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Form **990**°

Form 230

Department of the Treasury

Extended to February 15, 2017

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990 and its instructions is at www.lrs.gov/form990.

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Open to Public Inspection

Internal Revenue Service A For the 2015 calendar year, or tax year beginning JUL 1, 2015 and ending JUN 30, 2016 D Employer identification number C Name of organization Address change King's Ridge Christian School Name change 58-2600863 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 770-754-5738 2765 Bethany Bend termin-ated 17,880,448. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended Alpharetta, GA 30004 H(a) Is this a group return Applica F Name and address of principal officer: C. David Rhodes, for subordinates? Yes X No pending same as C above H(b) Are all subordinates included? Yes L I Tax-exempt status: ■ 501(c)(3) = 501(c) () ◀ (insert no.) _ 4947(a)(1) or l 527 If "No," attach a list. (see instructions) J Website: ▶ www.kingsridgecs.org H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 2001 M State of legal domicile: GA Part I Summary Briefly describe the organization's mission or most significant activities: Provides a college prepatory Apenses & UVIN CREVENCED Activities & Governance education to children from kindergarten_through_12th_grade. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 15 14 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2015 (Part V, line 2a) 226 5 450 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year** Current Year 391,238. 2,254,793. Contributions and grants (Part VIII, line 1h) 13,604,061. <u> 15,584,635.</u> Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)
Other revenue (Part VIII, column (A), lines 5, 6d, 8o, 9c, 10c, and 2,071 2,039. 0. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A 13,997,370 17,8<u>41,467.</u> line 12) Grants and similar amounts paid (Part X column) lines 2037.

Benefits paid to or for members (Part X column (A), line 4) 456,128 629,273. 0. 8,419,226. 9,466,811. Salaries, other compensation, employee benefits (Part-IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 0. 0. 365,985. b Total fundraising expenses (Part IX, column (D), line 25) 6,614,244. 6,268,351 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 16,710,328. 15,143,705 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) <1,146,335. 1,131,139. Revenue less expenses. Subtract line 18 from line 12 Assets or | Balances **Beginning of Current Year End of Year** 41,084,672 <u>41,701,957.</u> 20 Total assets (Part X, line 16) 23,684,068. 24,982,324 21 Total liabilities (Part X, line 26) Net / Net assets or fund balances Subtract line 21 from line 20 16,102,348. 18,017,889. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 1/19/17 Data Signature of officer Sign David Rhodes, III, Headmaster Here Type or print name and title Date Print/Type preparer's name Paid P00744874 Laura H. Heller sett-employed 58-1763570 Firm's name _ Jones and Kolb Preparer Firm's EIN Firm's address 3475 Piedmont Road, Use Only Phone no. (404)262-7920 Atlanta

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Form 990 (2015)

X Yes

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

orm	990 (2015) King's Ridge Christian School 50-2000863 Page 2
Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	King's Ridge Christian School is a Christian community providing a
	college preparatory education equipping students to know, to serve,
	and to believe.
2	Did the organization undertake any significant program services during the year which were not listed on
_	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 14,890,547. including grants of \$ 629,273.) (Revenue \$ 15,188,898.)
	King's Ridge Christian School ("KRCS") is an independent college
	preparatory day school with 855 PreK - 12th grade students for the
	2016-2017 school year. Operating as a multi-denominational Christian
	school KRCS offers a rigorous curriculum with faith-integration infused
	in all areas - whether it be in the classroom, on the stage or the
	court or field.
	While King's Ridge Christian School is located in one of the fastest
	growing cities in America with nationally recognized public school
	options, a major point of difference is the manner in which the student
	experience is approached. The School's philosophy statement speaks to
	the organization's belief in the value of "a place where children are
4b	(Code) (Expenses \$ 267,042. including grants of \$) (Revenue \$ 395,737.)
	CO-CURRICULAR OPPORTUNITIES
	The King's Ridge Christian School co-curricular environment is a
	natural extension of the classroom. Students gain skills through
	relevant and engaging activities.
	GEORGIA HIGH SCHOOL ASSOCIATION - King's Ridge is a member of Georgia
	High School Association, participating in an array of sports and
	activities such as literary and one act play competition with the goal
	of reaching state level competition while honoring God by using the
	talents He provides.
	carenes ne provides.
	ATHLETICS - Athletic participation includes varsity level programs
40	
4c	(Code) (Expenses \$) (Revenue \$)
	
	
	
	
	
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 15,157,589.
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-o <u>r</u> m	990 (2015) King's Ridge Christian School 58-2600	<u>863</u>	Р	age 3
Par	t 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		1	Į
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect)
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or]	
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_5_	<u> </u>	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		Í	
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	L	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for		,	
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	L _	X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent]	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	_		
	as applicable.		ļ	
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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	_X_	L
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X_
þ	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			ł
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			ļ
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to]
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16_		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			1
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_X

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Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines

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

1c and 8a? If "Yes," complete Schedule G, Part II

			res	NO
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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		X
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	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			1
_	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	[1
	Schedule J	23	X	Í
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	_X_	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
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		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	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		X
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		X
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		X
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		X
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			ĺ
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?] }		
	If "Yes," complete Schedule N, Part I	31		X
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		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	}		
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	1 1		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1 1		
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1 1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37_		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	_	3,	
	Note. All Form 990 filers are required to complete Schedule O	38	<u>X</u>	(0015)
		Form	ササ リ (ZU15)

Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V				
				Yes	No
1a	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	30			
b	and the second s	0	,		1
c	But the first the first war and a first and a compared to you down and congress to	e gamıng			1
	(gambling) winnings to prize winners?	L	1c		<u> </u>
2a	Ea Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		1		1
	filed for the calendar year ending with or within the year covered by this return	226	ł		Ì
b	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b_	_X_	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	L	За	l	X
b	b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		3b_		
	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority	y over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account		4a	L	X
b	b If "Yes," enter the name of the foreign country: ▶				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	(FBAR).	ŀ	•	l
5a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	1	X
b			5b		X
c	15714 77 1 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organ	ization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a	(X
b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or	gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services pro	vided to the payor?	7a	X	L_
b	b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	<u></u>
С	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was requi	red			
	to file Form 8282?		7c		X
d	d If "Yes," indicate the number of Forms 8282 filed during the year				
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	,	7e		X
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 889	9 as required?	7g		
h	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				1
	sponsoring organization have excess business holdings at any time during the year?	Ĺ	8		
9	Sponsoring organizations maintaining donor advised funds.	İ	- 1		İ
а	a Did the sponsoring organization make any taxable distributions under section 4966?	., [9a		<u> </u>
þ	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	[_	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:	1	- 1		1
а	a Initiation fees and capital contributions included on Part VIII, line 12				
b	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	a Gross income from members or shareholders				
b	b Gross income from other sources (Do not net amounts due or paid to other sources against				ļ
	amounts due or received from them.)				
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	<u> </u> _	12a	<u> </u>	ļ
b	b If "Yes," enter the amount of tax-exempt interest received or accrued during the year				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>			
а	a Is the organization licensed to issue qualified health plans in more than one state?	.	13a	 	
	Note. See the instructions for additional information the organization must report on Schedule O.				1
b	b Enter the amount of reserves the organization is required to maintain by the states in which the			, ,	1
	organization is licensed to issue qualified health plans				1
	c Enter the amount of reserves on hand			 	
14a	a Did the organization receive any payments for indoor tanning services during the tax year?		14a	 	X
	t - 14 HV/ H G 4 40-4 - Color- 700 to be a selection by the color 4 to 10 to 1			, ,	

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Form 990 (2015) King's Ridge Christian School 58-2600863 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI						LX
<u>Sec</u>	tion A. Governing Body and Management						
		1 1	_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		.5			
	If there are material differences in voting rights among members of the governing body, or if the governing				1	Í	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1 1		ł			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	1	4		1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	np with	any other	- }	-]	
	officer, director, trustee, or key employee?			2			_X_
3	Did the organization delegate control over management duties customarily performed by or under t	he direc	t supervision		-	l	
	of officers, directors, or trustees, or key employees to a management company or other person?		•	<u> </u>	4		X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	s filed?	4	1		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets?		_ 5	\perp	1	_X
6	Did the organization have members or stockholders?			6	\perp		<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or	- [ļ	,	
	more members of the governing body?			78	<u>. </u>		<u>X</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockho	olders, or	-	1		
	persons other than the governing body?			7t			_X_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by th	e following:	-		ł	
а	The governing body?			88	,	X	
b	Each committee with authority to act on behalf of the governing body?			81	<u>, </u>	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached a	it the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9			X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenue	Code.)				
						Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10	a L		<u>_X</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapters	s, affiliates,			ŀ	
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy befo	e filing the form?	11	<u>a</u>	X	
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			12		X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cont	licts?	12	b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If " $$	Yes," de	scnbe	1	-	}	
	ın Schedule O how this was done .			12	<u>c </u>	Х	
13	Did the organization have a written whistleblower policy?			_13	<u> </u>	X	
14	Did the organization have a written document retention and destruction policy?			_14	<u>. </u>	X	
15	Did the process for determining compensation of the following persons include a review and approve	al by in	dependent			Í	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?				1	
	The organization's CEO, Executive Director, or top management official			15	a	X	
b	Other officers or key employees of the organization			15	b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)]]	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment w	ıth a		j	1	
	taxable entity during the year?			16	a		<u>X</u> _
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				-	ĺ	
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of the control of	anizatıor	ı's			1	
	exempt status with respect to such arrangements?			16	<u> </u>		
	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed GA		204/1/2		. .		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	ı (Secti	on 501(c)(3)s only) avail	able)	
	for public inspection. Indicate how you made these available. Check all that apply.						
40	Own website Another's website X Upon request Other (explain		•				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	ontlict of	interest policy, a	nd fina	ancı	al	
••	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 be	ooks an	a records. 🕨		_		
	Mr. Guy Price - 770-754-5738				_		
	2765 Bethany Bend, Alpharetta, GA 30004					_	_

532006 12-16-15

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)			_ (0	C)			(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box, unless pe		untess person is both an er and a director/trustee)			h an	compensation	compensation	amount of
	week		Ceran	lo a o	irecto	or/trus	100)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	9 9	<u>8</u>	,	,	sated		organization	(W-2/1099-MISC)	from the
	related organizations	uste	Ens		8	ig i	ļ	(W-2/1099-MISC)		organization and related
	below	Ea t	tona		e e	5 a				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Ì		organizations
(1) Leslie M. Kurtz	4.00	-	=		-		=			
Chair		X		X	l	l	ŀ	0.	0.	0.
(2) Richard Penkoski	4.00									
Vice Chair		X		X		L		0.	0.	0.
(3) C. David Rhodes, III	64.00	ļ								
Headmaster	ļ	X		X		_	<u> </u>	283,289.	0.	<u> 26,578.</u>
(4) Jean-Michel Ares	4.00		١.		ļ					
Trustee		X	<u> </u>			ļ	ļ	0.	0.	0.
(5) Julie Arnold	4.00	1							_	
Trustee	 	X			<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(6) Dr. Daniel Garabadian	4.00				İ	ĺ			_	_
Trustee		X	_		_		ļ.,	0.	0.	0.
(7) Pastor Thomas Hammond	4.00	ļ			1				_	_
Trustee	 	X	_			ļ	<u> </u>	0.	0.	0.
(8) Bill Evans, Jr.	4.00	ļ			ļ				_	_
Trustee	 	X					ļ	0.	0.	0.
(9) Tim Kittredge	4.00			, 		ŀ		_	_	_
Trustee	 	X	_		_	ļ_	<u> </u>	0.	0.	0.
(10) Jeffrey B. Lamkin	4.00	4			İ	1		_	_	_
Trustee		X	L.				-	0.	0.	0.
(11) Douglas T. Lay	4.00		,		l	l				
Trustee	<u> </u>	X				<u> </u>	<u> </u>	0.	0.	0.
(12) Virginia Martin	4.00	ļ					•	_		
Trustee	 	X				<u> </u>	<u> </u>	0.	0.	0.
(13) Amy Major McGruder	4.00	1						_	_	
Trustee		X	\square		Ĺ	_	<u> </u>	0.	0.	0.
(14) Alvin "Al" Nash	4.00				ĺ		[
Trustee	ļ	X	_			<u> </u>	_	0.	0.	0.
(15) Abel De La Rosa	4.00				1		ļ			
Trustee	1	X	_				ļ	0.	0.	<u> </u>
(16) Guy Price	60.00	1	}				ļ		_	
CFO	+ ====			X	L	├_	 	144,140.	0.	5,466.
(17) Lowrie McCown	60.00	}		٠,		}		120 270		0.017
Associate Headmaster		L	لـــا	X				139,372.	0.	9,817.

532007 12-16-15

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	1 Hig	ghes	st C	ompensated Employee	es (continued)			
(A)	(B)		(C)					(D) (E)		}	(F)	
Name and title	Average	(4-		Posi				Reportable Reportable compensation		Es	tımate	d
	hours per	box	not c unle:	ss per	son 1	s botl	nan ∣			an	nount o	of
	week	├─	er an	dad	recto	r/trus	tee)	from	from related		other	
	(list any	ecto						the	organizations		pensat	
	hours for	등	9			ated		organization	(W-2/1099-MISC)	1	om the	
	related	stee	truste			bens		(W-2/1099-MISC)		, -	anızatı	
	organizations below	E E	onai		ploye	rcom ee		}		i	d relate anızatıc	
	line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	F ormer			Orga	a) IIZQLIÇ	/115
(10) 77	60.00	트	트	-5	3	포함	- 2	 				
(18) Hunter Chadwick	00.00	1				x		116,141.	0.	1	4,4	3.6
High School Principal		├-		-		Δ	-	110,141.			<u> </u>	<u> </u>
		1						ĺ		1		
	ļ	<u> </u>		_								
										1		
										<u> </u>		
		4						ĺ		Ì		
	ļ	-	\vdash	-	-		—			 -		
		1				i						
										<u> </u>		
										ł		
	<u> </u>		-	_{								
	ļ])		
1b Sub-total	l		لــــا			لـــــا		682,942.	0.	4	6,29	97
c Total from continuation sheets to Part V	I Section A					,		0.	0.		<u>, 21</u> .	0.
d Total (add lines 1b and 1c)	i, Section A					,		682,942.	0.	4	6,29	
Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove) wh	o re			=	<u> </u>	
compensation from the organization						,		• • • • • • • • • • • • • • • • • • • •	,			4
											Yes	No
3 Did the organization list any former officer,	director, or tru	ustee	e, ke	y en	olar	yee.	or h	nighest compensated er	mployee on			
line 1a? If "Yes," complete Schedule J for s					,				, ,	3		X
4 For any individual listed on line 1a, is the si		le co	moe	ensa	tion	anc	loth	ner compensation from t	the organization			
and related organizations greater than \$15	•								- 5	4	x	
5 Did any person listed on line 1a receive or a									dual for services			
rendered to the organization? If "Yes, " com	plete Schedul	e J f	or su	ich į	oers	on				5		Х

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) Name and business address	(B) Description of services	(C) Compensation
Sage Dining Services, Inc., 1402 York		
Road, Suite 100, Lutherville, MD 21093	Food Service	<u>795,722.</u>
Shaw Sports Turf, 185 South Industrial	1	
Blvd, Calhoun, GA 30701	Turf Services	342,054.
Maintenance Services of Georgia, Inc.		
661 Liberty Hill Road, Canton, GA 30115	Maintenance Services	263,270.
Go2Guy Building Services, Inc.	1	
14910 Hopewell Road, Alpharetta, GA 30004	Cleaning Services	252,187.
Pro Sports, 3130 Florence Road, Powder		
Springs, GA 30127	Athletic Services	148,110.
2 Total number of independent contractors (including but not limited to those list		
\$100,000 of compensation from the organization 6		

L		`-	Check if Schedule O cont	ains a response	or note to any lini	e in this Part VIII			
			Officer if Octiledate O cont	ano a response	St note to any min	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
इ इ	1	 а	Federated campaigns	1a					
ra z	'		Membership dues	1b					
Ω,Ĕ			Fundraising events	1c	25,933.	-			
ar A			Related organizations	10					
S,E]		Government grants (contribut						
200		f	All other contributions, gifts, gran			ļ			j
돌		•	similar amounts not included abo		2 228 860	j			
ĒΦ		g	Noncash contributions included in lines		2,220,000,				
Contributions, Gifts, Grants and Other Similar Amounts	}	-	Total. Add lines 1a-1f			2,254,793			
		<u></u>			Business Code				
ĕ	2	а	Tuition and fees		611710	14,809,041,	14,809,041.		
ĕ,			Athletic income		611710	328,622,	328,622,		
SE	ł		Parent Club income	·	611710	205,276.	205,276.		
Program Service Revenue			After_school care	- 	611710	76,868.	76.868.		
			Fine arts income		611710	67,115.	67,115.		
ď		f	All other program service reve	nue	900099	97,713.	97,713,		
		g	Total. Add lines 2a-2f		•	15 584 635			
	3		Investment income (including	dıvıdends, inter	est, and				
			other similar amounts)		▶ [2,039,			2,039,
	4		Income from investment of tax	k-exempt bond ;	oroceeds 🕨				
	5		Royalties		•				
				(i) Real	(II) Personal				1
	6	a	Gross rents	<u> </u>			}		1
			Less: rental expenses	<u> </u>					
	1		Rental income or (loss)	Ĺ	<u> </u>				
	i		Net rental income or (loss)	r 	, _				
	7	a	Gross amount from sales of	(i) Securities	(ii) Other		ĺ		
			assets other than inventory	<u> </u>	[
		b	Less: cost or other basis	ļ]]		ļ		j
			and sales expenses	ļ					
		¢	Gain or (loss)	L					
		d	Net gain or (loss)						
ne	8	а	Gross income from fundraising	- ·	}				1
Other Reven				<u>,933</u> of	1				1
Re			contributions reported on line	•	1	}			<u>}</u> :
Je			Part IV, line 18	a	38,981.				
ŏ			Less: direct expenses	b	38,981.	_ 1			1
			Net income or (loss) from fund	-		0.			
	9	а	Gross income from gaming ac						1
		_	Part IV, line 19 Less: direct expenses	a					
			Net income or (loss) from gam	b	<u></u>				-
			Gross sales of inventory, less	-	<u> </u>				+
	10	a	and allowances))	,			1
		h	Less. cost of goods sold	a b					
1			Net income or (loss) from sales	_					•
Ì		<u> </u>	Miscellaneous Revenue		Business Code				
1	11 :	 а			20233 3046	1			}
l		b			 				
Ì		C							
ĺ			All other revenue						
1		е	Total. Add lines 11a-11d						
[12		Total revenue. See instructions.			17.841.467.	15 584 635.	0	2.039.
			 						Fa 000 (0045)

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

	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	629,273.	629,273.		
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	616,867.		339,769.	277,098
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	7,065,209.	6,560,721.	468,567.	35,921.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	138,547.	132,732.	5,815.	
9	Other employee benefits	1,091,831.	961,964.	128,929.	938.
10	Payroll taxes	554,357.		60,025.	21,567.
11	Fees for services (non-employees):				
а	Management				
b	Legal	13,710.	12,202.	1,371.	137.
С	Accounting _ [39,600.		39,600.	
d	Lobbying .				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	109,715.		21,494.	409.
12	Advertising and promotion	21,068.		20,647.	
13	Office expenses	167,407.	131,707.	24,085.	11,615.
14	Information technology	229,333.	227,040.	2,293.	
15	Royalties				
16	Occupancy	1,097,971.	1,087,521.	10,450.	-
17	Travel .	7,011.	3,081.	1,938.	1,992.
18	Payments of travel or entertainment expenses		j		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	752,721.	745,194.	7,527.	
21	Payments to affiliates	1 500 606	1 743 000	17 606	
22	Depreciation, depletion, and amortization	1,760,606.	1,743,000.	17,606.	1 400
23	Other expanses Itemize expanses and assured	140,893.	125,395.	14,089.	1,409.
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	Dining services	752,908.	745,418.	7,490.	
b	Athletics	493,596.	493,596.		
С	Letter of Credit Fees a	335,531.	332,176.	3,355.	
d	Parent Club	176,751.	176,751.		
е	All other expenses	515,423.	488,820.	11,704.	14,899.
25	Total functional expenses. Add lines 1 through 24e	16,710,328.	15,157,589.	1,186,754.	365,985.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined		·		
	educational campaign and fundraising solicitation.	į	ł		
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2015)

532010 12-18-15

Form 990 (2015)

Part X | Balance Sheet

Part :	X.	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	505,956.	1	773,781.
- 1	2	Savings and temporary cash investments	2,639,505.	2	3,005,934.
i	3	Pledges and grants receivable, net	142,027.	3	1,067,462.
- 1	4	Accounts receivable, net	215,989.	4	94,814.
-	5	Loans and other receivables from current and former officers, directors,			
1		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
2		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
₹ ;	8	Inventories for sale or use		8	
- ,	9	Prepaid expenses and deferred charges	262,258.	9	196,908.
11	0a	Land, buildings, and equipment cost or other			
1		basis. Complete Part VI of Schedule D 10a 50,843,925			
	b	Less accumulated depreciation 10b 15,024,107	36,556,137.	10c	35,819,818.
_ [1·	1	Investments · publicly traded securities		11	′ — _
12	2	Investments - other securities See Part IV, line 11		12	·
10	3	investments - program-related. See Part IV, line 11		13	
14	4	Intangible assets		14	
15	5	Other assets See Part IV, line 11	762,800.	15	743,240.
	6	Total assets. Add lines 1 through 15 (must equal line 34)	41,084,672.	16	<u>41,701,957</u> .
17	7	Accounts payable and accrued expenses	833,907.	17	949,807.
18	8	Grants payable		18	
19	9	Deferred revenue .	7,967,094.	19	<u>8,138,590</u> .
20		Tax-exempt bond liabilities	15,360,000.	20	14,575,000.
2		Escrow or custodial account liability. Complete Part IV of Schedule D		21	
န္မ 2	2	Loans and other payables to current and former officers, directors, trustees,	}		
Liabilities (2)		key employees, highest compensated employees, and disqualified persons		- {	
<u> </u>		Complete Part II of Schedule L		22	
23		Secured mortgages and notes payable to unrelated third parties		23	
24		Unsecured notes and loans payable to unrelated third parties		24	
25	5	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of	001 202		20 671
	_	Schedule D	821,323.		20,671.
20	<u>6</u>	Total liabilities. Add lines 17 through 25	24,982,324.	26	23,684,068.
.		Organizations that follow SFAS 117 (ASC 958), check here ► X and	}		
Net Assets of Fund balances 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	,	complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	15 275 410		16 240 005
27			15,375,410. 726,938.		16,249,005. 1,768,884.
		Temporarily restricted net assets Permanently restricted net assets	120,330.	28	1,700,004.
2	J	Organizations that do not follow SFAS 117 (ASC 958), check here		29	
ב		and complete lines 30 through 34.			
2 2	^	Capital stock or trust principal, or current funds		20	
30		Paid in or capital surplus, or land, building, or equipment fund		30	
32		Retained earnings, endowment, accumulated income, or other funds		31	
33		Total net assets or fund balances	16,102,348.	33	18 017 000
34		Total liabilities and net assets/fund balances	41,084,672.	34	18,017,889. 41,701,957.
	-	Total napinties and het assets/fully balaffees.	1 21,004,014.	54	Form 990 (2015)

F <u>or</u> n	n 990 (2015) King's Ridge Christian School	<u> 58-26</u>	<u> 500863</u>	<u>Pa</u>	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	<u>17,84</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,71		
3	Revenue less expenses Subtract line 2 from line 1	3	1,13		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	16,10	<u>2,3</u>	<u>48.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	78	4,4	03.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,]]			
	column (B))	10	18,01	7,8	90.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				ᆜ
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other		-		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	∌ O.	} }		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both.		Ì		
	Separate basis Consolidated basis Both consolidated and separate basis				;
b	Were the organization's financial statements audited by an independent accountant?		2b	_X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,) }		,
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audīt,			1
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	iedule O.			١,
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Audit			1
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ured audit			1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3h		1

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

King's Ridge Christian School

Employer identification number

				<u>hristian Sch</u>				8-2600863
Pai	rt I	Reason for Public	Charity Status (All organizations must c	omplete th	us part.) Se	e instructions.	
he c	organi	zation is not a private found	lation because it is:	(For lines 1 through 11, o	check only	one box.)		
1	٦	A church, convention of ch					I)(A)(i).	
2	$\overline{\mathbf{x}}$	A school described in sect	•				W 707	
3		A hospital or a cooperative					i\	
1	片	A medical research organiz					•	the hospital's name
4	الــــا		alion operated in co	принской мки а поэрка	i describe	u III Secuo	ii iro(b)(i)(A)(iii). Linei	the hospital s hamo,
1		city, and state.						
5		An organization operated for		ollege or university owner	d or opera	ted by a go	overnmental unit descrit	ea m
		section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6		A federal, state, or local go	vernment or governr	mental unit described in	section 1	70(b)(1)(A)	(v).	
7		An organization that norma	lly receives a substa	intial part of its support	from a gov	ernmental	unit or from the general	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)					
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)			
9		An organization that norma	lly receives: (1) more	than 33 1/3% of its sup	port from	contribution	ons, membership fees, a	nd gross receipts from
		activities related to its exen	npt functions - subje	ct to certain exceptions,	and (2) no	more tha	n 33 1/3% of its support	from gross investment
		income and unrelated busin	•	•				-
		See section 509(a)(2). (Cor		,		,	, ,	·
10		An organization organized a		ively to test for public sa	afety See	section 50)9(a)(4)	
11		An organization organized a	•	-	•			purposes of one or
• • •		more publicly supported or	•	•	•			
		lines 11a through 11d that	-					THEOR WIE DON III
_		1	• •			•	-	anuna
а	<u></u>	Type I. A supporting orga		•	-	-		
		the supported organization		• • • •	a majority	or the alrec	ctors or trustees of the s	upporting
		organization. You must o	•					
b	L	Type II. A supporting org	•					-
		control or management o	f the supporting org	anization vested in the s	same perso	ons that co	entrol or manage the sup	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.				
С	L	Type III functionally inte	grated. A supportin	g organization operated	in connec	tion with, a	and functionally integrate	ed with,
		its supported organization	n(s) (see instructions	s). You must complete	Part IV, Se	ections A,	D, and E.	
d	L	Type III non-functionally	integrated. A supp	orting organization oper	rated in co	nnection v	vith its supported organi	zation(s)
		that is not functionally int	egrated. The organiz	zation generally must sa	tisfy a dist	ribution red	quirement and an attent	iveness
		requirement (see instruct	ions). You must cor	nplete Part IV, Sections	s A and D,	, and Part	٧.	
е		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or	Type III non-functio	nally integrated support	ing organi:	zation.		
f	Ente	r the number of supported o						
a		ide the following information	-	ed organization(s)				
		Name of supported	(ii) EIN	(iii) Type of organization		rganization	(v) Amount of monetary	(vi) Amount of
		organization		(described on lines 1-9	governing	in your document?	support (see	other support (see
				above (see instructions))	Yes	No	instructions)	instructions)
		·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·						
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LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 532021 09-23-15

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 King's Ridge Christian School 58-2600863 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (f) Total (e) 2015 (d) 2014 (c) 2013 (b) 2012(a) 2011 Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support (f) Total (e) 2015 (a) 2011 (b) 2012 (c) 2013(d) 2014 Calendar year (or fiscal year beginning in) 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) % 15 15 Public support percentage from 2014 Schedule A, Part II, line 14 16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

Schedule A (Form 990 or 990-EZ) 2015

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2015 King's Ridge Christian School
Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support					,	,
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and			1			
	membership fees received. (Do not	İ	}	}			1
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that	•	}		ļ	1]
	are not an unrelated trade or bus-						l l
	iness under section 513		<u> </u>				
4	Tax revenues levied for the organ-					T	
	ization's benefit and either paid to					1	}
	or expended on its behalf		1	·			<u> </u>
5	The value of services or facilities					T	
	furnished by a governmental unit to	ĺ					
	the organization without charge		1		<u> </u>	1	
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and				1		
	3 received from disqualified persons						ļ
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b				ł		
8	Public support. (Subtract line 7c from line 6)						
Sec	tion B. Total Support				 		
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses	I	[
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12)	<u> </u>		· · · · · · · · · · · · · · · · · · ·			
	First five years. If the Form 990 is for	the organization's	s first, second. thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
	check this box and stop here		,, ((1)	-,			▶□
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2015 (I			column (fl)		15	%
	Public support percentage from 2014	,		,0,0,0,,,,		16	<u>%</u>
	tion D. Computation of Inves				 		
	Investment income percentage for 20			ne 13 column (f))		17	%
	Investment income percentage from 2	•	•	10 10, 00141111 (1))		18	<u> </u>
	33 1/3% support tests - 2015. If the	•	•	on line 14, and line	a 15 is more than		
	more than 33 1/3%, check this box as	-					▶□
h	33 1/3% support tests - 2014. If the	•	•				and
J	line 18 is not more than 33 1/3%, che	-					▶ □
20	Private foundation. If the organization		-			_	
	2 00 00 45	ii did not criber d	20x 011 mig 14, 13	a, or 100, chieck (adula A (Form 00)	OC 57\ 0045

Part IV | Supporting Organizations

(Complete only if you checked a box in line 11 on 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.)

	Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V.)			
Sec	tion A. All Supporting Organizations			,
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			ļ
	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	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 Part VI 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	-	-
ь	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 Part VI when and how the			İ
	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)			
Ŭ	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	1	
4 a	Was any supported organization not organized in the United States ("foreign supported organization")? If	<u> </u>		
	"Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		1
h	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	ł	1	l
	despite being controlled or supervised by or in connection with its supported organizations.	4b]	ļ
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)? If "Yes," explain in Part VI what controls the organization used	\	1	1
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	1		1
	purposes	4c	}	
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"		1	-
	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;			ŀ
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action		1	Ì
	was accomplished (such as by amendment to the organizing document).	5a	ł	ł
ь	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		1
С	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 (i) its supported organizations, (ii) individuals that are part of the charitable class	ŀ		1
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also]		
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in		1	
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			_
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	1	Ì	
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	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 I of Schedule L (Form 990 or 990-EZ).	8	1	
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	1	ł	
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	_9b_	1_	
¢	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit		l	
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section		Ţ	
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	_10a	_	
h	Did the organization have any excess business holdings in the tay year? (Lise Schedule C. Form 4720, to			

determine whether the organization had excess business holdings)

Sche	dule A (Form 990 or 990-EZ) 2015 King's Ridge Christian School 5	<u>8-260086</u>	3 P	<u>age 5</u>
Pa	rt IV Supporting Organizations (continued)			
		Γ	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	ļ]
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?	<u>11a</u>	-	<u> </u>
	A family member of a person described in (a) above?	11b		
	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	L	
Sec	tion B. Type I Supporting Organizations			T
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	l	1	}
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	ļ		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	[ļ	
	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	1.		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1_1_	 	
2	Did the organization operate for the benefit of any supported organization other than the supported	ł	İ)
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	ļ		
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	L	L
Sec	tion C. Type II Supporting Organizations			r
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	}		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	۱ .	}	
500	the supported organization(s). tion D. All Type III Supporting Organizations		L	L
360	tion b. Air type in Supporting Organizations			N _a
4	Did the erganization provide to each of its supported erganizations, by the last day of the fifth month of the	<u> </u>	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, (i) a written notice describing the type and amount of support provided during the prior tax			{
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	į		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	 	 	
~	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		ļ	ļ
	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			
Ū	significant voice in the organization's investment policies and in directing the use of the organization's	ł	l	1
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	ļ	1	
	supported organizations played in this regard.	3		}
Sec	tion 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 yeafsee instru	ctions):	-	
а	The organization satisfied the Activities Test. Complete line 2 below.	•		
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see instructions	<i>).</i>	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	J		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			İ
	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	ĺ		
	that these activities constituted substantially all of its activities	2a	<u> </u>	<u></u>
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			}
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		}	ļ
	reasons for the organization's position that its supported organization(s) would have engaged in these	J]	j
	activities but for the organization's involvement	2b		ļ
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	1		1
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	<u></u>	L
	Octobril A	/F 000 0/		

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970. See instr	ructions. All
other Type III non-functionally integrated supporting organizations must co	mplete Se	ections A through E	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		<u></u>
2 Recoveries of prior-year distributions	2	<u>. </u>	<u> </u>
3 Other gross income (see instructions)	3		<u> </u>
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		<u> </u>
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or	1 1		
maintenance of property held for production of income (see instructions)	6		<u> </u>
7 Other expenses (see instructions)	7		<u> </u>
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)		·	
a Average monthly value of securities	1a		<u> </u>
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		<u> </u>
d Total (add lines 1a, 1b, and 1c)	1d		<u> </u>
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
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,	1 1		
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	ļ.		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		1
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	ly-integrat	ed Type III supporting or	ganization (see

Schedule A (Form 990 or 990-EZ) 2015

Sche Pa i	dule A (Form 990 or 990-EZ) 2015 King's Ridge TV Type III Non-Functionally Integrated 509	Christian Scho		8-2600863 Page 7
	ion D - Distributions	<u> </u>		Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
	Amounts paid to perform activity that directly furthers exem			
•	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	s	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
<u> </u>	Total annual distributions. Add lines 1 through 6			
_ <u>-</u>	Distributions to attentive supported organizations to which t	the organization is responsive		
•	(provide details in Part VI) See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
<u>.v</u> _	and a mount division by a mount	(i)	(ii)	(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015
_1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			,
	(reasonable cause required-see instructions)			·
3	Excess distributions carryover, if any, to 2015:			
a				
b				
c				
d	From 2013			
е	From 2014			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
_ i	Carryover from 2010 not applied (see instructions)			
i	Remainder Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D,			
_	line 7 [.] \$			
a	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
_	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3)			
	and 4c.			
_8	Breakdown of line 7			
a_				
_ b				
c	Excess from 2013			
_ d	Excess from 2014	l		

Schedule A (Form 990 or 990-EZ) 2015

e Excess from 2015

SCHEDULE D

Department of the Treasury

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization

King's Ridge Christian School

Employer identification number 58-2600863

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, Iir	ne 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised for	ınds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used	d only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose conf	ernng
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Part	V, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	education) Preservation of a historica	lly 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 quali	fied conservation contribution in the form of a	conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements .		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str	ucture included in (a)	2c
ď	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the orga	anization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	•	. L Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva	tion easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	fling of violations, and enforcing conservation	easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)	(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the c	organization's accounting for
Г Б	conservation easements	(A) United States	
Pai	t III Organizations Maintaining Collections o	•	r Similar Assets.
_	Complete if the organization answered "Yes" on Form		-
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ext		of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS	**	•
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public s	ervice, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		. • \$
_	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical tre	•	n, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
	Revenue included on Form 990, Part VIII, line 1		\$
	Assets included in Form 990, Part X		\$
LHA	For Paperwork Reduction Act Notice, see the Instructions	s tor Form 990.	Schedule D (Form 990) 2015

532051 11-02-15

Sche	edule D (Form 990) 2015 King's	Ridge Chri	stia	n Scho	001			<u> 58-2</u>	<u> 260086</u> :	3 Page 2
	rt III Organizations Maintaining C					or Othe	er Simil	ar As	sets(contin	ued)
3	Using the organization's acquisition, access	on, and other record	is, chec	k any of the	following that	at are a s	ignificant	use of	its collection	n items
	(check all that apply).									
а	Public exhibition	c	. 📖	Loan or exc	hange progr	ams				
b	Scholarly research	e	, 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	n how t	hey further t	he organizati	ion's exe	mpt purp	ose ın l	Part XIII	
5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	sures, or oth	er sımıla	r assets			
	to be sold to raise funds rather than to be m								Yes	No_
Pa	rt IV Escrow and Custodial Arran	gements. Comple	ete if the	e organizatio	n answered	"Yes" or	Form 99	0, Part	IV, line 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	ıan or other ıntermed	diary for	contribution	ns or other as	ssets not	included			
	on Form 990, Part X?			•					L Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:						
									Amount	<u> </u>
С	Beginning balance						1c			
d	Additions during the year	•			•		1d			
е	Distributions during the year						1e		 	
f	Ending balance									
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or co	ustodial acco	ount liabi	lity?		Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	kplanati	on has been	provided on	Part XIII				
Pa	t V Endowment Funds. Complete	f the organization ar	swered	"Yes" on Fo	orm 990, Parl	t IV, line	10			
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back	(d) Three	years ba	ick (e) Four	years back
1a	Beginning of year balance				<u> </u>					
b	Contributions									
С	Net investment earnings, gains, and losses			-						
d	Grants or scholarships									
	Other expenditures for facilities									
	and programs									
f	Administrative expenses		***							
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment	•	%	•	.,					
ь	Permanent endowment	%	_							
С	Temporarily restricted endowment									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
За	Are there endowment funds not in the posse	•	ation th	at are held a	ind administe	ered for t	he organi	zation		
	by .	3					Ū		ſ	Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations	•				•			3a(ii)	
ь	If "Yes" on line 3a(ii), are the related organiza	itions listed as requi	red on S	Schedule R?		•			3b	
4	Describe in Part XIII the intended uses of the								. [33_1	
Pai	t VI Land, Buildings, and Equipm					-				
	Complete if the organization answere	d "Yes" on Form 990), Part I	V, line 11a. S	See Form 990), Part X,	line 10.			
	Description of property	(a) Cost or o			or other		ccumulat	ed	(d) Bool	value
		basis (investr		, · ·	(other)	· · ·	preciation		(-,	
1a	Land			9,31	1,527.				9,31	1,527.
	Buildings				0,735.	5,'	755,2	29.		5,506.
	Leasehold improvements									
	Equipment			7,71	9,724.	6,4	466,7	41.	1,252	2,983.
	Other				1,939.		302,1			802.
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colur	nn (B), line 1	l0c)			>		9,818.

Schedule D (Form 990) 2015

(6)(7)(8) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 20,671.

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

Schedule D (Form 990) 2015

SCHEDULE E

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Schools

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

► Attach to Form 990 or Form 990-EZ.

2015

Open to Public Inspection

Name of the organization

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

Employer identification number

	King's Ridge Christian School	<u> 58-26</u>	00	863	
Pa					,
		_	_	YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, byla	iws,		}	
	other governing instrument, or in a resolution of its governing body?	-	1	X	<u> </u>
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its broc				
	catalogues, and other written communications with the public dealing with student admissions, programs, and		2	X	<u> </u>
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media du				1
	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that				
	the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain	ain.			
	If you need more space, use Part II	Ļ	3	X	
	See Part II				<u> </u>
					ĺ
4	Does the organization maintain the following?	}	-	:	
	Records indicating the racial composition of the student body, faculty, and administrative staff?	<u> </u>	<u>4a</u>	X	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscrimina		4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing v	with student			
	admissions, programs, and scholarships?		4c	X	ļ
ď	Copies of all material used by the organization or on its behalf to solicit contributions?	<u> </u> -	4d	X	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.				
5	Does the organization discriminate by race in any way with respect to:				
-	Students' rights or privileges?	1	5a	Ì	х
	Admissions policies?	_	5b		X
	Employment of faculty or administrative staff?	F-	5c		X
q	Scholarships or other financial assistance?	—	5d		X
<u>ب</u>	Educational policies?	· -	<u>5u</u> 5е		X
f	Use of facilities?	· -	5f		X
	Athletic programs?	<u> </u>	5g	-	X
_	Other extracurricular activities?	-	5h		X
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II	<u> </u>	<u> </u>		
	in you are noted from to dry of the above, produce of places in you more spaces, and it are in				
				ĺ '	
					}
62	Does the organization receive any financial aid or assistance from a governmental agency?		6a	ļ	x
	Has the organization's right to such aid ever been revoked or suspended?	· -	6b		X
~	If you answered "Yes" on either line 6a or line 6b, explain on Part II.	<u> </u>			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.0)5 of			
•	Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No." explain on Part II		7	x	

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

Schedule E (Form 990 or 990-EZ) (2015)

Schedule E (Form 990 or 990-EZ) (2015) King's Ridge Christian School 58-2600863 Page 2 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.
Line 3 - Explanation of Nondiscrimination Policy:
The Notice of Nondiscrimatory Policy is published in the
Atlanta Journal and Constitution. King's Ridge Christian
School admits students of any race, color, national and
ethnic origin to all the rights, privileges, programs and
activities generally accorded or made available to students
at the school it does not discriminate on the basis of race, color,
national and ethnic origin in administration of its educational policies,
admissions policies, scholarship and loan programs, and athletic and other
school-administered programs.

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on 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.

Department of the Treasury

Open to Public

OMB No 1545-0047

	bout Schedule G (Form 990 or 990-EZ) and rts	instru	ictions is at www.irs.g	ov/form990.	mspection
Name of the organization	Dides Obsideion Co	hoo	1		58-260	entification number
Fundacione Activitica	Ridge Christian So Complete of the organization answer			n Form 990 Part IV		
required to complete this par	t					
1 Indicate whether the organization rais						
a Mail solicitations			-	overnment grants		
b Internet and email solicitations			_	nment grants		
c Phone solicitations	g L Special	l fundra	using	events		
d In-person solicitations						
2 a Did the organization have a written of						s 🗆 No
key employees listed in Form 990, P						
b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the		suant to	agre	ements under which	the fullulaiser is to) De
		T (iii)	Did		(v) Amount paid	(ii) Amount noud
(i) Name and address of individual	(ii) Activity	fundr have c	aiser	(iv) Gross receipts	to (or retained by)	(vi) Amount paid to (or retained by)
or entity (fundraiser)	(II) Activity		trol of utions?	from activity	fundraiser listed in col. (i)	organization
		Yes	No			
		1				
						-
		-				
		-		<u> </u>		
		_1				
otal 3 List all states in which the organization	on is registered or licensed to solicit	contrib	ution	s or has been notifie	d it is exempt from	registration
or licensing.	The registered of hearings to denote					
				 		
		·				
						
UA. Fan Danamuark Darkiasian Aas Nas	ica, aca tha Instructions for Earm	000	000	C7 (Bahadula G /Earm	000 or 000 E7\ 201

532081 09-14-15

<u>Sch</u>	edu	le G (Form 990 or 990-EZ) 2015 King's	Ridge Christ	ian School		2600863 Page 2
Pa	ırt	Fundraising Events. Complete if the of fundraising event contributions and given the fundraising event contributions.	he organization answered	d "Yes" on Form 990, Par	t IV, line 18, or reported	more than \$15,000
	_	of fundraising event contributions and gi	(a) Event #1	(b) Event #2	(c) Other events	
			Fall County	(5) 210111 112	(0)	(d) Total events
				Ridge Run	1	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	48,544.	10,166.	6,204.	64,914.
Œ		·				
	2	Less Contributions	17,105.	5,662.	3,166.	25,933.
	3	Gross income (line 1 minus line 2)	31,439.	4,504.	3,038.	38,981.
	4	Cash prizes				
g	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	3,039.			3,039.
Orect E	7	Food and beverages .				
	8	Entertainment				
	9	Other direct expenses	28,400.	4,504.	3,038.	35,942.
	10	Direct expense summary. Add lines 4 throug	h 9 ın column (d)		>	38,981.
r <u> </u>	11					<u> </u>
Pa	rt l		answered "Yes" on Forn	n 990, Part IV, line 19, or	reported more than	
	—	\$15,000 on Form 990-EZ, line 6a	T	(b) Dull tobe (instant		(d) Total gamma (add
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
ever						(7)
ď	1	Gross revenue		ļ		
			T			
uses	2	Cash prizes .				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs .				
	5	Other direct expenses				
	•	Voluntaariahar	Yes %		Yes%	
ı	ь	Volunteer labor	L No	No No	L No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)	•	•	
	8	Net gaming income summary Subtract line	7 from line 1, column (d)			
	_					
9		ter the state(s) in which the organization cond				
		he organization licensed to conduct gaming a No," explain.				Yes No
	_					
		ere any of the organization's gaming licenses r	•			Yes No
b	if "	Yes," explain:				
	_					
5320	32 09	9-14-15	 		Schedule G (For	m 990 or 990-EZ) 2015

Schedule G (Form 990 or 990 EZ) 2015 King's Ridge Christian School	<u> 58-26008</u>	63 Page 3
11 Does the organization conduct gaming activities with nonmembers?		es 🔲 No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	r 	
to administer charitable gaming?	Y	es L No
13 Indicate the percentage of gaming activity conducted in:	11	0.4
a The organization's facility	13a	
b An outside facility	13b	%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and record	as:	
Name		
Address >		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Y	es No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount	ount	
of gaming revenue retained by the third party > \$		
c If "Yes," enter name and address of the third party:		
Name		
Address ▶		
16 Gaming manager information		
Name		
Gaming manager compensation > \$		
Description of services provided		
boson plion of sorvices provides P		
Director/officer Employee Independent contractor		
17 Mandatory distributions.		
a is the organization required under state law to make charitable distributions from the gaming proceeds to		
retain the state gaming license?	□ Y	es No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	in the	
organization's own exempt activities during the tax year > \$		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and I	Part III, lines 9, 9	b, 10b, 15b,
15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).		
		
		
		·
		
	G (Form 990 or	000-E7\ 2045
Scriedule	~ (1 00 111 0 20 01	

Schedule G	G (Form 990 or 990-EZ)	King's Ridge C	hristian School	58-2600863 Page 4
Part IV	Supplemental Info	rmation (continued)		
				
				
				
		 		
_				
				
		- -		
				
				
	 			
		 		
				

SCHEDULE (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

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Open to Public Inspection

► Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990.

Name of the organization King's Ri	King's Ridge Christian	tian School					Employer identification number 58 - 26 0 0 8 6 3
Part I General Information on Grants and Assistance	ind Assistance	l					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	amount of the grants	s or assistance, the	grantees' eligibility	for the grants or ass	istance, and the select	
cntena used to award the grants or assistance?	stance?						X Yes
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for monit	oring the use of grant	funds in the United	d States.			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Domestic Organi	zations and Domesti	c Governments. C	complete if the orga	nization answered "	'es" on 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	\$5,000. Part II can	be duplicated if addit	ional space is need	Jed.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
 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 	and government or s listed in the line	ganizations listed in the table	ne line 1 table				A A

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

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Schedule I (Form 990) (2015) .

Schedule I (Form 990) (2015) Page 2 (f) Description of non-cash assistance Reduction in tuition. 58-2600863 (e) Method of valuation (book, FMV, appraisal, other) SSS provides the Parents/guardians are required to apply for financial aid by submitting the for financial aid (SSS) of the National Association of Independent Schools. statement along with their recommendation on the amount the parents are able to pay toward Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. parent's financial statement form through the school and student service Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. A copy of the parent's financial statement form, income tax statement W-2's and a cover letter describing the specific reasons for seeking FMV (d) Amount of non-cash assistance school and parent their analysis of the parent's financial assistance are submitted to the school's business manager. 629,273 (c) Amount of cash grant King's Ridge Christian School 147 (b) Number of recipients (a) Type of grant or assistance Scholarships and financial aid Part I, Line 2: Schedule I (Form 990) (2015) 532102 10-28-15 Part III

SCHEDULE'J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

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

King's Ridge Christian School

m990. Inspection
Employer identification number

58-2600863

Paı	rt I │ Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		1	
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	1		
	First-class or charter travel X Housing allowance or residence for personal use			}
-	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	L
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	1		ļ
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			l
	Compensation committee X Written employment contract	Ì		
	Independent compensation consultant I Compensation survey or study	l		
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			}
	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
	The organization?	5a		Х
	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			l
	The organization?	6a	'	X
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			ļ
	not described on lines 5 and 6? If "Yes," describe in Part III	7		_X
	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		-	
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		_x
	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		-	
	Regulations section 53 4958-6(c)?	9		[

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

Schedule J (Form 990) 2015

King's Ridge Christian School

Schedule J (Form 990) 2015

58-2600863

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation		(D)·()(B)	ın column (B) reported as deferred on prior Form 990
(1) C. David Rhodes III	8	283,289.	0	0	18,000.	8,578.	309,867.	0
dmaster	: 🗉	0	0	0	0	0		0
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	(1)							•
532112				(Sched	Schedule J (Form 990) 2015

532113 10-14-15

Employer identification number OMB No 1545-0047 2015 Open to Public Inspection (g) Defeased (h) On behalf 58-2600863 ŝ × ۵ of Issuer Yes Yes ž × Yes ŝ cost Q ပ (f) Description of purpose explanations, and any additional information in Part VI.

Attach to Form 990. Information about Schedule K (Form 990) and its instructions is at www.lrs.gov/form990. of acquisition the Yes ► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, Financed ŝ 8 Supplemental Information on Tax-Exempt Bonds Yes 17000000 Continuations (e) Issne brice 2,425,000 17,000,000 ŝ 05/04/06 (d) Date issued Yes × (E) for Column (c) CUSIP # King's Ridge Christian School None Does the organization maintain adequate books and records to support the final allocation of proceeds? 56-0939887 See Part VI (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? Has the final allocation of proceeds been made? Working capital expenditures from proceeds Capital expenditures from proceeds Credit enhancement from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds Proceeds in refunding escrows Issuance costs from proceeds Year of substantial completion (a) Issuer name Part III Private Business Use Amount of bonds retired Other unspent proceeds Total proceeds of issue Other spent proceeds Name of the organization Bond Issues Department of the Treasury Internal Revenue Service Proceeds **SCHEDULE K** A BB&T (Form 990) Part Part I 0 က 2 9 ø 2 9 8 ပ ۵ Ξ 12 13 5 17

(i) Pooled

Yes No financing

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Schedule K (Form 990) 2015

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Yes

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Yes

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Yes

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Yes

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532121 10-22-15 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

bond-financed property?

Are there any lease arrangements that may result in private business use of

Was the organization a partner in a partnership, or a member of an LLC,

which owned property financed by tax-exempt bonds?

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Schedule K (Form 990) 2015 King's Ridge Christian School Part III Private Business Use (Continued)			-88-	58-2600863				Page 2	•
		₹	;	8		; S	,		,
Sa Are there any management of service contracts that may result in private business use of bond-financed property?	Tes	°×	Yes	OZ	res	Q Z	res	0	-
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								!	
c. Are there any research agreements that may result in private business use of bond-financed property?		×							
1				ļ					
counsel to review any research agreements relating to the financed property?									
4 Enter the percentage of financed property used in a private business use by									
entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%	
5 Enter the percentage of financed property used in a private business use as a result of									
unrelated trade or business activity carried on by your organization, another	_								
section 501(c)(3) organization, or a state or local government		%		%		%		%	
6 Total of lines 4 and 5		%		%		%		%	
7 Does the bond issue meet the private security or payment test?		X							
8a Has there been a sale or disposition of any of the bond-financed property to a non-									
governmental person other than a 501(c)(3) organization since the bonds were issued?		×							
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed									
of		%		%		%	ļ	%	
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141·12 and 1.145·2?				,					
9 Has the organization established written procedures to ensure that all nonqualified									
bonds of the issue are remediated in accordance with the requirements under									
Regulations sections 1.141-12 and 1 145-2?		X							
Part IV Arbitrage									
		A		8		U		٥	
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	S.	Yes	S _N	Yes	No	
Penalty in Lieu of Arbitrage Rebate?		×							
2 If "No" to line 1, did the following apply?									
a Rebate not due yet?		×							
b Exception to rebate?		×							
c No rebate due?		×							
If "Yes" to line 2c, provide in Part VI the date the rebate computation was									
performed									
3 Is the bond issue a vanable rate issue?	×	ĺ	ì						
4a Has the organization or the governmental issuer entered into a qualified									
hedge with respect to the bond issue?	×								
b Name of provider	- 1								
c Term of hedge	10.	000000							<i>.</i>)
d Was the hedge superintegrated?		×							
e Was the hedge terminated?		×							
532122 10-22-15						S	hedule K (Fo	Schedule K (Form 990) 2015	

Schedule K (Form 990) 2015

532123 10-22-15

SCHEDULE'O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

➤ Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

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

Employer identification number 58-2600863

King's Ridge Christian School Form 990, Part III, Line 4a, Program Service Accomplishments: taught known, loved and nurtured collectively" by members of the school community and the inherent value that the environment brings to contribute to the success of each student. Staff members_are attracted to join the community for the opportunity to minister to students by ____ investing in their lives. This environment creates an irresistible community attractive to parents who seek ways to accelerate their child's preparation for college or career and to students who crave personal connections and meaning in their Wi-Fi and data-streamed world. Accountability for personal behavior exists within an Honor Code. Faith development occurs within a framework of faculty as Christian role models, designated middle and high school youth pastors on staff, academic study and application of scripture, weekly chapel services to gather as a Christian community and faith-in-action experiences by involvement in community service and mission trips. The King's Ridge approach of a comprehensive education extends beyond the content covered in a classroom. This approach, called the JOURNEY for Life Impact, involves not only the knowledge gained through academic studies to prepare for college, but allows a student to become known through: - identifying their unique God-given purpose and call in whatever industry they serve

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Schedule O (Form 990 or 990-EZ) (2015)

understanding their wiring of how and where to serve

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization King's Ridge Christian School	Employer identification number 58-2600863
- developing abilities to relate to others	
- expanding impact through effective development	of functional
life skills	
This inclusive access to learning is designed to prepare	students to
become self-directed learners, self-aware leaders, and	elf-confident
servants.	
A strategically-designed international student program i	s essential to
develop a broad community of learners. By diversifying c	ultural
backgrounds throughout the student body, King's Ridge st	udents begin to
cultivate an understanding of global agility skills through	ugh relational
learning. Rather than enrolling international students	to drive
revenue and risk creating large numbers of students from	any particular
country, King's Ridge aims long-term to enroll students	from 9 areas of
the globe, carefully seeking and evaluating students who	can bring in
different cultural perspectives. This will prepare King	's Ridge alumni
to be noted for their proficiency in navigating in and or	ut of
environments in college and their careers beyond.	
Through this comprehensive experience, students are prepared	ared to serve
at a higher level and do it with distinction. The benchmark	ark for
excellence is elevated and has been demonstrated by KRCS	students and
alumni in multiple ways:	
- Ten years of graduating classes with 100% colle	ege acceptance
rate.	
- Class of 2016 (47 students) received \$4.6 mill:	ion in
scholarship offers (not including Georgia HOPE or Zell M	
532212 09-02-15 Sche	edule O (Form 990 or 990-EZ) (2015)

Schedule O (Form 990 or 990-EZ) (2015) Name of the organization		Page Employer identification number
King's Ridge Christian So	chool	58-2600863
- SAT scores:		
* King's Ridge Christian Scho	ool: 1236	
* Georgia Average: 975		
* National Average: 1010		
* GISA (Georgia Independent S	School Associ	ation) Average -
Georgia Private Schools: 1095		
- Students perform well above t	he national	average in AP exams
vith 92% of students scoring a "3" or h	nigher for co	ollege credit.
* AP Test Scores - for collec	ge eligible o	eredit, 2016 Results
	Nat'l Avg	KRCS
- Biology	61%	86%
- Calculus AB	59%	88%
- Calculus BC	82%	100%
- Chemistry	52%	100%
- English Lit & Comp	55%	100%
- European History	54%	100%
- French Lang & Culture	76%	100%
- Govt & Politics	62%	100%
- Physics	39%	100%
- Psychology	64%	83%
- Spanish Lang & Culture	90%	100%
- Statistics	60%	100%
- US Govt	51%	100%
- US History	52%	77%
RCS's co-curricular environment is a r	natural exter	nsion of the
classroom. Students gain skills through		
activities. They are challenged with pe		
32212 09-02-15	55	Schedule O (Form 990 or 990-EZ) (201

0-1	, J
Schedule O (Form 990 or 990-EZ) (2015) Name of the organization	Employer identification number
King's Ridge Christian School	58-2600863
- problem solving using creativity and critical t	hinking skills
- innovation as a result of recovering from failu	ire
- collaboration and teamwork towards a common goa	11
- character and leadership development by serving	others
- development of cultural agility and communicati	on skills to
effectively navigate their experiences	
SERVICE AND MISSIONS	
All students participate in service and missions starting	in the early
grades continuing through their high school years. Young	
may get involved by learning about the project and its pu	
committing to pray for an older group of students directl	
a mission trip, or being part of the support group by pro	viding
resources to accomplish their task. By the time students	reach their
high school years this service expands within a mission t	rip framework
where students put their faith in action and become the h	ands and feet
of Christ by allowing Him to work through them. Serving o	thers through
missions allows students to understand the holistic appro	ach of Christ
in this world. KRCS graduates are required to document 60	hours of
community service as part of their graduation requirement	s. Many
students far exceed that benchmark having discovered the	joy from
giving back to others.	
CHRISTIAN COMMUNITY	
Families are attracted to the school initially for their	children but
can find areas in which to become a part of the community	and develop
networks of support through involvement in parent organiz	ations (Parent

Club, Athletic Association, Fine Arts Association) and multiple options

Schedule O (Form 990 or 990-EZ) (2015)

532212 09-02-15

Name of the organization King's Ridge Christian School	Employer identification number 58-2600863	
- Perform with an understanding of the level of e	ffort and	
commitment required to fully honor God by using the talents and gifts		
provided by Him.		
provided by min.		
Form 990, Part III, Line 4b, Program Service Accomplishme	nts:	
built as a result of foundational level rec style teams,	starting in	
first grade. King's Ridge strives to train athletes to co	mpete at the	
highest level so at the end of the contest the opponent k	nows they have	
given their opponent a great game. During the 2015-2016 s	chool year	
King's Ridge teams moved on to tournament level play in v	arsity	
basketball, tennis, soccer, swimming, track and field and	baseball.	
Student athletes may participate in any number of sports (football,		
volleyball, cross country, softball, swimming, basketball, baseball,		
tennis, golf, track & field, equestrian, lacrosse and soc	cer) over a	
3-season schedule. When not actively competing they commi	t to	
off-season conditioning and training through a custom-des	igned	
strength, conditioning and agility program to be fully pr	epared for	
future success. This dedication to preparation has resul	ted in an ever	
increasing number of King's Ridge student athletes being	pursued by	
college level programs. During the 2015-2016 school year	King's Ridge	
alumni accomplished noteworthy success:		
- Chase Elliott (class of 2014) named 2015 NASCAR	Xfinity	
Series Most Popular Driver for the second year in a row a	nd as one of	
Sportspro's 50 Most Marketable Athletes list. These awar	ds follow a	
stellar and unprecedented NASCAR rookie season, being the	youngest to	
ever win a championship (Nationwide Series).		
- Penny Hart (class of 2015) named as the Sun Bel	t Football	
Freshman of the Year after having been named early in the 532212 00-02-15 Schee	s season to the dule O (Form 990 or 990-EZ) (2015)	

Form 990, Part VI, Section B, line 11:

After a draft version of the Form 990 has been prepared, the draft is sent to the Finance Committee members and Board of Trustees. Members and directors discuss any issues or concerns that they may have with the draft

Form 990. Once approved, the preparer is notified and authorized to 532212 09-02-15