

Form **990-EZ**

**Short Form  
Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)

OMB No 1545-1150

**2009**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.  
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

**A For the 2009 calendar year, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_**

<b>B</b> Check if applicable: Address change Name change Initial return Termination Amended return Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C</b> Name of organization <b>MOJAVE ACADEMY, INC</b> Number and street (or P O box, if mail is not delivered to street address) Room/suite <b>PO BOX 919</b> City or town, state or country, and ZIP + 4 <b>DATIL NM 87821</b>	<b>D</b> Employer identification number <b>33-0891385</b> <b>E</b> Telephone number <b>505-772-5283</b> <b>F</b> Group Exemption Number
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• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**G** Accounting method  Cash  Accrual  
Other (specify) \_\_\_\_\_

**I** Website: **WWW.MOJAVEACADEMY.COM**  
**J** Tax-exempt status (check only one) —  501(c) ( **3** ) ◀ (insert no )  4947(a)(1) or  527

**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

**K** Check  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ **\$ 371,265**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)**

	<b>1</b> Contributions, gifts, grants, and similar amounts received	<b>1</b>	<b>28,842</b>
	<b>2</b> Program service revenue including government fees and contracts	<b>2</b>	<b>286,265</b>
	<b>3</b> Membership dues and assessments	<b>3</b>	
	<b>4</b> Investment income	<b>4</b>	<b>7,035</b>
	<b>5a</b> Gross amount from sale of assets other than inventory	<b>5a</b>	
	<b>b</b> Less cost or other basis and sales expenses	<b>5b</b>	
	<b>5c</b> Gain or loss from sale of assets other than inventory (Subtract line 5b from line 5a)	<b>5c</b>	
	<b>6</b> Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
	<b>a</b> Gross revenue (not including _____ of contributions)	<b>6a</b>	
	<b>b</b> Less direct expenses other than fundraising expenses	<b>6b</b>	
	<b>6c</b> Net income or loss from special events and activities (Subtract line 6b from line 6a)	<b>6c</b>	
	<b>7a</b> Gross sales of inventory less returns and allowances	<b>7a</b>	
	<b>b</b> Less cost of goods sold	<b>7b</b>	
	<b>7c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<b>7c</b>	
	<b>8</b> Other revenue (describe <b>▶ SEE STATEMENT 1</b> )	<b>8</b>	<b>49,123</b>
	<b>9 Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	<b>9</b>	<b>371,265</b>
Expenses	<b>10</b> Grants and similar amounts paid (attach schedule)	<b>10</b>	
	<b>11</b> Benefits paid to or for members	<b>11</b>	
	<b>12</b> Salaries, other compensation, and employee benefits	<b>12</b>	<b>132,656</b>
	<b>13</b> Professional fees and other payments to independent contractors	<b>13</b>	<b>2,074</b>
	<b>14</b> Occupancy, rent, utilities, and maintenance	<b>14</b>	<b>67,807</b>
	<b>15</b> Printing, publications, postage, and shipping	<b>15</b>	
	<b>16</b> Other expenses (describe <b>▶ SEE STATEMENT 2</b> )	<b>16</b>	<b>180,542</b>
	<b>17 Total expenses.</b> Add lines 10 through 16	<b>17</b>	<b>383,079</b>
Net Assets	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9)	<b>18</b>	<b>-11,814</b>
	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	<b>19</b>	<b>852,940</b>
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	<b>20</b>	
	<b>21</b> Net assets or fund balances at end of year (Combine lines 18 through 20)	<b>21</b>	<b>841,126</b>

**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

		(See the instructions for Part II)	
		(A) Beginning of year	(B) End of year
<b>22</b>	Cash, savings, and investments	<b>53,496</b>	<b>81,878</b>
<b>23</b>	Land and buildings	<b>195,849</b>	<b>195,849</b>
<b>24</b>	Other assets (describe <b>▶ SEE STATEMENT 3</b> )	<b>628,392</b>	<b>583,782</b>
<b>25</b>	<b>Total assets</b>	<b>877,737</b>	<b>861,509</b>
<b>26</b>	<b>Total liabilities</b> (describe <b>▶ SEE STATEMENT 4</b> )	<b>24,797</b>	<b>20,383</b>
<b>27</b>	<b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	<b>852,940</b>	<b>841,126</b>

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

*100*



**Part V Other Information** (Note the statement requirements in the instructions for Part V)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr <span style="float:right">▶ 37a</span>		
b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved <span style="float:right">38b</span>		
39	Section 501(c)(7) organizations Enter		
a	Initiation fees and capital contributions included on line 9 <span style="float:right">39a</span>		
b	Gross receipts, included on line 9, for public use of club facilities <span style="float:right">39b</span>		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 <span style="float:right">▶</span> _____, section 4912 <span style="float:right">▶</span> _____, section 4955 <span style="float:right">▶</span> _____		
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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		X
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <span style="float:right">▶</span> _____		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization <span style="float:right">▶</span> _____		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed <span style="float:right">▶</span> <b>NONE</b>		
42a	The organization's books are in care of <span style="float:right">▶</span> <b>MOJAVE ACADEMY</b> Telephone no <span style="float:right">▶</span> <b>800-576-3866</b> <b>PO BOX 919</b> Located at <span style="float:right">▶</span> <b>DATIL, NM</b> ZIP + 4 <span style="float:right">▶</span> <b>87821</b>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <span style="float:right">▶</span> _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No
42b			X
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country <span style="float:right">▶</span> _____		X
42c			X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year <span style="float:right">▶</span> <b>43</b>		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

**Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
<b>46</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<b>X</b>
<b>47</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		<b>X</b>
<b>48</b> Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<b>X</b>
<b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization?		<b>X</b>
<b>49b</b> If "Yes," was the related organization a section 527 organization?		

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

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

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

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

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

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

**Sign Here** 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.

Signature of officer: *Cheri Hall* Date: 1/19/10  
**CHERI HALL** **PRESIDENT**  
 Type or print name and title

**Paid Preparer's Use Only**

Preparer's signature: *Brook Jensen* Date: 04/11/10 Check if self-employed:   
 Firm's name (or yours if self-employed), address, and ZIP + 4: **GREENBERG AND JACKSON CPAS**  
**2441 HONOLULU AVENUE SUITE 120**  
**MONTROSE, CA 91020-1864**  
 Preparer's Identifying Number (See instr.): \_\_\_\_\_  
 EIN: \_\_\_\_\_  
 Phone no: **818-249-3230**

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

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

**Public Charity Status and Public Support**

OMB No 1545-0047

**2009**

**Open to Public Inspection**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization

**MOJAVE ACADEMY, INC**

Employer identification number  
**33-0891385**

**Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.**

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

- 1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state.
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9  An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I
  - b  Type II
  - c  Type III—Functionally integrated
  - d  Type III—Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
  - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
  - (ii) A family member of a person described in (i) above?
  - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**  
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3						
<b>5</b> 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)						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc (see instructions)					<b>12</b>	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	%
<b>15</b> Public support percentage from 2008 Schedule A, Part II, line 14	<b>15</b>	%
<b>16a 33 1/3 % support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 33 1/3 % support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2009.</b> 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 IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2008.</b> 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 IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
 (Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12)						
<b>14 First five years.</b> 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 <span style="float: right;">►</span>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17	<b>18</b>	%

- 19a 33 1/3 % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ►
- b 33 1/3 % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ►
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

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**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12. Provide any other additional information. See instructions.

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Form **4562**

**Depreciation and Amortization**  
(Including Information on Listed Property)

OMB No 1545-0172

**2009**

Department of the Treasury  
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to your tax return.

Attachment Sequence No **67**

Name(s) shown on return

**MOJAVE ACADEMY, INC**

Identifying number

**33-0891385**

Business or activity to which this form relates

**INDIRECT DEPRECIATION**

**Part I Election To Expense Certain Property Under Section 179**

**Note: If you have any listed property, complete Part V before you complete Part I.**

1	Maximum amount See the instructions for a higher limit for certain businesses	1	250,000
2	Total cost of section 179 property placed in service (see instructions)	2	2,370
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	0
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	250,000
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	0
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	707
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	0
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	0
13	Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12	13	707

**Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	1,185
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	6,938

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	31,719
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

**Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		1,185	5.0	HY	200DB	237
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property	07/01/09	20,000	39 yrs	MM	S/L	235
				MM	S/L	

**Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property Enter amount from line 28	21	704
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	41,018
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2009)

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

**Section A—Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles )

24a Do you have evidence to support the business/investment use claimed?				Yes	No	24b If "Yes," is the evidence written?				Yes	No		
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost				
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)												25	
26 Property used more than 50% in a qualified business use													
'95 FORD E 350	07/01/07	100.00%	3,667	3,667		5.0	200DBHY	704					
27 Property used 50% or less in a qualified business use													
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1												28	704
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1												29	

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

**Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year	
42 Amortization of costs that begins during your 2009 tax year (see instructions)						
43 Amortization of costs that began before your 2009 tax year					43	692
44 <b>Total.</b> Add amounts in column (f) See the instructions for where to report					44	692

**Federal Statements****Statement 1 - Form 990-EZ, Part I, Line 8 - Other Revenue**

<u>Description</u>	<u>Amount</u>
ROOM AND BOARD	\$ 49,123
TOTAL	\$ 49,123

**Statement 2 - Form 990-EZ, Part I, Line 16 - Other Expenses**

<u>Description</u>	<u>Amount</u>
EXPENSES	\$
ADVERTISING AND PROMOTION	46,614
OFFICE SUPPLIES	473
INTERNET SERVICES	1,356
AUTO	15,826
CONVENTION FEES	2,028
INTEREST EXPENSE	1,332
INSURANCE	14,723
ANIMAL FEED	3,763
BANK CHARGES	4,838
BUSINESS GIFTS	175
COMMISSIONS	6,549
CONTRACT LABOR	3,625
FIELD TRIPS	4,271
LICENSES & FEES	7,332
MATERIALS	6,164
MISCELLANEOUS	664
POSTAGE	4,337
PROPERTY TAXES	15
PURCHASES	2,734
REPAIRS AND MAINTENANCE	7,305
STAFF TRAINING	6,651
STUDENT / TEACHER FOOD	34,713
SUPPLIES	5,054
TOTAL	\$ 180,542

**Statement 3 - Form 990-EZ, Part II, Line 24 - Other Assets**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
ACCOUNTS RECEIVABLE	\$ 81,248	\$ 61,046
OTHER NOTES AND LOANS	96,142	91,074
BUILDINGS AND EQUIPMENT	795,922	818,292
LESS ACCUMULATED DEPRECIATION	350,265	391,283
	10,385	10,385
LESS ACCUMULATED AMORTIZATION	5,040	5,732
	628,392	583,782

**Federal Statements****Statement 4 - Form 990-EZ, Part II, Line 26 - Total Liabilities**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	\$ 4,421	\$ 1,655
PAYROLL TAXES & SALARY	6,704	
CREDIT CARDS PAYABLE	3,586	7,782
WELLS FARGO BUSINESS LINE	10,086	10,946
	<u>24,797</u>	<u>20,383</u>

**Statement 5 - Form 990-EZ, Part III, Line 28 - Statement of Program Service  
Accomplishments**

Description

THE SCHOOL HAS ON AVERAGE 30 STUDENTS FOR THE SUMMER TERM AND AN AVERAGE OF 15 STUDENTS FOR THE DURATION OF THE YEAR.

WE DELIVER THREE PROGRAMS - AN INITIAL PROGRAM CALLED LIFE BASICS, WHERE CHILDREN ARE TAUGHT MORALS AND LIVING SKILLS. OUR SECOND PROGRAM IS CALLED EDUCATIONAL REPAIR. WE COMPLETELY HANDLE A STUDENT'S PAST FAILURES IN HIS EDUCATION. THE STUDENT IS TAUGHT TO BE AN INDEPENDENT STUDENT WITH FULL STUDY AND RESEARCH SKILLS. IN THE THIRD PROGRAM, ACADEMICS, STUDENTS ARE CONSULTED ABOUT THEIR GOALS IN LIFE. THE STUDENTS ARE GIVEN TAILORED PROGRAMS DESIGNED TO HELP THEM ACHIEVE THOSE GOALS. WE HAD MANY SUCCESSFUL GRADUATES AND SATISFIED PARENTS THIS YEAR. WE RAN A VERY ENJOYABLE AND ADVENTURE FILLED SUMMER PROGRAM IN JULY AND AUGUST. THE SUMMER PROGRAM INCLUDED A TRIP TO THE GRAND CANYON AND WHITE WATER RAFTING.

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
<b>5-year GDS Property:</b>									
83	COMPUTER	7/01/09	200		X	100	5 HY 200DB	0	120
84	FURNITURE & FIXTURES	7/01/09	2,170		X	1,085	5 HY 200DB	0	1,302
			<u>2,370</u>			<u>1,185</u>		<u>0</u>	<u>1,422</u>
<b>Non-Residential Real Property:</b>									
82	TRAILER	7/01/09	20,000			20,000	39 MM S/L	0	235
			<u>20,000</u>			<u>20,000</u>		<u>0</u>	<u>235</u>
<b>Prior MACRS:</b>									
1	COMPUTER	6/15/00	1,600			1,600	5 HY 200DB	1,600	0
7	TRUCK	6/15/00	1,500			1,500	5 HY 200DB	1,500	0
8	SNOW PLOW	6/01/00	2,456			2,456	7 HY 200DB	2,456	0
9	TENTS	5/31/01	1,573			1,573	7 HY 200DB	1,573	0
10	KITCHEN EQUIP	7/31/01	2,000			2,000	7 HY 200DB	2,000	0
11	COMPUTER	7/31/01	1,500			1,500	7 HY 200DB	1,500	0
12	WASHER	8/03/01	319			319	7 HY 200DB	319	0
13	TENTS	9/01/01	1,398			1,398	7 HY 200DB	1,398	0
14	WASHER	9/10/01	375			375	7 HY 200DB	375	0
15	SHED	9/10/01	209			209	7 HY 200DB	209	0
16	PRINTER	9/10/01	110			110	7 HY 200DB	110	0
17	DRYER	9/10/01	259			259	7 HY 200DB	259	0
18	BUILDING IMPROVEMENTS	11/16/01	44,768			44,768	39 MM S/L	8,179	1,148
19	TRAILER	4/28/01	11,040			11,040	39 MM S/L	2,182	283
20	TRAILER	5/04/01	11,250			11,250	39 MM S/L	2,200	288
21	TRAILER	5/11/01	3,750			3,750	27 MM S/L	1,040	136
22	DORM ROOMS	5/25/01	75,000			75,000	27 MM S/L	20,795	2,728
23	DORM UNITS	5/31/01	82,927			82,927	27 MM S/L	22,993	3,016
24	DORM UNITS	8/31/01	80,109			80,109	27 MM S/L	21,484	2,913
25	WATER TRANSPORT, WELLS, SEPTIC	6/15/01	148,044			148,044	10 HY 200DB	123,788	9,703
28	FORD 1991	7/31/01	3,500			3,500	5 HY 200DB	3,500	0
29	FORD 1993	7/31/01	3,000			3,000	5 HY 200DB	3,000	0
30	FORD 1971	7/31/01	2,500			2,500	5 HY 200DB	2,500	0
32	KITCHEN OVEN	7/02/02	1,500		X	1,050	7 HY 200DB	1,453	47
33	DRYER - KIDS BUILDING	1/26/02	180		X	126	7 HY 200DB	174	6
34	TRAILER DOUBLE WIDE	6/12/02	5,043			5,043	27 MM S/L	1,200	183
35	DORM	3/29/02	2,838			2,838	27 MM S/L	701	103
36	WELL HOUSE	9/15/02	22,813			22,813	39 MM S/L	3,680	585
37	SKATE PARK	6/14/02	4,800		X	3,360	15 HY 150DB	3,114	198
38	KITCHEN	8/25/02	7,419			7,419	39 MM S/L	1,213	190
39	CLASSROOM	10/18/02	325			325	39 MM S/L	52	8
45	DOUBLE WIDE - CHURCH ON THE RO	5/02/02	12,000			12,000	39 MM S/L	2,038	308
46	DOUBLE WIDE	12/10/02	2,693			2,693	39 MM S/L	417	69
47	TRAILER PAD	5/02/02	3,794			3,794	27 MM S/L	914	138
48	SKATE PARK	6/08/02	500		X	350	15 HY 150DB	324	21
49	CLASSROOM	1/01/03	30,925			30,925	39 MM S/L	4,725	793
53	DORM IMPROVEMENTS - JEFF	12/21/03	897		X	449	7 HY 200DB	837	40
54	FORD AEROSTAR WHITE	8/15/03	3,000		X	1,500	5 HY 200DB	3,000	0
55	TRUCK TRAILER	5/27/03	1,000		X	500	5 HY 200DB	1,000	0
56	LAND IMPROVEMENTS	7/17/03	16,703		X	8,352	15 HY 150DB	12,018	493
58	FURNITURE - BUNK BEDS	5/09/03	2,678		X	1,339	7 HY 200DB	2,499	119
59	COMPUTER EQUIP	12/16/03	1,539		X	769	5 HY 200DB	1,539	0
60	FIRE SYSTEM	2/03/03	2,492		X	1,744	7 HY 200DB	2,259	155
61	TRAILER - CHURCH ON ROCK	9/09/03	5,025			5,025	39 MM S/L	682	129
62	water line	8/20/04	15,434		X	7,717	20 HY 150DB	9,996	408
63	BASKETBALL HOOP	3/05/04	600		X	300	7 HY 200DB	533	27
64	FIREPLACE	11/23/04	751		X	376	7 HY 200DB	667	34
65	WASHER / DRYER	12/10/04	370		X	185	7 HY 200DB	329	16
66	HOT BUFFETT	12/31/04	1,680		X	840	7 HY 200DB	1,492	75
67	COMPUTER - NOTEBOOKS	12/31/04	400		X	200	5 HY 200DB	388	12
68	DINING HALL - UPGRADE	7/31/04	6,251			6,251	39 MM S/L	715	160
69	EQUIPMENT	12/04/04	174		X	87	7 HY 200DB	155	7
71	Furniture & Equipment	7/01/05	4,994			4,994	7 HY 200DB	3,434	446
72	Building improvements	7/01/05	33,241			33,241	39 MM S/L	2,948	852
73	FURNITURE & FIXTURES	7/01/06	707		X	0	7 HY 200DB	707	0
74	Furniture & Equipment	7/01/07	6,476			6,476	7 HY 200DB	2,511	1,133

33-0891385

**Federal Asset Report**

FYE: 12/31/2009

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179B	Bonus	Basis for Depr	PerConv Meth	Prior	Current
75	Computer Equipment	7/01/07	1,599				1,599	5 HY 200DB	831	307
76	PORTABLE GENERATOR	7/01/07	900				900	7 HY 200DB	349	157
77	PAVING STONES	7/01/07	290				290	39 MMS/L	11	7
79	LIBRARY	7/01/07	21,325				21,325	7 HY 200DB	8,269	3,730
80	TRAILER	3/31/08	11,138				11,138	39 MMS/L	226	286
81	EQUIPMENT	7/01/08	1,635			X	818	5 HY 200DB	981	262
			<u>715,316</u>				<u>688,338</u>		<u>303,341</u>	<u>31,719</u>
<b>Other Depreciation:</b>										
4	LAND	6/15/00	165,500				165,500	0 -- Land	0	0
5	LAND IMPROVEMENTS	6/15/00	28,406				28,406	0 -- Land	0	0
40	WELL	7/03/02	66,807				66,807	10 MO S/L	43,425	6,680
41	STALLS	10/14/02	682				682	10 MO S/L	426	69
42	ROAD GRADING	11/01/02	9,450				9,450	50 MO S/L	1,166	189
70	Land improvements	7/01/05	1,902				1,902	0 -- Land	0	0
	<b>Total Other Depreciation</b>		<u>272,747</u>				<u>272,747</u>		<u>45,017</u>	<u>6,938</u>
	<b>Total ACRS and Other Depreciation</b>		<u>272,747</u>				<u>272,747</u>		<u>45,017</u>	<u>6,938</u>
<b>Listed Property:</b>										
78	'95 FORD E 350	7/01/07	3,667				3,667	5 HY 200DB	1,907	704
			<u>3,667</u>				<u>3,667</u>		<u>1,907</u>	<u>704</u>
<b>Amortization:</b>										
27	MAILING LIST	1/01/01	1,650				1,650	15 MOAmort	880	110
31	GOODWILL	7/01/01	5,000				5,000	15 MOAmort	2,500	333
44	LOAN FEES	5/02/02	3,735				3,735	15 MOAmort	1,660	249
			<u>10,385</u>				<u>10,385</u>		<u>5,040</u>	<u>692</u>
	<b>Grand Totals</b>		<u>1,024,485</u>				<u>996,322</u>		<u>355,305</u>	<u>41,710</u>
	<b>Less: Dispositions and Transfers</b>		<u>0</u>				<u>0</u>		<u>0</u>	<u>0</u>
	<b>Less: Start-up/Org Expense</b>		<u>0</u>				<u>0</u>		<u>0</u>	<u>0</u>
	<b>Net Grand Totals</b>		<u>1,024,485</u>				<u>996,322</u>		<u>355,305</u>	<u>41,710</u>