form 990 (2013) LEARNING ACADEMY

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		ĺ	į.
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u> </u>	X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		i	
		23		x
242	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	-	
270	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
		24a		x
b	Schedule K. If "No", go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	- 42
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
С		04-		
_	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c		
		24d		
25a		05-		x
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	 	
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		ł	
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	25b		x
26	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	200		
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,	i		1
		26		x
07	complete Schedule L, Part II	20	 	
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member		l	
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	-21		<u> </u>
26				
_	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
a	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200	<u> </u>	
С	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	 -	X
	Did the organization receive more than \$25,000 in non-cash contributions in the rest complete schedule will be organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29_	\vdash	
30	N	30	l	х
24		30		^
31	Did the organization liquidate, terminate, or dissolve and cease operations?	31		x
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	131		
UZ.		32		х
33	Schedule N, Part II	<u> </u>	 	-
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33]	x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
34		34	1	х
35a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ooa b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	334	ļ	<u> </u>
U	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
28	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	300		
36	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30	 	 ^
J,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	- "		 ^``
-	Note. All Form 990 filers are required to complete Schedule O	38	х	
	140(0) at 1 of the decision of the complete desirable of 1 miles and 1 miles a			(2013)

Form 990 (2013) LEARNING ACADEMY Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0		-	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		Į	
	(gambling) winnings to prize winners?	1c	- 1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			-
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	1	X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6а	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?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
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?	7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		_X_
d	If "Yes," indicate the number of Forms 8282 filed during the year		1	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12	1		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		-	
11	Section 501(c)(12) organizations. Enter:		I	
	Gross income from members or shareholders		-	
b	Gross income from other sources (Do not net amounts due or paid to other sources against		ļ	
	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?	12a	 -∤	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		ļ	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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		ł	
	Enter the amount of reserves on hand			v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990 /	2013)

91-1872298 Page 6

Form 990 (2013)

LEARNING ACADEMY

91-1872298

Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
b	Enter the number of voting members included in line 1a, above, who are independent		•	
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		X
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		X
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		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
•-	more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
_	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	The second of th		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		-	
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
-	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		x
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
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►WA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	ion.	•	
	MRS TAMMIE STOOT - 425-355-9871	_		
	11229 4TH AVE W, EVERETT, WA 98204			

LEARNING ACADEMY

91-1872298

Page 7

Form 990 (2013) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0 in columns (Ď), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See Instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, 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)	(B)			(C Posi	C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	heck	more	than	one	Reportable	Reportable	Estimated amount of
	hours per week	offic	ceran	ss pe	rson irecto	is bot x/trus	n an tee)	compensation from	compensation from related	other
	(list any	휹						the	organizations	compensation
	hours for	둉	, ex			ated		organization	(W-2/1099-MISC)	from the
	related organizations	nstee	Ses .		ᇵ	pens		(W-2/1099-MISC)		organization and related
	below	individual trustee or director	losktubonal trustee	_	흍	E 25	<u>ـ</u> ا			organizations
	line)	A A	350	Officer	Key employee	Highest compensated employee	юmer			
(1) BRUCE NURSE	4.00									
PRESIDENT			_	L_		<u> </u>	_	0.	0.	0.
(2) GINGER C ANDERSON	4.00		ŀ					_	_	
SECRETARY		ļ	<u> </u>				_	0.	_0.	0.
(3) CLARENCE R SHAW	4.00		ŀ					_		
TREASURER	4 00	_			_	<u> </u>		0.	0.	0.
(4) DARRYL J PERRY	4.00					1				
DIRECTOR	4 00	<u> </u>	┝		<u> </u>		\vdash	0.	0.	0.
(5) MARCUS L MAGWOOD	4.00	ļ			ĺ			0	_	_
DIRECTOR	4.00		_	<u> </u>	 		-	0.	0.	0.
(6) JAYNE JOYNER	4.00		•		l			0.	0.	0.
VICE PRESIDENT	35.00	┢─		_	 			<u> </u>	0.	0.
(7) PAUL A STOOT, SR	33.00				l			0.	0.	0.
EXECUTIVE DIRECTOR (8) CHARLIE E YOUNG	0.00	 -		_	┝	┝		0.	<u> </u>	
DIRECTOR	0.00							0.	о.	0.
DIRECTOR					 	\vdash	-		•	
						_				
					1					
"										
	<u></u>				1					
					L			- · · · · · · · · · · · · · · · · · · ·		
	ļ		<u></u>		L					
										i
					<u> </u>	ļ;				
			Ш.		L					

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

the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	(A) Name and business address NONE		(B) Description of services	(C) Compensation	
	<u> </u>				
					
	er of independent contractors (including but	it not limited to those lis	sted above) who received more than		

	990 (rt VII	2013) LEARNING I Statement of Revenue				91-187	
		Check if Schedule O contains a re	esponse or note to ar	ny line in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts its	1 a	Federated campaigns	1a				
g zi	b	Membership dues	1b				
A, C	C	Fundraising events	1c				
ig ig	d	Related organizations	1d		1		
ns, Gifts, Grants Similar Amounts	e	Government grants (contributions)	1e		[1	

Contributions, Gifts, Gran and Other Similar Amoun		Membership dues			ļ		:
ts,		Fundraising events 1c					
ia gi	d	Related organizations1d					
ns,		Government grants (contributions) 1e					
e tio	f	All other contributions, gifts, grants, and			1	1	
혈美		similar amounts not included above1f	2,888.				•
E D	g	Noncash contributions included in lines 1s-1f \$	2,888.				
<u> </u>	h	Total, Add lines 1a-1f	<u>.,</u>	2,888.			
			Business Code				
ဗ	2 a	TUITION & REGISTRATION		280,784.			
2 0	b	GRANTS	611710	42,429.	42,429.		
Program Service Revenue	C						
eve eve	d						
90	е	<u> </u>					
<u>.</u>	f	All other program service revenue					
1	a	Total. Add lines 2a-2f		323,213.			
	3	Investment income (including dividends, inte					
	i	other similar amounts)		275.	275.		
	4	Income from investment of tax-exempt bond					
	5	Royalties	•				
		(i) Real	(ii) Personal				
	6 a		1 (1) - 5/5 - 1		j		
	, ,	Less: rental expenses	 				1
		Rental income or (loss)	 		[
		Net rental income or (loss)					
			1 1				
	/ a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory		ļ		,	
	10	Less cost or other basis				,	
		and sales expenses		ļ			
		Gain or (loss)					
		Net gain or (loss)	<u></u>				
9	8 a	Gross income from fundraising events (not					
Other Revenue	Ì	including \$ of		'			
ě	ł	contributions reported on line 1c). See		'			
F	<u> </u>	Part IV, line 18					
Ě	t	Less: direct expenses	ь 0.				
U	۰ ر	: Net income or (loss) from fundraising events	<u></u>	120,439.		İ	120,439.
	9 a	Gross income from gaming activities. See		j			
		Part IV, line 19	a				
	l t	Less: direct expenses	1 1			!	
		Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
	ŀ		a				
	b		b				
	1	Net income or (loss) from sales of inventory					
	ļ— <u>"</u>	Miscellaneous Revenue	Business Code				·
	11 =	RETURNED CHECK FEE	611110	150.	150.		
	' ' E						
	i						
	١			· · · · · · · · · · · · · · · · · · ·		<u> </u>	
	1	Total. Add lines 11a-11d		150.			
	ſ	Total revenue. See instructions.		446,965.	323,638.	<u> </u>	120,439
	12	TOTAL TEVELINE, OEE INSTRUCTIONS.	<u> </u>			<u> </u>	<u> </u>

Form 990 (2013) LEARNING ACADEMY
Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp				X
	Check if Schedule O contains a response not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
		-	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
_	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
_	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
_	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	156 024	127 150	10 750	25
7	Other salaries and wages	156,934.	137,150.	19,759.	25.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	04 046	10 025	4 640	1 160
10	Payroll taxes	24,846.	19,035.	4,649.	1,162.
11	Fees for services (non-employees):				
a	Management				
b	Legal				
C	Accounting	5,648.	2,760.	2,888.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	64,815.			64,815. 3,584.
12	Advertising and promotion	<u> </u>	6,283.		
13	Office expenses	22,194.	19,550.	1,254.	1,390.
14	Information technology	2,120.	1,308.		812.
15	Royalties				
16	Occupancy	116,066.	116,066.		
17	Travel	21,056.	203.		20,853.
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	17,118.			
23	Insurance	4,459.	4,459.		
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 0.)				
а	OPERATING SUPPLIES	32,176.	32,176.		
	AUTO EXPENSES	6,518.	6,518.		
c	mar marrore	3,141.	2,950.		191.
d	BANK SERVICE CHARGES	1,664.	634.		1,030.
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	488,622.	349,092.	28,550.	93,862
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined			İ	
	educational campaign and fundraising solicitation.	•			
	Check here figliowing SOP 98-2 (ASC #58-720)				
	0. 10-20-13				Form 990 (2013)

Form 990 (2013)
Part X | Balance Sheet

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X		······	
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	78,654.	1	52,492
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	1,165.	4	676
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
ļ	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			
J	employers and sponsoring organizations of section 501(c)(9) voluntary			
,	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Siese 7	Notes and loans receivable, net	· - · · · · · · · · · · · · · · · · · ·	7	
8 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	· · · · · · · · · · · · · · · · · · ·	9	
I -	Land, buildings, and equipment cost or other			
,,,,	basis. Complete Part VI of Schedule D 10a 428,073.			
	Less: accumulated depreciation	164,351.	100	147,533
11	Investments - publicly traded securities	101,331.	11	237,333
12	Investments - other securities. See Part IV, line 11		12	· · · · · · · · · · · · · · · · · · ·
13	Investments - program-related. See Part IV, line 11		13	· · · · · · · · · · · · · · · · · · ·
14			14	
15	Intangible assets Other assets. See Part IV, line 11	535.	15	2,675
16	Total assets. Add lines 1 through 15 (must equal line 34)	244,705.	16	203,376
17	Accounts payable and accrued expenses	22,660.	17	22,988
18		22,000.	18	44,500
19			19	
20	Deferred revenue		20	
21	Tax-exempt bond liabilities		21	
	Loans and other payables to current and former officers, directors, trustees,	 	-='	-
	key employees, highest compensated employees, and disqualified persons.			
22			22	
2 2	Secured mortgages and notes payable to unrelated third parties	45,902.	23	45,902
23	Unsecured notes and loans payable to unrelated third parties	43,302.	24	43,304
25	Other liabilities (including federal income tax, payables to related third		-24	
25	parties, and other liabilities not included on lines 17-24). Complete Part X of			
i i		152,205.	25	152,205
26	Schedule D Total liabilities, Add lines 17 through 25	220,767.	26	221,095
- 20	Organizations that follow SFAS 117 (ASC 958), check here ▶ 🛣 and	220,707.	20	221,055
,	complete lines 27 through 29, and lines 33 and 34.		l 1	
27		23,938.	27	-17,719
20	Temporarily restricted net assets	23,330.	28	11,715
28			29	
= 28	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶□□		-	
=	and complete lines 30 through 34.			
2 20			30	
30	Capital stock or trust principal, or current funds		31	
31	Paid-in or capital surplus, or land, building, or equipment fund		32	
27 28 29 30 31 32 33 32 33 32 33 32 33 33 33 33 33 33	Retained earnings, endowment, accumulated income, or other funds	23,938.		-17,719
- 33	Total helitica and not contributed belonged		33 34	203,376
34	Total liabilities and net assets/fund balances	<u>444,103.</u>	34	Form 990 (201

	1990 (2013) LEARNING ACADEMY	91-1872	<u> 298</u>	Pag	_{1e} 12
Pa	rt XI 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	446	5,9	65.
2	Total expenses (must equal Part IX, column (A), line 25)	2			22.
3	Revenue less expenses. Subtract line 2 from line 1	3	-41	. , 6	57.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	23	3,9	38.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	<u>-17</u>	1,7	<u> 19.</u>
Pa	rt XII Financial Statements and Reporting				
	Check of 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			j	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.		l	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	1	- 1	
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			- 1	
b	Were the organization's financial statements audited by an independent accountant?		2b		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,		}	1
	consolidated basis, or both:			- 1	
	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 th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	dule O.		ı	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit		- }	
	Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit -	-	-	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	990 ((2013)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

Employer identification number

Name of t	the organization	on GREATE	R TRINITY CHR	RISTIA	N			E	mployer	identificati	on nu	mber
			NG ACADEMY_		_				9	<u>1-1872</u>	<u> 298</u>	
Part I	Reason f	or Public Cha	rity Status (All organiz	ations mu	st complet	e this par	t.) See inst	tructions.				
The organ	ization is not a	private foundation	n because it is: (For lines	1 through	11, check	only one b	ox.)					
1 🖳	A church, con	vention of church	es, or association of chur	ches desc	ribed ın se	ction 170	(b)(1)(A)(i)).				
2 X	A school desc	ribed in section 1	170(b)(1)(A)(ii). (Attach Sc	hedule E)								
3 🖳	A hospital or a	a cooperative hos	pital service organization (described	in section	170(b)(1)	(A)(iii).					
4 🔲	A medical res	earch organizatior	operated in conjunction	with a hos	pital desci	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital	's nam	Ю,
	city, and state):										
5 📖	An organization	on operated for the	e benefit of a college or u	niversity o	wned or op	perated by	a governi	mental uni	t describ	ed in		
	section 170(b)(1)(A)(iv). (Comp	olete Part II.)									
6			ment or governmental unr									
7	An organization	on that normally re	ceives a substantial part	of its supp	oort from a	governme	ental unit o	or from the	general	public desc	nbed i	n
	•)(1)(A)(vi). (Comp	•									
8 📙	_		section 170(b)(1)(A)(vi).	-								
9	_	•	ceives: (1) more than 33						-	_		
		· · · · · · · · · · · · · · · · · · ·	unctions - subject to certa									
			taxable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	Inization	after June 3	0, 197	5.
		509(a)(2). (Comple	•		V		T00/ 1/	••				
10	•	•	operated exclusively to te	•	•			•			4	
11 📖	-	•	operated exclusively for the		-				•			or
			zations described in section				z). See sec	eue non:	адој. Оп	eck the box	mat	
	a Type i	b .	g organization and compl		nctionally			ı ☐ Tvo	a III a No	n-functional	v inter	ırəter
e 🗀			nat the organization is not									
السيا		•	than one or more publicly		-	_	_		-	· -		•
f		•	ntten determination from		-				-(-)(-)		(-/(-/-	
•		ganization, check			,	., .,,	, , ,					
g		-	organization accepted a	ny gift or c	ontribution	from any	of the foll	owing per	sons?			
	-		directly controls, either a		_					· ,	Yes	No
	the gove	ming body of the	supported organization?							11g(i)		
	(ii) A family	member of a pers	on described in (i) above?	·		.				11g(ii)		
	(iii) A 35% c	ontrolled entity of	a person described in (i)	or (ii) abov	e?					11g(iii)	L	<u> </u>
h	Provide the fo	llowing informatio	n about the supported or	ganızation	(s).							
						·						
(i) Name	of supported	(ii) EIN	(iii) Type of organization		organization		u notify the	(vi) is organization	the	(vii) Amount	of moi	netary
	anization		(described on lines 1-9		isted in your document?		tion in col.	(i) organiz	ed in the	sup	port	
	[above or IRC section (see instructions))	<u> </u>			r support?		т — —			
			(444	Yes	No	Yes	No	Yes	No			
					ļ	Į	İ	ŀ	ł			
				 	}	 	 	 	}			
					1		İ	İ				
				 	 	 		 	 	ļ		
	ļ							1				
		· 	 	 	 	 	-	1	 			
						Į						
			 	 	 			 	 			
				1								
Total									1			

	edule A (Form 990 or 990-EZ) 2013 L	EARNING A	CADEMY				2298 Page 2
Pa	rt II Support Schedule for	_					•
	(Complete only if you checke fails to qualify under the tests				on failed to qualify	under Part III. If the	organization
500	ction A. Public Support					· · · · · · · · · · · · · · · · · · ·	
		4-1,0000	(h) 2010	4-) 2011	(4) 2012	(-) 2012	# Total
	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			i			
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf					 	
3	The value of services or facilities			}			
	furnished by a governmental unit to	1					
	the organization without charge				-	ļ	<u> </u>
	Total. Add lines 1 through 3			<u> </u>	<u> </u>		
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)				ļ		
	Public support. Subtract line 5 from line 4.	<u> </u>			<u> </u>	<u></u>	<u> </u>
	ction B. Total Support	I			1		
	ndar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on				1		
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carned on						
10	Other income Do not include gain						
	or loss from the sale of capital				1		
	assets (Explain in Part IV.)				ļ	ļ	
	Total support. Add lines 7 through 10	L		<u> </u>	l	ļ. ,	<u></u>
	Gross receipts from related activities					12	
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3)	. —
~	organization, check this box and sto	p here				<u></u>	<u></u>
	ction C. Computation of Pub					T T	
14	Public support percentage for 2013 (<u>%</u>
15	Public support percentage from 2012						<u> </u>
16a	33 1/3% support test - 2013. If the						
	stop here. The organization qualifies						
b	33 1/3% support test - 2012. If the	_					
	and stop here. The organization qua						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			-	· ·		
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes						
	more, and if the organization meets t				•		, —
	organization meets the "facts-and-cir		-	•			▶₩
<u>18</u>	Private foundation. If the organization	on did not check a	box on line 13, 16	oa, 16b, 17a, or 17			
					Sch	edule A (Form 990	J OF 980-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 LEARNING ACADEMY

Pa	rt III Support Schedule for C	Organizations	Described in	Section 509(a)(2)		
	(Complete only if you checked	the box on line 9	of Part I or if the o	rganization failed	to qualify under Pa	art II. If the organiz	ation fails to
	qualify under the tests listed b	elow, please comp	olete Part II)				
Sec	tion A. Public Support						·
Cale	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 per-						
	formed, or facilities furnished in			1			
	any activity that is related to the organization's tax-exempt purpose	1					
3	Gross receipts from activities that						
•	are not an unrelated trade or bus-					ĺ	
	iness under section 513	1		ļ			
4	Tax revenues levied for the organ-						
7	ization's benefit and either paid to				ļ		
	or expended on its behalf				ļ		
_	The value of services or facilities						
3	furnished by a governmental unit to	1					
	the organization without charge	1		:	1		
_	A skill Proce of Albander 5			 			
	Total. Add lines 1 through 5		<u> </u>		<u> </u>		-
/a	Amounts included on lines 1, 2, and					j	
	3 received from disqualified persons				 		<u> </u>
D	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the	1			ļ		ļ
	amount on line 13 for the year				 		-
	Add lines 7a and 7b				 	-	
	Public support (Subtract line 7c from line 5)	<u></u>	<u> </u>	L	<u> </u>	<u>.l</u>	1
	tion B. Total Support	T	# 1 2 040	1 ()0044	1	4.10040	In Total
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
-	Amounts from line 6				 		
10a	Gross income from interest, dividends, payments received on	1		İ			
	securities loans, rents, royalties			ļ.			ļ
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses				ì		
	acquired after June 30, 1975			 			ļ. -
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b.			1		1	
	whether or not the business is				Ì		
	regularly carried on		,		ļ	-	
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV.)			_	<u></u>		
	Total support. (Add lines 9, 10c, 11, and 12)		L	<u></u>	<u> </u>	<u> </u>	<u> </u>
14	First five years. If the Form 990 is fo	r the organization's	s first, second, the	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organı	zation,
	check this box and stop here			<u> </u>			
	tion C. Computation of Pub						
15	Public support percentage for 2013 (line 8, column (f) d	ivided by line 13,	column (f))		15	%
	Public support percentage from 2012				·	16	%
Sec	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20)13 (l ine 10c, colur	nn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from					18	%
19a	33 1/3% support tests - 2013. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2012. If the						
	line 18 is not more than 33 1/3%, che	eck this box and s	top here. The org	anization qualifies	as a publicly supp	oorted organization	ı ▶∐

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

Schedule A (Form 990 or 990-EZ) 2013 LEARNING ACADEMY	91-1872298 Page 4
Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17 Also complete this part for any additional information. (See instructions).	
SCHEDULE A, LIST OF UNUSUAL GRANTS RECEIVED:	
DATE: 08/30/13 AMOUNT: 13000.	
DESCRIPTION: PROGRAM SUPPORT	
DATE: 06/17/14 AMOUNT: 1429.	
	
332024 09-25-13 Sche	dule A (Form 990 or 990-EZ) 2013

....

SCHEDULE D

(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 Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

GREATER TRINITY CHRISTIAN

LEARNING ACADEMY

Employer identification number 91-1872298

Pa	t I Organizations Maintaining Donor Advisor	ed Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lir	ne 6.	•
			(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		nds
	are the organization's property, subject to the organization's	e exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor		
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose confe	rnng
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	education) Preservation of an historica	lly important land area
	Protection of natural habitat	Preservation of a certified h	istone structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form of a c	onservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			2b
C	Number of conservation easements on a certified historic st		2c
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the orga	nization during the tax
	year >		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting	-	
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation include, if applicable, the text of the footnote to the organization.		
	conservation easements.	ation's financial statements that describes the or	ganization's accounting for
Pa	t III Organizations Maintaining Collections of	of Art. Historical Treasures, or Other	Similar Assets
	Complete if the organization answered "Yes" to Form		
	If the organization elected, as permitted under SFAS 116 (A		nd halance sheet works of art
	historical treasures, or other similar assets held for public ex	•	
	the text of the footnote to its financial statements that descri		pasie service, provide, ii. r dierrin,
ь	If the organization elected, as permitted under SFAS 116 (A		palance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, e		
	relating to these items.		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
			S
2	If the organization received or held works of art, historical tre		• • •
-	the following amounts required to be reported under SFAS		
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990, Part X		A C

Sche		G ACADEMY					<u>1-18'</u>			age 2
Par	t III Organizations Maintaining C	ollections of A	rt, Historica	l Treasures, c	or Othe	er Similar	Asset	S(contil	nued)	
3	Using the organization's acquisition, accessi	on, and other record	is, check any o	the following tha	t are a si	gnificant us	e of its o	collectio	n item	S
	(check all that apply):									
а	Public exhibition	d	Loan o	exchange progra	ams					
ь	Scholarly research	e								
c	Preservation for future generations	•								
4	Provide a description of the organization's co	ollections and explai	n how they furt	her the organization	on's exe	mot purpos	e in Part	XIII.		
5	During the year, did the organization solicit of									
Ū	to be sold to raise funds rather than to be ma						F	Yes		No
Par	t IV Escrow and Custodial Arran									<u>., 140</u>
	reported an amount on Form 990, Pa	-	cto ii ti lo organi	zation anowored	100 10	. 0111, 000, 1	Cart 1 V , III	110 0, 01		
	Is the organization an agent, trustee, custod		tion, for contrib	utions or other as	cate not	included			-	
12] v		No
	on Form 990, Part X?			* * * * * * * * * * * * * * * * * * * *			ــا	Yes	<u> </u>	J MO
b	If "Yes," explain the arrangement in Part XIII	and complete the to	llowing table:							
								Amoun	<u>t </u>	
	Beginning balance					1				
	Additions during the year									
е	Distributions during the year									
f	Ending balance									-
	Did the organization include an amount on F							Yes	<u> </u>	No
<u>b</u>	If "Yes," explain the arrangement in Part XIII									<u></u>
Par	t V Endowment Funds. Complete i	f the organization ar	swered "Yes" t	o Form 990, Part	IV, line 1	0.				
		(a) Current year	(b) Prior yea	ır (c) Two year	s back	(d) Three yea	rs back	(e) Fou	r years	back
1a	Beginning of year balance									
b	Contributions									
	Net Investment earnings, gains, and losses									
d	Grants or scholarships				T					
	Other expenditures for facilities									
_	and programs				ĺ					
f	Administrative expenses									
	End of year balance	·			<u> </u>					
2	Provide the estimated percentage of the cur		re (line 1a colu	mn (a)) held as:			L			
	Board designated or quasi-endowment	•	• •	iii (a), ricid as.						
	Permanent endowment		^ '							
	Temporarily restricted endowment	% %								
C										
•	The percentages in lines 2a, 2b, and 2c should be a seed as the seed and the seed as the s		ation that are b	ald and administra	rad far Al	ha araaninat				
за	Are there endowment funds not in the posse	ession of the organiz	ation that are n	eio ano aoministe	rea for ti	ne organizai	IIOH	į	V	<u> </u>
	by.							[a m	Yes	No
	(I) unrelated organizations							3a(i)		
b	If "Yes" to 3a(ii), are the related organization				······· · ·			_3b_	l	L
4	Describe in Part XIII the intended uses of the		owment funds.							
Par	t VI _ Land, Buildings, and Equipm									
	Complete if the organization answere				, Part X,	line 10.				
	Description of property	(a) Cost or o		Cost or other		ccumulated		(d) Boo	k valu	0
		basis (ınvestı	ment) b	asis (other)	dep	preciation				
1a	Land									
b	Buildings				 					
	Leasehold improvements									
	Equipment	!								
е	Othor			428,073.		280,54	0.	14	7,5	33.
	. Add lines 1a through 1e. (Column (d) must e		X, column (B),						7,5	

GREATER TRINITY CHRISTIAN LEARNING ACADEMY 91-1872298 Page 3 Schedule D (Form 990) 2013 Part VII Investments - Other Securities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X. line 12. (b) Book value (c) Method of valuation: Cost or end-of-year market value (a) Description of security or category (including name of security) (2) Closely-held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (c) Method of valuation: Cost or end-of-year market value (a) Description of investment (b) Book value (1) (2) (3)(4) (5) (6)(7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value (a) Description (1) (2) (3) (4)(5) (6) (7) (8) (9) Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value

1. (a) Description of liability (b) Book value

(1) Federal income taxes

(2) IRS - OLD FORM 941 TAXES PAYABLE 152,205.

(3) (4) (5) (6) (7) (8) (9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

 \triangleright

152,205.

LEARNING ACADEMY 91-1872298 Page 4 Schedule D (Form 990) 2013 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments Donated services and use of facilities c Recoveries of pnor year grants **2**c d Other (Describe in Part XIII.) e Add lines 2a through 2d 20 Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Amounts included on line 1 but not on Form 990. Part IX. line 25: a Donated services and use of facilities b Prior year adjustments 2h c Other losses 2c e Add lines 2a through 2d **2e** Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b .. . Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE E

Department of the Treasury Internal Revenue Service

Part I

(Form 990 or 990-EZ)

Schools

Complete if the organization answered "Yes" to Form 990, Part IV, line 13,

Attach to Form 990 or Form 990-EZ.

or Form 990-EZ, Part VI, line 48.

OMB No 1545-0047 **2013**

Open to Public Inspection

Name of the organization

► Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/lorm990.

GREATER TRINITY CHRISTIAN

Employ

LEARNING ACADEMY

Employer Identification number 91-1872298

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
	other governing instrument, or in a resolution of its governing body?	1	<u>x</u>	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,		ŀ	
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			
	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes		Ì	
	the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.		v	
	If you need more space, use Part II	3	X	
		-		
		}	1	
4	Does the organization maintain the following?	1	İ	
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b		4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	<u> </u>
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.	1		
				i
		i		
_	D. Mariana and D. Callada and D. Cal		1	1
5	Does the organization discriminate by race in any way with respect to			
a		5a	 	X
b		5b 5c		X
C	. ,	5d		X
u	Scholarships or other financial assistance? Educational policies?	5e	 -	X
f	Use of facilities?	51		X
	Athletic programs?	5g		X
_	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	<u> </u>		
	· · · · · · · · · · · · · · · · · · ·			ļ
		1		1
		1		1
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Х	
	Has the organization's right to such aid ever been revoked or suspended?	6b		Х
	If you answered "Yes" to either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4 05 of	1		
	Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7_	X X	

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

Schedule E (Form 990 or 990-EZ) (2013)

Schedule E (Forn														298 Page
Part II Su	pplem comple	ental Ir	art to pi	ation. rovide ai	Provide the other ac	e explanat dditional in	tions re format	quired ion.	by Part I, li	nes 3, 4	d, 5h, 6b, and 7	, as appl	icable.	
LINE 6 -	EXPI	LANAT	ION	OF C	OVER	MENT	FIN	ANC:	IAL AI	D:				
EXPLANAT:	ION:	THE	STAT	re oi	F WASI	HINGTO	ON P	AYS	MONEY	то	SUPPORT	THE	LOW-	INCOME
STUDENTS	INV	OLVED	IN	THE	ASSO	CIATIO	ON'S	PRI	E-SCHO	OL,	KINDERG	RADEN	AND	-
LATCHKEY	PROC	SRAMS	·										· · · · · · · · · · · · · · · · · · ·	
														
														•
									-			·	 	
					<u> </u>				· · · · · · · · · · · · · · · · · · ·					
											<u> </u>	···	<u>-</u> _	
													 -	····
						<u></u>								
	·										·			<u></u>
···														
				· · · · · · · · · · · · · · · · · · ·										
					·-·							 .		·
														
				<u></u>										
·														
												-		
				<u>-</u>									·	
······································					<u>.</u>					 				
			_	~										
											<u> </u>		_	
				_										

332062 10-03-13

Schedule E (Form 990 or 990-EZ) (2013)

Employer identification number Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection ▶ Information about Schedule I (Form 990) and its instructions is at www.rs.gov/form990. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ► Attach to Form 990. GREATER TRINITY CHRISTIAN General Information on Grants and Assistance LEARNING ACADEMY critena used to award the grants or assistance? Name of the organization Department of the Treasury internal Revenue Service SCHEDULE (Form 990) Part

Open to Public OMB No 1545-0047

% X

91-1872298

Inspection

A.	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any received more than \$5,000. Part II can be duplicated if additional space is needed.	Governments an S5.000 Part II car	d Organizations in the	e United States. C	complete if the organted.	ınization answered "	res" to Form 990, Part IV	, line 21, for any
	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 6	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.	ind government or	ganizations listed in th	le line 1 table			-	
¥	For Paperwork Reduction Act Notice, see the Instructions for	, see the Instruct	ions for Form 990.	-				Schedule I (Form 990) (2013)

332101 10-29-13

Schedule I (Form 990) (2013) LEARNING ACADEMY

Part III | Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Page 2

91-1872298

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

Schedule I (Form 990) (2013)

332102 10-29-13

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.

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Infornal Revenue Service Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. GREATER TRINITY CHRISTIAN LEARNING ACADEMY

Employer identification number 91-1872298

FORM 990. PART I. LINE 1. DESCRIPTION OF ORGANIZATION MISSION: EDUCATION IN A PREDOMINANTLY LOW-INCOME AREA OF SNOHOMISH COUNTY. FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: FORM 990 IS EMAILED TO EACH DIRECTOR BEFORE IT IS FILED. IN ADDITION, IT IS DISCUSSED AT A BOARD OF DIRECTOR MEETING AND APPROVAL IS GIVEN TO FILE THE RETURN. FORM 990, PART VI, SECTION C, LINE 18: EXPLANATION: ALL DOCUMENTS ARE PROVIDED WHEN REQUESTED. FORM 990, PART VI, SECTION C, LINE 19: EXPLANATION: THE ORGANIZATION PROVIDES COPIES OF ALL DOCUMENTS WHEN REQUESTED. FORM 990, PART IX, LINE 11G, OTHER FEES: FUND RAISING EXPENSES: PROGRAM SERVICE EXPENSES 0. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 64,815. TOTAL EXPENSES 64,815. TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 64,815.