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Form **990-EZ**

Short Form

Return of Organization Exempt From Income Tax

OMB No 1545-1150

2014

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

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2014 calendar year, or tax year beginning July 1, 2014, and ending June 30, 20 15

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization PATHWAYS TECH CCTE		D Employer identification number 26-1324824
	Number and street (or P O box, if mail is not delivered to street address) Room/suite 3091 Fishing Creek Valley Road		E Telephone number 717-599-5133
	City or town, state or province, country, and ZIP or foreign postal code Harrisburg, PA 17112		F Group Exemption Number ▶

G Accounting Method: Cash Accrual Other (specify) ▶

I Website: ▶ www.pathwaystechccte.com

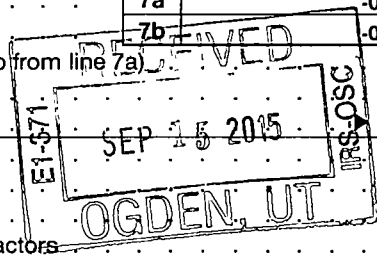
J Tax-exempt status (check only one) — 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **18,654.56**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

		Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received	1	\$16,204.47	10	Grants and similar amounts paid (list in Schedule O)	10	-0-
2	Program service revenue including government fees and contracts	2	-0-	11	Benefits paid to or for members	11	-0-
3	Membership dues and assessments	3	\$2,450.00	12	Salaries, other compensation, and employee benefits	12	-0-
4	Investment income	4	\$0.09	13	Professional fees and other payments to independent contractors	13	\$4,035.76
5a	Gross amount from sale of assets other than inventory	5a	-0-	14	Occupancy, rent, utilities, and maintenance	14	\$4,934.42
b	Less: cost or other basis and sales expenses	5b	-0-	15	Printing, publications, postage, and shipping	15	\$330.72
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	-0-	16	Other expenses (describe in Schedule O)	16	\$4,332.37
6	Gaming and fundraising events			17	Total expenses. Add lines 10 through 16 ▶	17	\$13,633.27
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	-0-	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	\$5,021.29
b	Gross income from fundraising events (not including \$ -0- of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	-0-	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	\$1,370.77
c	Less: direct expenses from gaming and fundraising events	6c	-0-	20	Other changes in net assets or fund balances (explain in Schedule O)	20	-0-
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	-0-	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	\$6,392.06
7a	Gross sales of inventory, less returns and allowances	7a	-0-				
b	Less: cost of goods sold	7b	-0-				
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	-0-				
8	Other revenue (describe in Schedule O)	8	-0-				
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	\$18,654.56				



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Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		<input checked="" type="checkbox"/>
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	<input checked="" type="checkbox"/>	
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		<input checked="" type="checkbox"/>
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
35b			
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		
35c			
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		<input checked="" type="checkbox"/>
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a		
b	Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
37b			
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	<input checked="" type="checkbox"/>	
b	If "Yes," complete Schedule L, Part II and enter the total amount involved		
38b			\$41,000.00
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9		-0-
39a			
b	Gross receipts, included on line 9, for public use of club facilities		-0-
39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ -0- ; section 4912 ▶ -0- ; section 4955 ▶ -0-		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		<input checked="" type="checkbox"/>
40b			
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ -0-		
40c			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ -0-		
40d			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		<input checked="" type="checkbox"/>
40e			
41	List the states with which a copy of this return is filed ▶ Pennsylvania		
42a	The organization's books are in care of ▶ Sandra L. Cook Telephone no. ▶ 717-599-5133 Located at ▶ 3091 Fishing Creek Valley Road, Harrisburg, PA ZIP + 4 ▶ 17112		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		<input checked="" type="checkbox"/>
42b			
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶		<input checked="" type="checkbox"/>
42c			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		<input type="checkbox"/>
43			
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		<input checked="" type="checkbox"/>
44a			
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		<input checked="" type="checkbox"/>
44b			
c	Did the organization receive any payments for indoor tanning services during the year?		<input checked="" type="checkbox"/>
44c			
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
44d			
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<input checked="" type="checkbox"/>
45a			
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		<input checked="" type="checkbox"/>
45b			

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	✓

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47 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	47	✓
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	✓
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	✓
b If "Yes," was the related organization a section 527 organization?	49b	

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? Note. All section 501(c)(3) organizations must attach a completed Schedule A ▶ Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer: Sandra L. Cook Date: 9-11-2015

Type or print name and title: Sandra L. Cook, Board President & Administrative Director

Paid Preparer Use Only

Prnt/Type preparer's name: _____ Preparer's signature: _____ Date: _____ Check if self-employed PTIN: _____

Firm's name: _____ Firm's EIN: _____

Firm's address: _____ Phone no.: _____

May the IRS discuss this return with the preparer shown above? See instructions ▶ Yes No

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2014

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization PATHWAYS TECH CCTE	Employer identification number 26-1324824
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14		%
15 Public support percentage from 2013 Schedule A, Part II, line 14	15		%
16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	\$16,963	\$24,788	\$65,691	\$9,102	\$18,655	\$135,199
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	-0-	-0-	-0-	-0-	-0-	-0-
3 Gross receipts from activities that are not an unrelated trade or business under section 513	-0-	-0-	-0-	-0-	-0-	-0-
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	-0-	-0-	-0-	-0-	-0-	-0-
5 The value of services or facilities furnished by a governmental unit to the organization without charge	-0-	-0-	-0-	-0-	-0-	-0-
6 Total. Add lines 1 through 5	\$16,963	\$24,788	\$65,691	\$9,102	\$18,655	\$135,199
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	-0-	-0-	-0-	-0-	-0-	-0-
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	-0-	-0-	-0-	-0-	-0-	-0-
c Add lines 7a and 7b	-0-	-0-	-0-	-0-	-0-	-0-
8 Public support (Subtract line 7c from line 6.)						\$135,199

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6	\$16,963	\$24,788	\$65,691	\$9,102	\$18,655	\$135,199
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	\$37	\$2	\$222	\$448	-0-	\$709
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	-0-	-0-	-0-	-0-	-0-	-0-
c Add lines 10a and 10b	\$37	\$2	\$222	\$448	-0-	\$709
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	-0-	-0-	-0-	-0-	-0-	-0-
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	\$54	-0-	-0-	-0-	-0-	\$54
13 Total support. (Add lines 9, 10c, 11, and 12.)	\$17,054	\$24,790	\$65,913	\$9,550	\$18,655	\$135,962
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	99.4 %
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	99.5 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	.005 %
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	.004 %

- 19a 33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization . ▶
- b 33 1/3% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer (b) below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b	A family member of a person described in (a) above?	11b	
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c	

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2	

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1	

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3	

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b	
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .	3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.		
9	Distributable amount for 2014 from Section C, line 6		
10	Line 8 amount divided by Line 9 amount		
Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2014
		(iii) Distributable Amount for 2014	
1	Distributable amount for 2014 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)		
3	Excess distributions carryover, if any, to 2014:		
a			
b			
c			
d			
e	From 2013		
f	Total of lines 3a through e		
g	Applied to underdistributions of prior years		
h	Applied to 2014 distributable amount		
i	Carryover from 2009 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4	Distributions for 2014 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2014 distributable amount		
c	Remainder. Subtract lines 4a and 4b from 4.		
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).		
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).		
7	Excess distributions carryover to 2015. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a			
b			
c			
d	Excess from 2013		
e	Excess from 2014		

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No 1545-0047

2014

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open To Public Inspection

Name of the organization PATHWAYS TECH CCTE	Employer identification number 26-1324824
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Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
			(1) Sandra L. Cook	Bd. Pres.			Overhead	✓		\$41,000	\$34,000	
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						\$						

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

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

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

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

2015

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

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

Name of the organization

Employer identification number

PATHWAYS TECH CTE

26-1324824

PART I:16 Description of Other Expenses: PayPal Expense; Adv. Marketing Exp; Bank Charges; CHAP Vendor Fees, Tithes/Donations made to other Non-Profit Organizations (10% or more of monthly donated income is given monthly); Liability Insurance on occupation of building; Dues to Association of Fundraising Professionals; Fruit Basket gift to sick Board Member; Returned Portion of Charitable Organization Registration Fee (-\$259); Reimbursement for Expense of Board Member.

PART II:24 Other Assets: Fixed and Other Assets; Prepaid Insurance; Gift-In-Kind Donation; Office Supplies; Advertising Supplies; Security Deposit.

PART II:25 Total Liabilities: Loan from Officer.

PART V:34 Change to Bylaws: Set up Class A and Class B Board Members.

**Pathways Tech CTE
 Biggest Donors/Grants
 July 2014 through June 2015**

	Jul '14 - Jun 15	% of Column
Cook, Randy and Sandy		
Pledge	6,100 00	33 7%
Pledge - Other	206 95	1.1%
GiftinKind		
Total Pledge	6,306 95	34 9%
General Fund	715 76	4 0%
Total Cook, Randy and Sandy	7,022 71	38 8%
Langenhop, Audrey P.		
Pledge	2,200 00	12 2%
General Fund	540 00	3 0%
Total Langenhop, Audrey P.	2,740.00	15.1%
Mustonen, Karen		
General Fund	2,000 00	11 1%
Total Mustonen, Karen	2,000 00	11.1%
Bhutanese Nepali Baptist Church-Harrisbur	1,100 00	6 1%
The First Assembly of God Church		
Pledge	1,000 00	5 5%
Total The First Assembly of God Church	1,000.00	5 5%
Harrisburg Justice House of Prayer	1,000.00	5 5%
Garcia, Salvador & Celesta	500 00	2 8%
Cook, Braden & Missy	500 00	2 8%
Imler, James E.	500 00	2 8%
Long, Douglas J.		
Pledge	420 00	2.3%
Total Long, Douglas J.	420 00	2 3%
Means, Lawrence	400 00	2 2%
Holmes, Damian		
Pledge	125.00	0 7%
Holmes, Damian - Other	75 00	0 4%
Total Holmes, Damian	200 00	1 1%
New Beginnings 88 IFC	200 00	1 1%
Deardorff, Ricky & Kimberly		
Pledge	200.00	1.1%
Total Deardorff, Ricky & Kimberly	200 00	1.1%
Haines, Doris		
Pledge	100.00	0.6%
Total Haines, Doris	100 00	0 6%
Langenhop, Charles & Jean		
General Fund	100 00	0.6%
Total Langenhop, Charles & Jean	100 00	0 6%
Corty, Ernest & Dawnell		
Pledge	60 00	0 3%
Total Corty, Ernest & Dawnell	60 00	0 3%
Linda & John Herr	40 00	0 2%
Amazon Smile	5.00	0.0%
Anonymous		
Building Fund	1 00	0 0%
Total Anonymous	1.00	0.0%
TOTAL	18,088.71	100.0%

Pathways Tech CCTE

9/9/2015 11:45 AM

Register: Loans from Officers, Directors:Loans from Officers S Cook

From 01/01/2012 through 06/30/2015

Sorted by: Date, Type, Number/Ref

<u>Date</u>	<u>Number</u>	<u>Payee</u>	<u>Account</u>	<u>Memo</u>	<u>Increase</u>	<u>C</u>	<u>Decrease</u>	<u>Balance</u>
01/06/2012	28		Belco Community Cre...	Loan for utiliti .	15,000.00			15,000.00
04/18/2012	35		Belco Community Cre ..	Loan for month...	2,500.00			17,500.00
05/10/2012	36		Belco Community Cre...	Loan for April .	2,700.00			20,200.00
06/28/2012	38		Wells Fargo:Wells Far ..	Loan for Overh...	2,500.00			22,700.00
10/19/2012	40		Wells Fargo:Wells Far ..	Loans from Off ..	2,300.00			25,000.00
01/28/2013	1048		Wells Fargo:Wells Far...	Loan for Overh...	2,000.00			27,000.00
03/15/2013	1060		Wells Fargo:Wells Far...	Loan for Febru...	10,000.00			37,000.00
04/28/2013	1064		Wells Fargo:Wells Far. .	Loan for March..	2,000.00			39,000.00
05/24/2013	1072		Wells Fargo:Wells Far ..	Officer Loan fo...	2,000.00			41,000.00
08/05/2013	Ck 1066	Randy F. and Sandra ...	Accounts Payable	Payment on Of..			3,000.00	38,000.00
12/16/2013	CK #1080	Randy F and Sandra ..	Accounts Payable	Payment on Of..			1,000.00	37,000.00
04/01/2014	Ck #1086	Randy F and Sandra ...	Accounts Payable	Payment on Of..			1,000.00	36,000.00
05/21/2014	Ck #1090	Randy F. and Sandra ...	Accounts Payable	Payment on Of ..			1,000 00	35,000.00
12/04/2014	CK #1112	Randy F. and Sandra ...	Accounts Payable	Payment on Of...			1,000.00	34,000.00

Pathways Tech CCTE
Statement of Functional Expenses (990)
 July 2014 through June 2015

11:11 AM
 09/09/15
 Accrual Basis

	Building	Culinary	Equipment	General	Marketing/Fundraising
Unrestricted Net Assets	3,000.00	4,179.67	1,021.89	76,482.99	0.00
Building Renovations	119.61	0.00	0.00	0.00	0.00
Uncategorized Expenses	0.00	0.00	67.82	565.50	0.00
Business Expenses	0.00	0.00	15.00	-274.00	0.00
Contract Services	0.00	0.00	0.00	4,035.76	0.00
Facilities and Equipment Operations	649.22	0.00	127.18	0.00	0.00
Other Types of Expenses	0.00	0.00	0.00	330.72	0.00
	0.00	0.00	150.00	1,897.30	575.00
TOTAL	3,768.83	4,179.67	1,381.89	83,038.27	575.00

11:11 AM

09/09/15

Accrual Basis

**Pathways Tech CCTE
Statement of Functional Expenses (990)
July 2014 through June 2015**

	Overhead	Unassigned	Unclassified	TOTAL
Unrestricted Net Assets	91,164.42	307.20	20,310.02	196,466.19
Building Renovations	0.00	0.00	0.00	119.61
Uncategorized Expenses	0.00	0.00	0.00	633.32
Business Expenses	0.00	0.00	0.00	-259.00
Contract Services	0.00	0.00	0.00	4,035.76
Facilities and Equipment Operations	154.76	0.00	0.00	931.16
Other Types of Expenses	3,883.65	0.00	0.00	4,214.37
	985.75	350.00	0.00	3,958.05
TOTAL	96,188.58	657.20	20,310.02	210,099.46

Pathways Tech CCTE
Statement of Financial Income and Expense
 July 2014 through June 2015

11:29 AM
 09/09/15
 Accrual Basis

	Building	Equipment	General	Marketing/Fundraising
Ordinary Income/Expense				
Income				
Use of Building	300 00	0 00	1,800 00	0 00
Donation from Staff Member	0 00	0 00	215 76	0 00
Donation/General Fund				
Individual	0 00	200 00	4,621 76	0 00
Other Ministries	0 00	0 00	5 00	0 00
Total Donation/General Fund	0 00	200 00	4,626 76	0 00
Donations/Gifts-In-Kind				
Donated Item				
Individual	0 00	0 00	206 95	0 00
Total Donated Item	0 00	0 00	206 95	0 00
Total Donations/Gifts-In-Kind	0 00	0 00	206 95	0 00
Pledges				
Churches	0 00	0 00	1,000 00	0 00
Individuals	0 00	0 00	9,955 00	0 00
Total Pledges	0 00	0 00	10,955 00	0 00
Total Income	300 00	200 00	17,804 47	0 00
Gross Profit	300 00	200 00	17,804 47	0 00
Expense				
Building Renovations	119 61	0 00	0 00	0 00
Uncategorized Expenses	0 00	67 82	565 50	0 00
Business Expenses				
Bad Debts	0 00	0 00	0 00	0 00
Business Registration Fees	0 00	15 00	-274 00	0 00
Total Business Expenses	0 00	15 00	-274 00	0 00
Contract Services				
Accounting Fees	0 00	0 00	385 00	0 00
Internet Website Fee	0 00	0 00	215 76	0 00
Legal Fees	0 00	0 00	3,435 00	0 00
Total Contract Services	0 00	0 00	4,035 76	0 00
Facilities and Equipment				
Reimburse Voc Equip Purchases	0 00	127 18	0 00	0 00
Services to Safety Equipment	217 30	0 00	0 00	0 00
Building Repairs & Maintenance	431 92	0 00	0 00	0 00
Total Facilities and Equipment	649 22	127 18	0 00	0 00

Pathways Tech CCTE
Statement of Financial Income and Expense
 July 2014 through June 2015

11:29 AM
 09/09/15
 Accrual Basis

	Building	Equipment	General	Marketing/Fundraising
Operations				
Printing and Copying	0.00	0.00	330.72	0.00
Telephone, Telecommunications	0.00	0.00	0.00	0.00
Total Operations	0.00	0.00	330.72	0.00
Other Types of Expenses				
PayPal Expense	0.00	0.00	6.80	0.00
Advertising/Marketing Expenses	0.00	0.00	100.00	0.00
Bank Charges	0.00	0.00	28.00	0.00
Convention Fees as a Vendor	0.00	0.00	0.00	425.00
Donations-Other NonProfit Orgs.	0.00	150.00	750.00	0.00
Insurance - Liability, D and O	0.00	0.00	1,012.50	0.00
Memberships and Dues	0.00	0.00	0.00	150.00
Total Other Types of Expenses	0.00	150.00	1,897.30	575.00
Total Expense	768.83	360.00	6,555.28	575.00
Net Ordinary Income	-468.83	-160.00	11,249.19	-575.00
Other Income/Expense				
Other Income	0.00	0.00	0.00	0.00
Interest Earned	0.00	0.00	0.00	0.00
Total Other Income	0.00	0.00	0.00	0.00
Net Other Income	-468.83	-160.00	11,249.19	-575.00

Pathways Tech CCTE
Statement of Financial Income and Expense
 July 2014 through June 2015

11:29 AM
 09/09/15
 Accrual Basis

	Overhead	Unassigned	TOTAL
Ordinary Income/Expense			
Income			
Use of Building	0.00	350.00	2,450.00
Donation from Staff Member	0.00	0.00	215.76
Donation/General Fund			
Individual	0.00	0.00	4,821.76
Other Ministries	0.00	0.00	5.00
Total Donation/General Fund	0.00	0.00	4,826.76
Donations/Gifts-In-Kind			
Donated Item			
Individual	0.00	0.00	206.95
Total Donated Item	0.00	0.00	206.95
Total Donations/Gifts-In-Kind	0.00	0.00	206.95
Pledges			
Churches	0.00	0.00	1,000.00
Individuals	0.00	0.00	9,955.00
Total Pledges	0.00	0.00	10,955.00
Total Income	0.00	350.00	18,654.47
Gross Profit	0.00	350.00	18,654.47
Expense			
Building Renovations	0.00	0.00	119.61
Uncategorized Expenses	0.00	0.00	633.32
Business Expenses			
Bad Debts	0.00	0.00	0.00
Business Registration Fees	0.00	0.00	-259.00
Total Business Expenses	0.00	0.00	-259.00
Contract Services			
Accounting Fees	0.00	0.00	385.00
Internet Website Fee	0.00	0.00	215.76
Legal Fees	0.00	0.00	3,435.00
Total Contract Services	0.00	0.00	4,035.76
Facilities and Equipment			
Reimburse Voc Equip Purchases	0.00	0.00	127.18
Services to Safety Equipment	0.00	0.00	217.30
Building Repairs & Maintenance	154.76	0.00	586.68
Total Facilities and Equipment	154.76	0.00	931.16

Pathways Tech CCTE
Statement of Financial Income and Expense
July 2014 through June 2015

	Overhead	Unassigned	TOTAL
Operations			
Printing and Copying	0.00	0.00	330.72
Telephone, Telecommunications	3,883.65	0.00	3,883.65
Total Operations	3,883.65	0.00	4,214.37
Other Types of Expenses			
PayPal Expense	0.00	0.00	6.80
Advertising/Marketing Expenses	0.00	0.00	100.00
Bank Charges	0.00	0.00	28.00
Convention Fees as a Vendor	0.00	0.00	425.00
Donations-Other NonProfit Orgs.	0.00	350.00	1,250.00
Insurance - Liability, D and O	985.75	0.00	1,998.25
Memberships and Dues	0.00	0.00	150.00
Total Other Types of Expenses	985.75	350.00	3,958.05
Total Expense	5,024.16	350.00	13,633.27
Net Ordinary Income	-5,024.16	0.00	5,021.20
Other Income/Expense			
Other Income	0.00	0.09	0.09
Interest Earned	0.00	0.09	0.09
Total Other Income	0.00	0.09	0.09
Net Other Income	-5,024.16	0.09	5,021.29



JUNE, 2015, REPORT

- **Statement of Financial Position "Balance Sheet" (As of June 30, 2015)**
- **Statement of Financial Income and Expense – June, 2015**
- **Total Contributions and Donations:**
 - **Income Report – June, 2015**
 - **Income Report – For Fiscal Year 2014-2015**
- **Check Detail (For June, 2015)**

Current Things Completed for 2014-2015:

- **Budget**
 - **Building System's Analysis Completed Renovation Expense February, 2015**
 - **Five-Year Projections Completed March, 2015**
- **Inventory Completed**
 - **Inventory Tags Have Been Donated (Not Placed)**
 - **Inventory Spreadsheets Completed March, 2015**
- **Charity Registration Completed and Mailed for 2014, Due May 1, 2015**
- **Donation Forms Have Been Completed and Mailed for 2014**
- **Compilation Completed by CPA Firm, August, 2014, for year ended June 30, 2014**
- **Tuition System Has Been Set Up**
- **OSTC Submitted and Approved for 2015-2016 School Year**

Current Things To Be Completed:

- **Payroll System**
- **Fixed Assets To Be Entered in QuickBooks for Tracking**
- **Inventory Tags To Be Placed**
- **Policies, Forms and Procedures for Business Office**

Respectfully Submitted,

*(Entries and Reports Prepared by S. Cook)
For Review by Advisory Board Members*

Pathways Tech CCTE

Balance Sheet

As of June 30, 2015

	Jun 30, 15
ASSETS	
Current Assets	
Checking/Savings	
Wells Fargo	
Wells Fargo Savings	8 37
Wells Fargo Checking	299 22
Total Wells Fargo	307 59
Petty Cash	
Petty Cash - Cul Arts Fine Dine	263 81
Total Petty Cash	263 81
Total Checking/Savings	571 40
Other Current Assets	
Paid by Staff Member	215 76
Prepaid Expenses	
Prepaid Insurance	506 25
Total Prepaid Expenses	506 25
Donated Items/Gifts in Kind	5,906 30
Supplies	
Office Supplies	56 17
Total Supplies	56 17
Total Other Current Assets	6,684 48
Total Current Assets	7,255 88
Fixed Assets	
Signs	2,284 63
Textbooks and Curriculum	
Cosmetology Curriculum	1,013 72
Total Textbooks and Curriculum	1,013 72
Trailers - 28'	2,700 00
Furn & Equip Specific Shops	
Health Occupations Equipment	85 10
Auto Tech Equipment	325 45
Cosmetology Equipment	1,494 75
Cosmetology Furniture	232 39
Total Furn & Equip Specific Shops	2,137 69
Furniture & Equipment General	
Security	423 50
Maintenance Equipment	2,594 11
Bathroom Accessories	195 08
Total Furniture & Equipment General	3,212 69
Furniture and Equipment	
Culinary	10,503 23
Health Room Furniture	17 06
Office Equipment	904 25
Office Furniture	330 00
School Store Equipment	1,745 00
Unassigned Equipment	1,765 38
Unassigned Furniture	4,130 70
Total Furniture and Equipment	19,395 62
Technology Equipment	751 98
Total Fixed Assets	31,496 33

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Accrual Basis

Pathways Tech CTE
Balance Sheet
As of June 30, 2015

	Jun 30, 15
Other Assets	
Other Assets	945 72
Advertising Supplies	194 13
Other Assets - Other	-
Total Other Assets	1,139 85
Security Deposits Asset	500 00
Total Other Assets	1,639 85
TOTAL ASSETS	<u>40,392.06</u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
Loans from Officers, Directors	
Loans from Officers S. Cook	34,000 00
Total Loans from Officers, Directors	34,000 00
Total Other Current Liabilities	34,000 00
Total Current Liabilities	34,000 00
Total Liabilities	34,000 00
Equity	1,370 77
Unrestricted Net Assets	5,021 29
Net Income	6,392 06
Total Equity	6,392 06
TOTAL LIABILITIES & EQUITY	<u>40,392.06</u>

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Accrual Basis

Pathways Tech CTE
Statement of Financial Income and Expense
June 2015

	Jun 15
Ordinary Income/Expense	
Income	
Donation/General Fund	
Individual	500 00
Total Donation/General Fund	500 00
Pledges	
Churches	250 00
Individuals	130 00
Total Pledges	380 00
Total Income	880 00
Gross Profit	880 00
Expense	
Other Types of Expenses	
PayPal Expense	0 85
Donations-Other NonProfit Orgs.	450 00
Insurance - Liability, D and O	506 25
Total Other Types of Expenses	957 10
Total Expense	957 10
Net Ordinary Income	-77 10
Net Income	<u>-77 10</u>

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Accrual Basis

Pathways Tech CTE
Income Report - Prior Month
June 2015

	Jun 15
Ordinary Income/Expense	
Income	
Donation/General Fund	
Individual	500 00
Total Donation/General Fund	500 00
Pledges	
Churches	250 00
Individuals	130 00
Total Pledges	380 00
Total Income	880 00
Gross Profit	880 00
Net Ordinary Income	880 00
Net Income	<u>880.00</u>

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Accrual Basis

Pathways Tech CCTE
Income Report - FY 2014-2015
July 2014 through June 2015

	Jul '14 - Jun 15
Ordinary Income/Expense	
Income	
Use of Building	2,450 00
Donation from Staff Member	215 76
Donation/General Fund	
Individual	4,821 76
Other Ministries	5 00
Total Donation/General Fund	4,826 76
Donations/Gifts-In-Kind	
Donated Item	
Individual	206 95
Total Donated Item	206 95
Total Donations/Gifts-In-Kind	206 95
Pledges	
Churches	1,000 00
Individuals	9,955 00
Total Pledges	10,955 00
Total Income	18,654 47
Gross Profit	18,654 47
Net Ordinary Income	18,654 47
Other Income/Expense	
Other Income	
Interest Earned	0 09
Total Other Income	0 09
Net Other Income	0 09
Net Income	<u>18,654.56</u>

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Pathways Tech CCTE

Check Detail

June 2015

Type	Num	Date	Name	Account	Paid Amount
Bill Pmt -Check	1137	6/18/2015	Brotherhood Mutual ...	Wells Fargo Checking	
Bill	CK#1137	6/18/2015		Prepaid Insurance	-506 25
TOTAL					-506 25
Bill Pmt -Check	1138	6/26/2015	Jehoshua Otuya	Wells Fargo Checking	
Bill	Ck#1138	6/26/2015		Donations-Other NonProfit Orgs	-150 00
TOTAL					-150 00
Bill Pmt -Check	1139	6/28/2015	Harrisburg First Ass...	Wells Fargo Checking	
Bill	CK #1139	6/28/2015		Donations-Other NonProfit Orgs	-300 00
TOTAL					-300 00