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DLN: 93493134038656

# Form 990

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

 $\blacktriangleright$  Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A Fo	r the	2014 ca	alendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015	i			
<b>B</b> Ch	eck ıf a	pplicable	C Name of organization Holland Christian Education Society		D Employ	er ident	ification number
☐ Ad	dress ch	hange	Holand Christian Education Society		38-14	16520	
Г№	me cha	inge	Doing business as				
┌ Ini	ial retu	ırn	Holland Christian Schools		E Telephoi	no numb	ar.
Fir			Number and street (or P O box if mail is not delivered to street address) Room/sui 956 Ottawa Ave	te			
_		mınated			(616)	820-28	105
_	ended		City or town, state or province, country, and ZIP or foreign postal code Holland, MI 49423		<b>G</b> Gross re	ceints ¢	17,920,225
Г Ар	olication	n pending	9		<b>G</b> Gloss le	ссіріз э	17,920,223
			F Name and address of principal officer	<b>H(a)</b> Is the	Is a group	return f	
			Dan Meester 956 Ottawa Ave	subo	rdınates?		┌ Yes 🔽 No
			Holland, MI 49423	<b>H(b)</b> Are a	ıll subordır	nates	┌ Yes ┌ No
				inclu		iuces	, 103, 110
I Ta	x-exen	npt statu	s	If "N	o," attach	alıst (	see instructions)
J W	ebsite	e: 🕨 w	ww hollandchristian org	H(c) Grou	ıp exemptı	on num	ber <b>►</b>
K For	n of or	manızatıo	on ▼ Corporation  Trust  Association  Other ►	L Year of fo	rmation 190	)1 <b>M</b> S	tate of legal domicile Mi
	rt I		nmary	E rear or to	iniation 150	71   1115	rate of legal dofficie. 11
			describe the organization's mission or most significant activities				
			vide a Christian education for students preschool through grade 12				
2							
Ě							
Activities & Governance	2	——— Check	this box 🖊 if the organization discontinued its operations or disposed o	f more than 2	5% of its	net ass	ets
Ş			, , , , , , , , , , , , , , , , , , , ,				
<b>2</b> 5	3	Numbe	r of voting members of the governing body (Part VI, line 1a) $ \cdot  \cdot  \cdot $			3	1:
<u>କ</u>	4	Numbe	r of independent voting members of the governing body (Part VI, line 1b)			4	1:
퇃	5	Total n	umber of individuals employed in calendar year 2014 (Part V, line 2a) .			5	46!
្ន	6	Total n	umber of volunteers (estimate if necessary)			6	300
	I		nrelated business revenue from Part VIII, column (C), line 12			7a	(
	Ь	Net uni	related business taxable income from Form 990-T, line 34			7b	(
				Prio	r Year		Current Year
an	8		ributions and grants (Part VIII, line 1h)		2,634,326		4,606,018
en en	9	_	ram service revenue (Part VIII, line 2g)	12,643,180			12,826,123
Revenue	10		stment income (Part VIII, column (A), lines 3, 4, and 7d)		237,7		168,221
	11		r revenue (Part VIII, column (A ), lines 5, 6d, 8c, 9c, 10c, and 11e) l revenue—add lines 8 through 11 (must equal Part VIII, column (A ), line	.	150,2	39	123,516
	12		· · · · · · · · · · · · · · · · · · ·	•	15,665,5	38	17,723,878
	13		ts and similar amounts paid (Part IX, column (A), lines 1-3)		961,9	62	952,801
	14	Bene	fits paid to or for members (Part IX, column (A), line 4)			0	0
	15		ries, other compensation, employee benefits (Part IX, column (A), lines		10,446,1	39	10,111,279
Expenses		5-10					
₹	16a		essional fundraising fees (Part IX, column (A), line 11e)		2,7	44	2,895
ਡੋ	Ь	Total	fundraising expenses (Part IX, column (D), line 25) ▶ 108,915				
	17	Othe	r expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,150,2	60	5,961,663
	18	Tota	l expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		17,561,1	05	17,028,638
	19	Reve	enue less expenses Subtract line 18 from line 12		-1,895,5	67	695,240
රිජි					g of Curren	ıt	End of Year
and See	20	Tata	Laccate (Dart V. line 16)	<u> </u>	'ear	0.2	41 505 575
Not Assets or Fund Balances	21		l assets (Part X, line 16)		41,102,6 3,632,7		41,595,575
2 E	22		assets or fund balances Subtract line 21 from line 20	•	37,469,8		38,013,327
	100		nature Block		37,103,0	7.7	30,013,327
my k	nowled arer ha	dge and as any	f perjury, I declare that I have examined this return, including accompand belief, it is true, correct, and complete Declaration of preparer (other the knowledge  ****  nature of officer  vid Huisman Treasurer	an officer) is			
			be or print name and title				
		•			CK I II	PTIN P010747	95
Pai	d	-	Daren Daiga  Firm's name  Capin Crouse LLP		-employed n's EIN 🟲 36		
Pre	pare	r					
Her	Ōn	L.	Firm's address ► 972 Emerson Parkway Ste A	Pho	ne no (317)	885-262	20

Greenwood, IN 46143
May the IRS discuss this return with the preparer shown above? (see instructions)

**∀**Yes **No** 

(Expenses \$

Other program services (Describe in Schedule O)

4d

including grants of \$

) (Revenue \$

art 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II"	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part $IV^{\square}$	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Νo
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
.2a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
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	Yes	
.3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🕏	13	Yes	
.4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
.5	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		No
<b>.6</b>	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		No
. <b>7</b>	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
.8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
.9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νο
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		N o
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$ $\footnote{5}$	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$ ?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>990</b>	(2014)

FG	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	<del></del>	· · ·	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   58		T es	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		110
	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		Νo
b	If "Yes," enter the name of the foreign country			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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		No
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).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7</b> c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
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.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring 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   10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	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			
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?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
c	In which the organization is licensed to issue qualified health plans			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 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	7
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Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.			

- - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►David Zimmer

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ♦ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

	Average hours per week (list any hours	more pers	than on is	one bot	not box h ar or/tr	check , unle n office ustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) Stacy Jackson President	2 00	х		х				0	0	0
(2) Seth Bushouse	2 00	х		х				0	0	0
(3) David Huisman Treasurer	2 00	Х		х				0	0	0
(4) Susan Vroegop Secretary	2 00	Х		х				0	0	0
(5) Kurt Dykema Board Member	2 00	х						0	0	0
(6) Paul Hoekstra Board Member	2 00	Х						0	0	0
(7) Dorı Helder Board Member	2 00	Х						0	0	0
(8) Todd Steen Board Member	2 00	Х						0	0	0
(9) Mitchell Urbytes  Board Member	2 00	х						0	0	0
(10) Deone Quist Board Member	2 00	Х						0	0	0
(11) Chris Wierda  Board Member	2 00	х						0	0	0
(12) David Zimmer  Director of Finance	10 00			х				46,753	0	5,195
(13) Dan Meester Superintendent	45 00			х				69,970	0	16,575
(14) Dale Scholten  Director of Marketing	45 00					х		103,981	0	28,199

Part VII

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

(A) Name and Title	(B) A verage hours per week (list any hours	A verage hours per more than one by more than one by person is both and a director/				unless officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	99-MISC) 2/1099-MISC)	organization and related organizations

1b	Sub-Total	•			
c	Total from continuation sheets to Part VII, Section A	Þ			
d	Total (add lines 1b and 1c)	Þ	220,704	0	49,969

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►1

			res	NO
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
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		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

#### **Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Takal mankan dan dan dan dan kanadan dan dan dan dan dan dan dan dan d	and a second second bloom	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Form 99								Page <b>9</b>
Part V	/##1	Statement of Check of Schedu	of Revenue ule O contains a respon	se or note to any lir	ne in this Part VIII			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u> </u>	1a	Federated cam	paigns 1a					
Grants Amounts	b	Membership du	ues <b>1b</b>					
Ē,G	c	Fundraising ev	ents <b>1c</b>	166,920				
iffs ar /	d	Related organiz	zations 1d	439,640				
s, G imil	e	Government grant	ts (contributions) <b>1e</b>	167,797				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribute similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	3,831,661				
ontrib nd Otl	g h	Noncash contributi 1a-1f \$ <b>Total.</b> Add line:	ions included in lines	2,232,103	4,606,018			
<u>ہ ت</u>		TOTAL A du lille:	5 1 a - 1 1		1,000,010			
E E	2a	Tuition and Fees		Business Code 900099	11,534,428	11,534,428		
ever	b	Auxiliary/Other		900099	1,291,695	1,291,695		
e E	c			300033	1,231,030	1,231,033		
	d							
Ø E	e							
Program Service Revenue	f	All other progra	am service revenue					
š	g	Total. Add lines	l s 2a-2f		12,826,123			
	3		come (including dividend		71,648			71,648
	4		ar amounts) stment of tax-exempt bond p		,			,
	5	Royalties .		🕨				
			(ı) Real	(11) Personal				
	6a b	Gross rents Less rental						
		expenses Rental income						
	C	or (loss)	ma or (loss)					
	d	Net felltal lifto	me or (loss) (1) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	191,449	(4,7,5,111,11)				
	Ь	than inventory Less cost or						
		other basis and sales expenses	73,731	21,145				
	C .	Gain or (loss)	117,718	-21,145	06 573			06 573
	d 8a		ss)		96,573			96,573
Other Revenue		events (not inc \$166	luding 5,920 s reported on line 1c)					
<u>.</u>			a	224,987				
Ě	b		(penses <b>b</b> (loss) from fundraising e	101,471	123,516			123,516
•	c 9a		from gaming activities	events p-	123,310			123,310
			ne 19					
	Ь	less directev	a penses b					
			(loss) from gaming activ	rities				
	10a	Gross sales of returns and allo						
			a					
	b		oods sold <b>b</b> [ (loss) from sales of inve	ntory				
	Ť	Miscellaneous		Business Code				
	11a							
	b							
	С							
	d	All other reven	L					
	e	Total. Add lines		•				
	12	lotal revenue.	See Instructions		17,723,878	12,826,123	0	291,737

**b** Bad debt

**e** All other expenses

Total functional expenses. Add lines 1 through 24e

here ► T if following SOP 98-2 (ASC 958-720)

**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check

C d

25

26

	990 (2014)				Page <b>10</b>
	IX Statement of Functional Expenses				
Secti	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizati	ons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22	952,801	952,801		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				-
5	Compensation of current officers, directors, trustees, and key employees	204,522		204,522	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	8,077,861	7,473,629	604,232	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	391,187	344,819	46,368	
9	Other employee benefits	881,795	767,690	114,105	
10	Payroll taxes	555,914	453,497	102,417	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	25,795	4,200	21,595	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	2,895			2,895
f	Investment management fees	11,424		11,424	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	149,030	718	52,372	95,940
13	Office expenses	404,434	387,178	7,176	10,080
14	Information technology	451,144	302,503	148,641	
15	Royalties				
16	Occupancy	666,966	658,439	8,527	
17	Travel	16,093	3,360	12,733	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	29,342	2,190	27,152	
20	Interest	42,725		42,725	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,711,247	2,711,247		
23	Insurance	77,594	77,594		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	School operations	1,194,563	1,169,014	25,549	

175,000

6,306

17,028,638

6,207

15,315,086

108,915

175,000

1,604,637

99

Part X Balance Sheet

Par	τχ	Check if Schedule O contains a response or note to any line in	this Pa	art X			
					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash-non-interest-bearing				1	
	2	Savings and temporary cash investments			3,304,943	2	3,612,901
	3	Pledges and grants receivable, net				3	120,913
	4	Accounts receivable, net			1,214,125	4	945,547
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete Paschedule L	art II d	of		5	
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	outing employers		6		
8	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use			21,092	8	21,928
	9	Prepaid expenses and deferred charges			,	9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		63,192,775			
	ь	Less accumulated depreciation	10b	32,206,605	32,765,563	10c	30,986,170
	11	Investments—publicly traded securities	<u> </u>		3,217,889	11	5,290,378
	12	Investments—other securities See Part IV, line 11			579,070	12	617,738
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets		14	_		
	15	Other assets See Part IV, line 11				15	
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .			41,102,682	16	41,595,575
	17	Accounts payable and accrued expenses			1,387,530	17	1,263,962
	18	Grants payable				18	.,
	19	Deferred revenue			506,931	19	735,329
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Scho			21		
lities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali		21			
Liabiliti		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s .		1,038,226	23	931,737
	24	Unsecured notes and loans payable to unrelated third parties				24	_
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	700 000		054.000		
		D			700,096	25	651,220
	26	Total liabilities. Add lines 17 through 25			3,632,783	26	3,582,248
on dh		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	⊽ and	complete			
ĕ	27	Unrestricted net assets			33,051,664	27	31,585,942
Fund Balance	28	Temporarily restricted net assets		• •	1,595,215	28	3,480,964
<u>∞</u>	29	Permanently restricted net assets			2,823,020	29	2,946,421
Ĭ	29	Organizations that do not follow SFAS 117 (ASC 958), check h			2,023,020	23	2,040,421
		complete lines 30 through 34.	eie F	j and			
0.	30	Capital stock or trust principal, or current funds	_			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	_
25.5	32	Retained earnings, endowment, accumulated income, or other t		·		32	
Net /	33	Total net assets or fund balances			37,469,899	33	38,013,327
ž	34	Total liabilities and net assets/fund balances			41,102,682	34	41,595,575
	J-7	rotar nabilities and het assets/lund balances	• •	• •	41, 102,002	J4	41,080,070

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		17,7	723,878
2	Total expenses (must equal Part IX, column (A), line 25)	2		17 (	028,638
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3			595,240
_		4		37,4	169,899
5	Net unrealized gains (losses) on investments	5		- 1	151,812
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		38.	013,327
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or	1		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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#### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

#### **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization Holland Christian Education Society					Employer identification number							
попаг	ia Chris	cian Education Society					38-1416520					
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	tions must co	mplete this p		ons.				
		zation is not a private fo										
1	Ē	A church, convention		•	= -	· ·	•					
2	굣	A school described in				•						
3	Ē	A hospital or a cooper				tion 170(b)(1)	(A)(iii).					
4	Ė	A medical research or		<del>-</del>				i). Enter the				
		hospital's name, city,										
5	Г	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	or operated by a	a governmental unit d	escribed in				
		section 170(b)(1)(A)	( <b>iv).</b> (Complet	e Part II)								
6	Γ	A federal, state, or loc	al governmen	t or governmental unit	described in <b>se</b>	ection 170(b)(1	.)(A)(v).					
7	Γ	An organization that n				om a governme	ntal unit or from the o	general public				
	_	described in <b>section 1</b> A community trust des				+ TT \						
8 9	<u>'</u>						hutians mambarshin	food and gross				
9	ļ	An organization that n										
		receipts from activitie its support from gross										
		• • • •				•	•	i busillesses				
10	_	acquired by the organi		•		•	•					
10	<u> </u>	An organization organ	•	•	•	•						
11	ı	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 th			• •							
а	Γ	<b>Type I.</b> A supporting o										
		supported organization				ty of the direct	ors or trustees of the	supporting				
ь	_	organization You mus				with ite europo	rted organization(c)	ay haying control or				
U	'		ing organization supervised or controlled in connection with its supported organization(s), by having control or e supporting organization vested in the same persons that control or manage the supported organization(s) <b>You</b>									
		must complete Part IV										
C	Г	Type III functionally						grated with, its				
	_	supported organization						innization(s) that is				
d	ļ	<b>Type III non-functionally integrated.</b> 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.										
е	Γ	Check this box if the o					s a Type I, Type II, T	ype III functionally				
_		integrated, or Type III										
f ~		Enter the number of su Provide the following i										
g		Provide the following i	mormation ab	out the Supported orga	inization(s)							
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganization	(v) A mount of	(vi) A mount of				
organization		organization		organization	listed in your	governing	monetary support	other support (see				
			(described on lines document?		nt?	(see instructions)	instructions)					
			1-9 above or IRC section (see									
			instructions))									
					Yes	No						
Tota	1						<u> </u>					

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.)

S	ection A. Public Support							
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	( <b>d)</b> 2013	<b>(e)</b> 20	14	( <b>f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,259,767	3,259,661	2,635,105	2,634,326	4,	606,018	15,394,877
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							
4	to the organization without charge <b>Total.</b> Add lines 1 through 3	2,259,767	3,259,661	2,635,105	2,634,326	4	606,018	15,394,877
5	The portion of total contributions	2,233,107	3,233,001	2,033,103	2,031,320	.,	000,010	13,331,077
-	by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the							389,817
	amount shown on line 11, column							
6	(f) <b>Public support.</b> Subtract line 5 from line 4							15,005,060
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning in) 🟲	(a) 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	<b>(e)</b> 20	14	(f) Total
7	A mounts from line 4	2,259,767	3,259,661	2,635,105	2,634,326	4,	606,018	15,394,877
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	69,303	71,098	104,880	102,841		71,648	419,770
9	sources  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)	359,773	145,193	225,491	239,046		224,987	1,194,490
11	<b>Total support</b> Add lines 7 through 10							17,009,137
12	Gross receipts from related activiti	es, etc (see instr	uctions)			12		61,903,468
13	<b>First five years.</b> If the Form 990 is organization, check this box and <b>st</b>	op here	<u> </u>			section 5		)
	ection C. Computation of Pub							
14	Public support percentage for 2014			11, column (f))		14		88 220 %
15	Public support percentage for 2013	Schedule A, Pari	t II, line 14			15		
16a	<b>33 1/3% support test—2014.</b> If the				ne 14 is 33 1/3%	or more	, check t	
	and stop here. The organization qua 33 1/3% support test—2013. If the box and stop here. The organization 10%-facts-and-circumstances test- is 10% or more, and if the organiza in Part VI how the organization mee	organization did in qualifies as a pu 	not check a box o blicly supported o inization did not c icts-and-circums	n line 13 or 16a, organization heck a box on lin tances" test, che	e 13, 16a, or 16t ck this box and <b>s</b>	o, and line t <b>op here</b> .	± 14 Explain	<b>▶</b>
b 18	organization  10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part VI how the organiza supported organization  Private foundation. If the organizations	nization meets the tion meets the "fa	e "facts-and-circu icts-and-circums	mstances" test, tances" test The	check this box ar organization qua	ld <b>stop h</b> e lifies as	e <b>re.</b> a publicly	<b>▶</b> □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) 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 Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

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%, check this box and stop here. The organization qualifies as a publicly supported organization

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

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

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

#### 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
---

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or $(2)$ ? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section $509(a)(1)$ or $(2)$ .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
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)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.	4b		
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 $(2)^7$ 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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? 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).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? If "Yes," provide detail in <b>Part VI</b> .	6		
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? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
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))? If "Yes," provide detail in <b>Part VI</b> .	9a		
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</i> "Yes," provide detail in <b>Part VI</b> .	9b		
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? If "Yes," provide detail in <b>Part VI</b> .	9c		
L0a	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)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	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

Pa	rt IV Supporting Organizations (continued)			
S	ection 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 <b>Part VI</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection 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 <b>Part VI</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	ection 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  The organization satisfied the Activities Test Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	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>b</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 <b>Part VI</b> 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				
	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		1 1	

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
ype	[]	II 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)	1		
а	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	<b>Discount</b> 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

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year							
1 Amounts paid to supported organizations to accom								
2 Amounts paid to perform activity that directly furthexcess of income from activity	A mounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity							
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons						
4 Amounts paid to acquire exempt-use assets								
5 Qualified set-aside amounts (prior IRS approval rec	nured)							
6 Other distributions (describe in Part VI) See instru	JCTIONS							
7 Total annual distributions. Add lines 1 through 6								
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide						
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 requiredsee instructions)								
3 Excess distributions carryover, if any, to 2014								
<b>a</b> From 2009								
<b>b</b> From 2010								
<b>c</b> From 2011								
d From 2012								
<b>e</b> 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 pplied to underdistributions of prior years								
<b>b</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)								
<b>7 Excess distributions carryover to 2015.</b> Add lines 3j and 4c								
8 Breakdown of line 7								
<b>a</b> From 2010								
<b>b</b> From 2011								
<b>c</b> From 2012								
d From 2013								

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

#### **Facts And Circumstances Test**

Return Reference	Explanation
, , , , , , , , , , , , , , , , , , , ,	Fundraising events - 2010 Amount \$ 359,773 2011 Amount \$ 145,193 2012 Amount \$ 225,491 2013 Amount \$ 239,046 2014 Amount \$ 224,987
	The organization is a school as described under $170(b)(1)(A)(ii)$ and is not required to complete a public support schedule. Schedule A, Part II is completed to verify the School can qualify under public charity status section $170(b)(1)(A)(vi)$ and qualifies to use the first listed special rule for Schedule B reporting

Schedule A (Form 990 or 990-EZ) 2014

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DLN: 93493134038656

OMB No 1545-0047

#### **SCHEDULE D**

(Form 990)

Department of the Treasury

#### **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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public

Naı	me of the organization land Christian Education Society	,	Employer identification number
Pa	organizations Maintaining Donor Adv		38-1416520 Funds or Accounts. Complete if the
	Organization answered Tes to Form 990,	(a) Donor advised funds	(b) Funds and other accounts
L	Total number at end of year	(a) beneficially and	(2) I and and other decounts
- >	Aggregate value of contributions to (during year)		
- }	Aggregate value of grants from (during year)		+
į	Aggregate value at end of year		+
		re in writing that the access hold in de	nor adviced
•	Did the organization inform all donors and donor adviso funds are the organization's property, subject to the organization's property.	ganızatıon's exclusive legal control?	☐ Yes ☐ No
•	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benefi conferring impermissible private benefit?		
Pai	rt II Conservation Easements. Complete if	the organization answered "Yes" t	to Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the orga	anızatıon (check all that apply)	
	Preservation of land for public use (e g , recreation	•	n historically important land area
	Protection of natural habitat	Preservation of a	certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a	qualified conservation contribution in	the form of a conservation
	easement on the last day of the tax year		
	Total number of concernation accoments		Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified histor	• •	2c
d	Number of conservation easements included in (c) acquirely historic structure listed in the National Register		2d
	Number of conservation easements modified, transferre	ed, released, extinguished, or terminat	ed by the organization during
ı	Number of states where property subject to conservation	on easement is located ►	<u></u>
;	Does the organization have a written policy regarding the enforcement of the conservation easements it holds?	he periodic monitoring, inspection, han	dling of violations, and Yes No
,	Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation ease	ments during the year
ı	A mount of expenses incurred in monitoring, inspecting,	, and enforcing conservation easement	s during the year
i	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)?	) above satisfy the requirements of se	ction 170(h)(4)(B)(i)
)	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemer	e footnote to the organization's financia	
ar	Complete if the organization answered "Ye	s of Art, Historical Treasures,	or Other Similar Assets.
la.	If the organization elected, as permitted under SFAS 1: works of art, historical treasures, or other similar asset service, provide, in Part XIII, the text of the footnote to	16 (ASC 958), not to report in its reve ts held for public exhibition, education,	or research in furtherance of public
b	If the organization elected, as permitted under SFAS 1: works of art, historical treasures, or other similar asset service, provide the following amounts relating to these	16 (ASC 958), to report in its revenue ts held for public exhibition, education,	statement and balance sheet
	(i) Revenue included in Form 990, Part VIII, line 1		<b>►</b> \$
	(ii) Assets included in Form 990, Part X		<b></b>
!	If the organization received or held works of art, historic following amounts required to be reported under SFAS 1		or financial gain, provide the
а	Revenue included in Form 990, Part VIII, line 1		<b>▶</b> \$
Ь	Accets included in Form 990 Part V		<b>b</b> - ¢

Part	Organizations Maintaining Co	<u>llections of Art,</u>	Hist	<u>torical T</u>	reasu	res, or O	<u>ther</u>	Similar As	sets (c	<u>ontınued)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ls, che	eck any of	the foll	owing that a	ire a s	significant use	e of its	
а	Public exhibition		d	┌ Loar	orexc	hange progr	ams			
b	Scholarly research		e	┌ Othe	er					
С	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and explain	n how	they furth	er the c	organization	's exe	empt purpose	ın	
5	During the year, did the organization solicit	or receive donations	of art	, historica	l treasu	ıres or otheı	sımı	lar		
	assets to be sold to raise funds rather than								│ Yes	☐ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					n answere	d "Y∈	es" to Form S	<del>9</del> 90,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian or other intermed	diary 1	for contrib	utions	or other ass	ets n	ot	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the f	follow	ing table		_				
						_		Ar	nount	
C	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, f	or escrow	orcust	odıal accoui	nt liab	oility?	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the	expla	nation has	s been p	rovided in F	art X	III		Γ
Pai	rt V Endowment Funds. Complete									
		(a)Current year		rior year	<b>b (c)</b> Tv	vo years back	(d)⊺l	nree years back	<b>(e)</b> Four y	ears back
1a	Beginning of year balance	14,203,799		12,488,267		11,187,133		11,429,371		9,860,921
b	Contributions	422,837		421,398	3	302,165		478,324		380,271
c	Net investment earnings, gains, and losses	-347,922		1,931,370		1,588,701		-138,676		1,756,633
d	Grants or scholarships	598,639		555,040		508,901		497,858		482,713
e	Other expenditures for facilities and programs									
f	Administrative expenses	76,314		82,196	5	80,831		84,028		85,741
g	End of year balance	13,603,761		14,203,799	Ð	12,488,267		11,187,133		11,429,371
2	Provide the estimated percentage of the cur	rent year end balance	e (lıne	e 1g, colur	mn (a)) l	held as				
а	Board designated or quasi-endowment 🕨									
ь	Permanent endowment ► 88 050 %									
c		950 % uld equal 100%								
3a	Are there endowment funds not in the posse	•	tion t	hat are he	ld and a	ıdmınıstered	for t	he		
	organization by	_							Yes	No
	(i) unrelated organizations							3a	` '	No
_	(ii) related organizations							3a(		<u> </u>
	If "Yes" to 3a(II), are the related organization. Describe in Part XIII the intended uses of t	•			,		•	3	<b>b</b> Yes	<u> </u>
4 Par	t VI Land, Buildings, and Equipme				n ancy	vorod 'Voc	' to E	Orm 990 D	ort TV/ li	
FGI	11a. See Form 990, Part X, line		16 01	garnzatic	ni alisv	vereu res	10 1	OIIII 990, F	aiciv, ii	iii C
	Description of property			(a) Cost o basis (inve		(b)Cost or ot basis (othe		(c) Accumulated depreciation	( <b>d)</b> Bo	ook value
1a	Land					2,030	,729		+	2,030,729
	Buildings		.			51,785		25,644,62	1 2	26,140,687
	Leasehold improvements		.			-,. 30	$\dashv$	, ,	<del>                                     </del>	, ,
	Equipment		.			5,954	,684	4,414,99	5	1,539,689
	Other		.			3,422	-	2,146,98		1,275,065
	I. Add lines 1a through 1e (Column (d) must e		, colur	mn (B), line	e 10(c).)					30,986,170
		· · · · · · · · · · · · · · · · · · ·						Schedule I		

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation	
(Including name of security) (1)Financial derivatives		Cost or end-of-year market v	/aiue
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>		
Part VIII Investments—Program Related. C	omplete if the organizatio	n answered 'Yes' to Form 990	), Part IV, line 11c
See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market v	/alue
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )	<b>•</b>		
Part IX Other Assets. Complete if the organization	on answered 'Yes' to Form 990		
(a) Desc	ription	(b)	Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		
Part X Other Liabilities. Complete if the org	anization answered 'Yes' t	o Form 990, Part IV, line 11e	or 11f. See
Form 990, Part X, line 25.  1 (a) Description of liability	(b) Book value		
Federal income taxes	-		
Tuition gift certificates	216,373		
Asset retirement obligation	102,075		
Post-employment obligation	332,772		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>▶</b> 651,220		

Part XII, Line 2d - Other

Part XII, Line 4b - Other

A djustments

 $A\,djustments$ 

Part >		Revenue per Audited Financial Sta wered 'Yes' to Form 990, Part IV, line :		nts With Revenue p	er R	eturn Complete if
1 7		ner support per audited financial statements			1	16,757,171
2 /	Amounts included on line 1 b	out not on Form 990, Part VIII, line 12				
a ſ	Net unrealized gains (losses	) on investments	2a	-151,812		
<b>b</b> [	Donated services and use of	facilities	2b	·		
		ts	2c			
		)	2d	122,616		
е А	Add lines <b>2a</b> through <b>2d</b>		<u> </u>		2e	-29,196
3 9	Subtract line <b>2e</b> from line <b>1</b>				3	16,786,367
4	Amounts included on Form 9	90, Part VIII, line 12, but not on line <b>1</b>				
a I	investment expenses not inc	cluded on Form 990, Part VIII, line 7b .	4a			
<b>b</b> (	Other (Describe in Part XIII	)	4b	937,511		
c A	Add lines <b>4a</b> and <b>4b</b>				4c	937,511
5	Fotal revenue Add lines <b>3</b> ai	nd <b>4c.</b> (This must equal Form 990, Part I, line	12)		5	17,723,878
Part X		Expenses per Audited Financial Stanswered 'Yes' to Form 990, Part IV, line			per	Return. Complete
<b>1</b> T	otal expenses and losses p	er audited financial statements			1	16,213,743
2 /	Amounts included on line 1 b	ut not on Form 990, Part IX, line 25				
a [	Donated services and use of	facilities	2a			
<b>b</b> F	rıor year adjustments .		2b			
<b>c</b> (	Otherlosses		2c			
d C	Other (Describe in Part XIII	)	2d	122,616		
e /	Add lines <b>2a</b> through <b>2d .</b>				2e	122,616
3 9	Subtract line <b>2e</b> from line <b>1</b>				3	16,091,127
4 /	Amounts included on Form 9	90, Part IX, line 25, but not on line 1:				
a I	nvestment expenses not inc	luded on Form 990, Part VIII, line 7b	4a			
<b>b</b> (	Other (Describe in Part XIII	)	4b	937,511		
c A	Add lines <b>4a</b> and <b>4b</b>				4c	937,511
<b>5</b> T	otal expenses Add lines 3	and <b>4c.</b> (This must equal Form 990, Part I, lir	ne 18 )		5	17,028,638
Part X	Supplemental Ir	formation				
	line 4, Part X, line 2, Part X ition	or Part II, lines 3, 5, and 9, Part III, lines 1a I, lines 2d and 4b, and Part XII, lines 2d and				de any additional
	Return Reference	Explanation				
Part V , L	.ine 4	The endowment fund includes assets held Education Foundation, a related organization organization Endowed assets will be used the endowment funds' fund balances are to scholarships to students	on orga based	nized to support the ope upon board and donor-ir	eratior npose	ns of the filing d restrictions 5% of
Part X, L	ine 2	The financial statement effects of a tax po consolidated financial statements when it the position will be sustained upon examin expenses in the consolidated statement on uncertain tax positions that qualify for statements	is more nation ] factivit	likely than not, based on nterest and penalties, it lies As of June 30, 201	on the fany, a 5 and	technical merits, that are included in 2014, the School had
Part XI, Adjustm	Line 2d - Other ents	Fundraising expenses netted to revenue 1	01,471	Loss on disposal of eq	uıpme	nt 21,145
	Line 4b - Other	Tuition scholarships netted against incom	ie 937,	511		

Fundraising expenses netted to revenue 101,471 Loss on disposal of equipment 21,145

Tuition scholarships netted against income 937,511

Jenedale 2 (1 31111 33 3) 23 13		i age <b>S</b>
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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As Filed Data -

DLN: 93493134038656

OMB No 1545-0047

**SCHEDULE E** 

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

**Schools** 

▶Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization **Employer identification number** Holland Christian Education Society 38-1416520 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to Νo a Students' rights or privileges? 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? **5c** Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? No\_ 5g h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a h Has the organization's right to such aid ever been revoked or suspended? Νo 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 Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide any other additional information (see instructions)

Return Reference	Explanation		
Schedule E, Part I, Line 3	Nondiscrimination policies are published through the local newspaper during our student registration period as well as the website		
Schedule E, Part I, Line 6	The school receives Title II Funds through local public schools and government funding for the cafeteria program		

Schedule E (Form 990 or 990-EZ) (2014)

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DLN: 93493134038656

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

**SCHEDULE G** 

**Fundraising or Gaming Activities** Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ.

**Supplemental Information Regarding** 

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

Open to Public Inspection

	he organization hristian Education Soci	oty	-				Employer ider	ntification number
Tottaliu C	mistian Education 30c	ety					38-1416520	
Part I	Fundraising Active filers are not require			ganızatıo	n answered "Yes" to	Form	990, Part IV,	line 17. Form 990-EZ
<b>1</b> Ind	cate whether the organ	zation raised funds	through aı	ny of the 1	following activities Che	eck all th	nat apply	
аГ	Mail solicitations			е	Solicitation of non	n-govern	ment grants	
ь Г	Internet and email soli	citations		f	Solicitation of gov	ernment/	t grants	
с Г	Phone solicitations g Special fundraising						5	
d $\Gamma$	In-person solicitations							
	the organization have a ey employees listed in l							Γ <sub>Yes</sub> Γ <sub>No</sub>
	es," list the ten highes e compensated at least			fundraıse	rs) pursuant to agreem	ents unc	ler which the fu	ndraiser is
	ame and address of individual ntity (fundraiser)	(ii) Activity	fundrais custe cont contrib	Did ser have ody or crol of putions?	(iv) Gross receipts from activity	(or r	mount paid to retained by) aiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1			Yes	No				
2								
3								
4								
5								
6								
7								
8								
9								
10								
Total .			<u> </u>	<u>.</u>				
	all states in which the o stration or licensing	organization is regis	tered or li	censed to	solicit contributions o	r has be	en notified it is	exempt from

Sche	dule	G (Form 990 or 990-EZ) 2014				Page 2
Pai	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
			(a) Event #1  Lecture Series  (event type)	(b) Event #2  Auction (event type)	(c) O ther events  3 (total number)	(d) Total events (add col (a) through col (c))
<u>Φ</u>						
Revenue	1	Gross receipts	105,84	223,185	62,877	391,907
Rev	2	Less Contributions	78,580	74,800	13,540	166,920
	3	Gross income (line 1 minus line 2)	27,26	148,385	49,337	224,987
	4	Cash prizes		392	2	392
မွာ	5	Noncash prizes		18,480	1,832	20,312
Expenses	6	Rent/facility costs				
	7	Food and beverages .	20,93	9,946	721	31,598
Direct	8	Entertainment				
Δ	9	Other direct expenses .	11,058	3,958	34,153	49,169
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	n (d)		(101,471)
	11	Net income summary Subtract li	ne 10 from line 3, columi	n (d)		123,516
Par	t II	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	art IV, line 19, or repo	rted more than
veinue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue				
96 8	2	Cash prizes				
sesued	3	Non-cash prizes				
ញ ស្គ	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteerlabor	│ Yes	│ Yes	│	
	7	Direct expense summary Add line	s 2 through 5 in column (	(d)		
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)		
9 a b	Ist	ter the state(s) in which the organiz the organization licensed to conduc No," explain	t gaming activities in eac	th of these states?		
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspe	nded or terminated during	; the tax year?	

Sche	edule G (Form 990 or 990-EZ) 2014				Page <b>3</b>				
11	Does the organization conduct gaming	activities with nonn	members?	T <sub>Yes</sub> [					
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity						
	formed to administer charitable gaming	J <sup>2</sup>		Г <sub>Yes</sub> Г	— No				
13	Indicate the percentage of gaming acti		1 1	,					
а	The organization's facility		13a		%				
b	An outside facility				%				
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records						
	Name <b>▶</b>								
	Address ►								
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming						
154				┌ Yes 「	– <sub>No</sub>				
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	•	the organization <b>&gt;</b> \$ and the						
C	If "Yes," enter name and address of the	e third party							
	Name 🟲								
	Address 🏲								
16	Gaming manager information								
	Name 🟲								
	Gaming manager compensation 🕨 \$		······						
	Description of services provided								
	Director/officer	<del>_</del> Employee	☐ Independent contractor						
17	Mandatory distributions								
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to								
	retain the state gaming license?								
b	Enter the amount of distributions requi	red under state law	distributed to other exempt organizations or spent						
	ın the organization's own exempt activi		·						
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr						
	Return Reference		Explanation						

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493134038656 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number Holland Christian Education Society 38-1416520 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other)

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

Enter total number of other organizations listed in the line 1 table . . . . . . . . . . . . . . . .

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Student scholarships and financial assistance	1171	937,511		N/A	
(2) Student scholarships for higher education	19	15,290		N/A	

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.						
Return Reference	Explanation					
•	Scholarships and financial assistance are provided to students who meet board approved criteria. The scholarships are provided directly to the students account and no cash changes hands					

DLN: 93493134038656

**Employer identification number** 

OMB No 1545-0047

Open to Public Inspection

#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Transactions with Interested Persons**

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

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

Holland Christian Education Society 38-1416520 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 (a) Name of disqualified person (b) Relationship between disqualified (c) Description of transaction (d) Corrected? person and organization Yes No 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 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 (b) Relationship (f)Balance (a) Name of (c) (d) Loan to (e)Original (g) In (h) (i)Written interested with organization Purpose of or from the principal due default? Approved agreement? organization? by board or person loan amount committee? Τо From Yes Yes No No Yes No Total Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (c) A mount of assistance (a) Name of interested (b) Relationship between (d) Type of assistance (e) Purpose of assistance interested person and the person organization (1)1,182 Tuition assistance Discounted tuition

Part IV Business Transactions In Complete if the organization			ne 28a. 28b. or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	zation's
				Yes	No

Part V	Supplemental Inform	rmation					
	Provide additional information for responses to questions on Schedule L (see instructions)						
	Return Reference	Explanation					

Schedule L (Form 990 or 990-EZ) 2014

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DLN: 93493134038656

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

**SCHEDULE M** 

(Form 990)

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

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

**Noncash Contributions** 

Open to Public <u>Inspection</u> Employer identification number

lolla	nd Christian Education Society				38-1	416520			
Pa	rt I Types of Property				<u> </u>	110320			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c)  Noncash contribution amounts reported on Form 990, Part VIII, line	n	<b>(d</b> ) Method of de Ioncash contrib	etermi	_	ts
1	Art—Works of art								
2	Art—Historical treasures .								
3	Art—Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
	Securities—Publicly traded .	Х	3	56,209	Fair	market value			
	Securities—Closely held stock .	X	1	2,136,137	Fair	market value			
11	Securities—Partnership, LLC, or trust interests								
12	Securities—Miscellaneous								
13	Qualified conservation contribution—Historic structures								
14	Qualified conservation contribution—Other								
15	Real estate—Residential .								
16	Real estate—Commercial								
17	Real estate—O ther								
18	Collectibles								
19	Food inventory	Х	1	39,757	Fair	market value			
20	Drugs and medical supplies .								
21	Taxıdermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	O ther ► ()								
	O ther ►()								
27	O ther ►()								
28	O ther ► ()				<u> </u>				
29	Number of Forms 8283 received for which the organization comple				29				
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1 thr	ough 28, that		Yes	No
	it must hold for at least three ye for exempt purposes for the enti	ars from the	e date of the initial contribu				30a		No
Ŀ	If "Yes," describe the arrangem								
31	Does the organization have a gi			review of any non-standard	contr	ibutions?	31	Yes	
32a	Does the organization hire or us	e third parti	ies or related organizations	to solicit, process, or sell	nonca	ash 	22-		NI -
р.					•		32a		No
	If "Yes," describe in Part II If the organization did not report	t an amount	: in column (c) for a type of	property for which column (	a)ıs (	checked,			

describe in Part II

	hether the organization is reporting in Part I, column (b), the number of contributions, the ceived, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
Part I Column (h)	The number of contributors represents the number of contributions received

Schedule M (Form 990) (2014)

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DLN: 93493134038656

OMB No 1545-0047

2014

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### Supplemental Information to Form 990 or 990-EZ

Department of the Treasury
Internal Revenue Service

**SCHEDULE 0** 

(Form 990 or 990-EZ)

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization Holland Christian Education Society	Employer identification number
,	38-1416520

#### 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section A, line 6	
Form 990, Part VI, Section A, line 7a	See explanation for question 6 above
Form 990, Part VI, Section A, line 7b	See explanation for question 6 above
Form 990, Part VI, Section B, line 11	The Form 990 is prepared and reviewed by an independent Certified Public Accounting Firm The return is also reviewed in detail by selected management team members and the audit committee. The Form 990 is then provided to the entire governing board prior to filing with the IRS.
Form 990, Part VI, Section B, line 12c	Officers and Board Members sign annual conflict of interest statements. The signed statements are reviewed by the Executive Committee. Should any potential conflicts of interest be disclosed, the Board Member or officer would be asked to refrain from participation in an y decision with regard to matters affected by the relationship
Form 990, Part VI, Section B, line 15	Independent board members annually approve compensation for officers. Budgets are also approved by members of the organization. HCES's governing board uses the Christian Schools International salary guidelines and also reviews comparable data. These comparison studies a recompleted prior to determining compensation. This information is documented in the corporate minutes.
Form 990, Part VI, Section C, line 19	The governing documents, conflict of interest policy and financial statements are made available to the general public upon request
Form 990, Part XII, Line 2c	The organization's Board assumes responsibility for oversight of the audit of its financia I statements and selection of its independent accountant. This process has not changed sin ce the prior year.

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DLN: 93493134038656

2014

OMB No 1545-0047

Open to Public Inspection

**SCHEDULE R** (Form 990)

Name of the organization

Holland Christian Education Society

**Related Organizations and Unrelated Partnerships** ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

**Employer identification number** 38-1416520

Part I Identification of Disregarded Entities Complete	f the organization a	answered "Yes" on	Form 990, Pa	ırt IV, lıne 33.	
(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	( <b>d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
					_

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	(g) Section 51 (13) conti entity	
						Yes	No
956 Ottawa Avenue	Supporting Organization to Holland Christian Education Society, Inc	MI	501(c)(3)	· '	Holland Christian Education Society		No

Yes No

Yes

No

(a) Name, address, and EIN of related organization  (b) Primary activity I Legal domicile (state or foreign country)  (state or foreign countr	Part III	Identification of Related Organizations Taxable a because it had one or more related organizations treated.					atıon ansv	vered "Ye:	s" on Form	990, Part I	V, line 34	4
		Name, address, and EIN of	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income(related, unrelated, excluded from tax under sections 512-		Share of end-of-year	Disproprtionate allocations?	Code V-UBI amount in box 20 of Schedule K-1	managing	<b>(k)</b> Percentage ownership

Part IV	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV,
	line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes No	

Schedule F	R (Form 990) 2014					Ρa	age <b>3</b>
Part V	Transactions With Related Organizations Complete if the organization answered "Yes" or	n Form	990, Part IV, line	e 34, 35b, or 36.			
Note	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
<b>1</b> During	the tax year, did the organization engage in any of the following transactions with one or more related organization	tions lis	sted in Parts II-IV?				
<b>a</b> Rec	eipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No
<b>b</b> Gift,	, grant, or capital contribution to related organization(s)				1b		No
<b>c</b> Gıft,	grant, or capital contribution from related organization(s)				<b>1</b> c	Yes	
<b>d</b> Loar	ns or loan guarantees to or for related organization(s)				1d		No
<b>e</b> Loar	ns or loan guarantees by related organization(s)				1e		No
<b>f</b> Divi	dends from related organization(s)				1f		No
<b>g</b> Sale	e of assets to related organization(s)				<b>1</b> g		No
<b>h</b> Puro	chase of assets from related organization(s)				1h		No
i Exch	nange of assets with related organization(s)				1i		No
<b>j</b> Leas	se of facilities, equipment, or other assets to related organization(s)				1j		No
<b>k</b> Leas	se of facilities, equipment, or other assets from related organization(s)				1k		No
l Perfo	ormance of services or membership or fundraising solicitations for related organization(s)				11		No
<b>m</b> Perfo	ormance of services or membership or fundraising solicitations by related organization(s)				1m		No
<b>n</b> Shar	ring of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
<b>o</b> Sha	ring of paid employees with related organization(s)				10	Yes	
<b>p</b> Rein	mbursement paid to related organization(s) for expenses				1р		No
<b>q</b> Rein	mbursement paid by related organization(s) for expenses				1q	Yes	
r Othe	er transfer of cash or property to related organization(s)				1r		No
<b>s</b> Othe	er transfer of cash or property from related organization(s)				<b>1</b> s		No
<b>2</b> If the	e answer to any of the above is "Yes," see the instructions for information on who must complete this line, inclu	ding co	vered relationships	and transaction threshold	ds		
	(a) (b)  Name of related organization Transaction type (a-s)		(c) Amount involved	(d) Method of determining	amount	ınvolve	d

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Holland Christian Education Foundation Inc	С		
(2) Holland Christian Education Foundation Inc	N		
(3) Holland Christian Education Foundation Inc	0		
(4) Holland Christian Education Foundation Inc	Q	,	

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

1 <u> </u>													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	so 50 organ	(e) Are all partners section 501(c)(3) organizations?  (f) Share of total income		(g) Share of end-of-year assets	Share of Disproprtionat end-of-year allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No	<u> </u>	Yes	No	
									$\Box$	1			

Schedule R (Form 990) 2014

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2014

Page **5**