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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2012**Open to Public Inspection****A For the 2012 calendar year, or tax year beginning 07/01/12, and ending 06/30/13**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Green Mountain Montessori School, Inc Doing Business As Number and street (or P O box if mail is not delivered to street address) 8 Jericho Road City, town or post office, state, and ZIP code Essex VT 05452		D Employer identification number 03-0372688
	E Telephone number 802-879-9114		G Gross receipts \$ 312,832
	F Name and address of principal officer		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
	I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
	J Website ▶ www.gmmontessori.org		L Year of formation M State of legal domicile
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities Primary education		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a) 3		
	4 Number of independent voting members of the governing body (Part VI, line 1b) 5		
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 11		
Revenue	6 Total number of volunteers (estimate if necessary) 0		
	7a Total unrelated business revenue from Part VIII, column (C), line 12 0		
	b Net unrelated business taxable income from Form 990-T, line 34 0		
	8 Contributions and grants (Part VIII, line 1h) 18,836		
	9 Program service revenue (Part VIII, line 2g) 290,048		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 104		
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0		
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 308,988		
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0		
	Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4) 0	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 209,865			
16a Professional fundraising fees (Part IX, column (A), line 11e) 0			
b Total fundraising expenses (Part IX, column (D), line 25) 2,224			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 87,362			
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 297,227			
19 Revenue less expenses. Subtract line 18 from line 12 11,761			
20 Total assets (Part X, line 16) 645,378			
21 Total liabilities (Part X, line 26) 125,071			
22 Net assets or fund balances Subtract line 21 from line 20 520,307			

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.

Sign Here	Signature of officer Brian McNabb, Treasurer Date 2/18/14	
	Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name John Chamberlain Preparer's signature John Chamberlain Date 02/06/14 Check <input type="checkbox"/> if self-employed PTIN P01209287	Firm's name John Chamberlain P.C. Firm's EIN 03-0310681
	Firm's address P.O. Box 634 Middlebury, VT 05753	
	Phone no 802-388-3764	

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

☐ Yes ☒ No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990** (2012)**23**

SCANNED MAR 10 2014

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐**1** Briefly describe the organization's mission:**Primary education****2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code.) (Expenses \$ **286,480** including grants of \$) (Revenue \$)
Provided primary education to 40 students, following the Montessori education model. Met or exceeded Vermont public school curriculum requirements.

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **286,480**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		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		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		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		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		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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	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		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 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		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
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 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		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		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		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		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).		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		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		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
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.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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 to any question in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	7		
Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	5		
Enter the number of voting members included in line 1a, above, who are independent.			
2		X	
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			
3			X
Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?			
4			X
Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			
5			X
Did the organization become aware during the year of a significant diversion of the organization's assets?			
6			X
Did the organization have members or stockholders?			
7a			X
Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			
b			X
Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			
8			
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a		X	
The governing body?			
b		X	
Each committee with authority to act on behalf of the governing body?			
9			X
Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.			

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a		X
Did the organization have local chapters, branches, or affiliates?		
b		
If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a		X
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		
b		
Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a		X
Did the organization have a written conflict of interest policy? If "No," go to line 13.		
b		
Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
c		
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.		
13		X
Did the organization have a written whistleblower policy?		
14		X
Did the organization have a written document retention and destruction policy?		
15		
Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	X	
The organization's CEO, Executive Director, or top management official.		
b		X
Other officers or key employees of the organization.		
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a		X
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		
b		
If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **None**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization **Brian McNabb**
86 Evergreen Drive
Huntington VT 05462

802-434-3939

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question 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.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Ian Mercer	5.00									
Director	0.00	X						0	0	0
(2) Irene Wrenner	5.00									
Director	0.00	X						0	0	0
(3) Allegra Carpenter	5.00									
Director	0.00	X						0	0	0
(4) Shireen McNabb	40.00									
President	0.00			X				62,524	0	1,932
(5) Karen Poage	5.00									
Vice President	0.00			X				0	0	0
(6) Brian McNabb	10.00									
Treasurer	0.00			X				0	0	0
(7) Lauren Starkey	5.00									
Secretary	0.00			X				0	0	0
(8)										
(9)										
(10)										
(11)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Sub-total								62,524		1,932
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								62,524		1,932

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

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

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

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

Part VIII Statement of RevenueCheck if Schedule O contains a response to any question in this Part VIII. ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	12,873			
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f		12,873			
Program Service Revenue	2a Preschool	Busn. Code	299,916	299,916		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		299,916			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		43		
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
		(i) Real	(ii) Personal			
6a Gross rents						
b Less rental exps						
c Rental inc or (loss)						
d Net rental income or (loss)						
7a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other			
b Less cost or other basis & sales exps						
c Gain or (loss)						
d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		a				
b Less direct expenses		b				
c Net income or (loss) from fundraising events						
9a Gross income from gaming activities See Part IV, line 19		a				
b Less direct expenses		b				
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Busn. Code				
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions			312,832	299,916	0	43

Part IX Statement of Functional Expenses

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 response to any question in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 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 governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	64,456	58,010	6,446	
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	116,696	116,696		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,131	3,131		
9 Other employee benefits	15,945	15,945		
10 Payroll taxes	15,518	15,518		
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	6,532		6,532	
d Lobbying				
e 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 Schedule O)	2,000			2,000
12 Advertising and promotion				
13 Office expenses	2,600	2,376		224
14 Information technology				
15 Royalties				
16 Occupancy	16,200	16,200		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	4,296	4,296		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	23,921	23,921		
23 Insurance				
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)				
a Insurance	6,801	6,801		
b Real Estate Taxes	6,593	6,593		
c Training	6,035	6,035		
d Classroom Supplies	5,840	5,840		
e All other expenses	5,118	5,118		
25 Total functional expenses. Add lines 1 through 24e	301,682	286,480	12,978	2,224
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response to any question in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	20,217	1	34,108
	2 Savings and temporary cash investments	117,054	2	56,071
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	321	4	897
	5 Loans and other receivables from current and former officers, directors, 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 employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,291	9	987
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 674,356		
	b Less accumulated depreciation	10b 186,826	10c 506,495	487,530
	11 Investments—publicly traded securities		11	36,027
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	645,378	16	615,620	
Liabilities	17 Accounts payable and accrued expenses	32,338	17	31,316
	18 Grants payable		18	
	19 Deferred revenue	18,200	19	12,300
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	74,533	23	40,084
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	463
	26 Total liabilities. Add lines 17 through 25	125,071	26	84,163
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	520,307	27	531,457
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	520,307	33	531,457	
34 Total liabilities and net assets/fund balances	645,378	34	615,620	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	312,832
2	Total expenses (must equal Part IX, column (A), line 25)	2	301,682
3	Revenue less expenses. Subtract line 2 from line 1	3	11,150
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	520,307
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	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	531,457

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form **990** (2012)

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

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

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

OMB No 1545-0047

2012**Open to Public
Inspection**

Name of the organization

**Green Mountain Montessori
School, Inc**

Employer identification number

03-0372688**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—Non-functionally integrated
- 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 monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2012

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)						12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2012. 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 10%-facts-and-circumstances test—2011. 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"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 acquired after June 30, 1975						
c Add lines 10a and 10b						
11 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 assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2012.** 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—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

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

Part IV **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. Also complete this part for any additional information. (See instructions).

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

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

OMB No 1545-0047

2012Open to Public
Inspection

Name of the organization

**Green Mountain Montessori
School, Inc**

Employer identification number

03-0372688**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d 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, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1	► \$
b Assets included in Form 990, Part X	► \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

- 1a Beginning of year balance
 b Contributions
 c Net investment earnings, gains, and losses
 d Grants or scholarships
 e Other expenditures for facilities and programs
 f Administrative expenses
 g End of year balance

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
1b					
1c					
1d					
1e					
1f					
1g					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☐ %
 c Temporarily restricted endowment ☐ %
 The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		50,000		50,000
1b Buildings				
1c Leasehold improvements				
1d Equipment				
1e Other		624,356	186,826	437,530
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				487,530

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Pensions Payable	463
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	463

2. FIN 48 (ASC 740) Footnote 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 ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part XIII **Supplemental Information** (continued)

SCHEDULE E
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Schools**

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

OMB No 1545-0047

2012Open to Public
Inspection

Name of the organization

**Green Mountain Montessori
School, Inc**

Employer identification number

03-0372688**Part I**

1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?

2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II

The school actively seeks to build a community of people from diverse racial, cultural and economic backgrounds, and highlights this goal in all its recruitment materials.

4 Does the organization maintain the following?

- a Records indicating the racial composition of the student body, faculty, and administrative staff?
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
d Copies of all material used by the organization or on its behalf to solicit contributions?
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.

- a Students' rights or privileges?
b Admissions policies?
c Employment of faculty or administrative staff?
d Scholarships or other financial assistance?
e Educational policies?
f Use of facilities?
g Athletic programs?
h Other extracurricular activities?
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II

6a Does the organization receive any financial aid or assistance from a governmental agency?

- b Has the organization's right to such aid ever been revoked or suspended?
If you answered "Yes" to either line 6a or line 6b, explain on Part II

7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

	YES	NO
1	X	
2	X	
3	X	
4a	X	
4b	X	
4c	X	
4d	X	
5a		X
5b		X
5c		X
5d		X
5e		X
5f		X
5g		X
5h		X
6a		X
6b		X
7	X	

Part II

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

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-EZComplete 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

2012**Open to Public
Inspection****Green Mountain Montessori
School, Inc**Employer identification number
03-0372688**Form 990, Part VI, Line 2 - Related Party Information Among Officers****Shireen McNabb****Brian McNabb****President****Treasurer****Husband and Wife****Form 990, Part VI, Line 11b - Organization's Process to Review Form 990**

Form 990 is reviewed by the president and treasurer prior to filing. Form 990 is used in

budgeting and planning by the entire board, so that all members are familiar with its contents.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

All executive and managerial salaries are reviewed by the board prior to the start of each fiscal year.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

The organization's governing documents are available upon request at the organization's office.

Federal Statements**Taxable Interest on Investments**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
Interest on Savings	\$ 43		14			
Total	<u>\$ 43</u>					

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
Preschool				
Facilities Rental	\$ 2,000		\$	\$ 2,000
Total	\$ 2,000	\$ 0	\$ 0	\$ 2,000

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
Scholarships for Tuition	\$ 1,510	\$ 1,510		
Other professional fees	914	914		
Internet expenses	829	829		
Marketing	774	774		
Gifts	470	470		
Licenses	291	291		
Meals	199	199		
Field Trips	131	131		
Total	\$ 5,118	\$ 5,118	\$ 0	\$ 0

Forms
990 / 990-PF**Mortgages and Other Notes Payable****2012**For calendar year 2012, or tax year beginning **07/01/12**, and ending **06/30/13**

Name

**Green Mountain Montessori
School, Inc**

Employer Identification Number

03-0372688**Form 990, Part X, Line 23 - Additional Information**

Name of lender	Relationship to disqualified person
(1) Northfield Savings Bank	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1) 230,000	07/19/06	06/19/26	Monthly payments of \$1749	6.750
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1) Mortgage on building	Refinance of previous mortgage loan
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)	74,533	40,084
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Totals	74,533	40,084

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

2012Attachment
Sequence No **179**Department of the Treasury
Internal Revenue Service

(99)

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

**Green Mountain Montessori
School, Inc**

Identifying number

03-0372688

Business or activity to which this form relates

Preschool**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 instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
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	
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	
10	Carryover of disallowed deduction from line 13 of your 2011 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12	13	

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 instructions)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	22,598

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 2012	17	1,323
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		

Section B—Assets Placed in Service During 2012 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						
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	
i Nonresidential real property			27 5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2012 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	
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	23,921
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** (2012)

DAA

There are no amounts for Page 2

Federal Asset Report

FYE: 6/30/2013

Preschool

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Prior MACRS:											
79	Key Pad - Life Safety System	7/25/07	1,260				1,260	39	MMS/L	160	33
80	Landscaping	8/24/07	1,816				1,816	10	HY S/L	817	182
81	Classroom Materials	7/06/07	552				552	7	HY S/L	355	79
82	Classroom Materials	9/18/07	450				450	7	HY S/L	289	64
83	Classroom Materials	10/30/07	488				488	7	HY S/L	314	70
85	Waching Machine	8/25/07	421				421	10	HY S/L	189	43
86	Playstructure Improvements	7/13/07	4,635				4,635	10	HY S/L	2,086	463
87	Playstructure	8/23/07	272				272	10	HY S/L	123	27
88	Play Structure	8/27/07	1,078				1,078	10	HY S/L	485	108
89	Play Structure	9/07/07	850				850	10	HY S/L	383	85
90	Pressure Washer	10/14/07	350				350	10	HY S/L	157	35
91	Classroom Materials	6/13/08	374			X	188	7	HY S/L	186	27
92	Classroom Materials	6/27/08	992			X	497	7	HY S/L	495	71
93	Dryer	6/13/08	500			X	251	7	HY S/L	249	36
			<u>14,038</u>				<u>13,108</u>			<u>6,288</u>	<u>1,323</u>
Other Depreciation:											
1	Niehnus - various	6/13/02	2,629				2,629	7	MO S/L	2,629	0
2	Puzzle maps & globe	10/01/02	1,476				1,476	7	MO S/L	1,476	0
3	HP Multifunction	2/04/02	490				490	3	MO S/L	490	0
4	Shelving, cubbies, tables & chairs	6/01/02	4,550				4,550	10	MO S/L	4,550	0
5	Loft, shelving	7/15/02	346				346	10	MO S/L	346	0
6	Initial construct. - baths/sinks, etc.	3/01/03	6,431				6,431	40	MO S/L	1,500	161
7	Fire safety equip.	3/01/03	7,742				7,742	10	MO S/L	7,033	709
8	Eng. survey, gravel pkg., fence	3/01/03	27,020				27,020	20	MO S/L	12,609	1,351
9	Shed	3/01/03	2,389				2,389	12	MO S/L	1,858	199
10	Snowblower	3/01/03	1,073				1,073	12	MO S/L	835	89
11	Sign	6/06/03	2,741				2,741	12	MO S/L	2,075	228
12	Admin Computer	5/20/03	700				700	3	MO S/L	700	0
14	Landscape Improvements	9/15/03	26,103				26,103	40	MO S/L	5,765	652
15	Classroom Materials	7/10/03	306				306	5	MO S/L	306	0
16	Classroom Materials	7/24/03	617				617	5	MO S/L	617	0
17	Adobe Creative Suite	12/10/03	380				380	3	MO S/L	380	0
18	Tables & Chairs	7/09/03	469				469	10	MO S/L	422	47
19	Refrigerator	7/12/03	230				230	8	MO S/L	230	0
20	Chairs	8/27/03	304				304	10	MO S/L	269	30
21	Furniture	7/10/03	394				394	10	MO S/L	354	40
23	Cabinets	7/01/03	75				75	20	MO S/L	34	4
27	Fence	7/12/03	630				630	10	MO S/L	567	63
28	Outdoor Lighting	7/14/03	419				419	10	MO S/L	377	42
32	Wallpaper	8/19/03	1,618				1,618	10	MO S/L	1,429	162
33	Porch Heater	8/19/03	500				500	40	MO S/L	110	13
35	Fire Alarm System	9/13/03	765				765	10	MO S/L	676	76
36	Classroom Lights	9/02/03	355				355	20	MO S/L	157	18
38	Building Improvements	10/22/03	27,496				27,496	40	MO S/L	5,957	688
40	Land	5/13/04	50,000				50,000	0	-- Land	0	0
41	Building	5/13/04	122,514				122,514	40	MO S/L	25,354	3,062
42	Shelves	8/23/03	189				189	10	MO S/L	167	18
43	Classroom Materials	8/19/03	738				738	5	MO S/L	738	0
44	Hundred Board	7/29/04	93				93	7	MO S/L	93	0
45	Flag Stand	7/29/04	333				333	7	MO S/L	333	0
46	Small Stuff	8/04/04	176				176	7	MO S/L	176	0
47	Washing Table	11/23/04	200				200	10	MO S/L	152	20
48	Fencing	8/09/04	251				251	10	MO S/L	198	25
49	Cubbies	7/08/04	526				526	10	MO S/L	421	52
50	Classroom Furniture	7/08/04	718				718	10	MO S/L	574	72
51	Classroom Shelves	7/14/04	304				304	10	MO S/L	243	31
52	Furniture	8/31/04	153				153	10	MO S/L	120	16
53	Furniture	9/08/04	152				152	10	MO S/L	119	15
54	Foundation Repair	4/26/05	2,720				2,720	40	MO S/L	487	68
55	Printer	1/02/05	563				563	5	MO S/L	563	0
56	Classroom Materials	10/27/05	222				222	7	MO S/L	212	10
57	Extension of Sandbox	11/18/05	4,263				4,263	12	MO S/L	2,338	356
58	Playground Improvements	5/22/06	7,819				7,819	12	MO S/L	3,964	652
59	Playstructure	6/24/06	438				438	12	MO S/L	219	37
60	Cubbies	6/27/06	1,198				1,198	10	MO S/L	719	119
61	Tables & Chairs	6/30/06	1,705				1,705	10	MO S/L	1,023	171

Federal Asset Report

FYE: 6/30/2013

Preschool

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
62	Sprinkler System	6/30/06	720				720	10 MO S/L	432	72
63	Building Improvements	6/30/06	98,016				98,016	40 MO S/L	14,702	2,451
64	Building Improvements	11/03/06	105,043				105,043	40 MO S/L	14,892	2,626
65	Building Improvements	10/23/06	4,736				4,736	40 MO S/L	671	118
66	Classroom Materials	7/20/06	2,203				2,203	7 MO S/L	1,862	315
67	Classroom Materials	7/26/06	719				719	7 MO S/L	608	102
68	Classroom Materials	8/04/06	341				341	7 MO S/L	288	49
69	Map Cabinet	10/17/06	622				622	7 MO S/L	504	89
70	Cabinets	7/20/06	450				450	10 MO S/L	266	45
71	Shelving Primary I	7/26/06	292				292	10 MO S/L	173	29
72	New Vacuum	8/27/06	442				442	10 MO S/L	258	44
73	Shelving Primary I	10/09/06	187				187	10 MO S/L	107	19
74	Holding Tanks	8/01/06	3,861				3,861	12 MO S/L	1,904	321
75	Playstructure	8/14/06	2,341				2,341	12 MO S/L	1,154	195
76	Playground Construction	11/05/06	1,385				1,385	12 MO S/L	654	115
77	Playstructure	12/06/06	423				423	12 MO S/L	197	35
78	Apartment	5/13/04	81,676				81,676	40 MO S/L	16,335	2,042
94	Floor Sanding	8/11/08	2,856				2,856	40 MO S/L	280	71
95	Alarm System	5/11/09	4,027				4,027	10 MO S/L	1,275	403
96	Classroom Materials	7/31/08	1,754				1,754	7 MO S/L	981	251
97	Classroom Materials	8/31/08	886				886	7 MO S/L	485	127
98	Classroom Materials	10/31/08	1,029				1,029	7 MO S/L	539	147
99	Classroom Materials	1/16/09	176				176	7 MO S/L	86	25
100	Classroom Materials	6/30/09	279				279	7 MO S/L	119	40
101	Dell Computer	12/18/08	974				974	5 MO S/L	682	195
102	Refrigerator	8/12/08	381				381	7 MO S/L	213	55
103	Vacuum Cleaner	9/12/08	90				90	7 MO S/L	49	13
104	Playhouse	3/12/09	300				300	10 MO S/L	100	30
105	Map Cabinet	7/02/09	989				989	7 MO S/L	424	141
106	Bed	7/03/09	179				179	7 MO S/L	77	25
107	Classroom Materials	7/23/09	412				412	7 MO S/L	172	59
108	Classroom Materials	7/27/09	174				174	7 MO S/L	72	25
109	Classroom Materials	7/29/09	91				91	7 MO S/L	38	13
110	Classroom Materials	7/30/09	471				471	7 MO S/L	196	68
111	Classroom Materials	8/16/09	1,172				1,172	7 MO S/L	474	168
112	Classroom Materials	2/27/10	60				60	7 MO S/L	20	8
113	Classroom Materials	6/29/10	176				176	7 MO S/L	50	25
114	Merry Go Cycle	5/13/10	1,735				1,735	10 MO S/L	376	173
115	Fencing	6/07/10	839				839	10 MO S/L	175	84
116	Community Playthings	8/04/10	332				332	7 MO S/L	91	47
117	Classroom Materials	8/05/10	189				189	7 MO S/L	52	27
118	Classroom Materials	8/09/10	2,846				2,846	7 MO S/L	779	407
119	Classroom Materials	8/18/10	114				114	7 MO S/L	30	16
120	Tonka Trucks	8/31/10	375				375	7 MO S/L	98	54
121	Boiler	9/03/10	6,800				6,800	15 MO S/L	831	453
122	Dell Computer	11/05/10	961				961	5 MO S/L	320	193
123	Sign	8/02/11	3,625				3,625	15 MO S/L	222	241
124	Vacuum	8/02/11	283				283	7 MO S/L	37	41
125	MD Equipment	10/04/11	1,928				1,928	10 MO S/L	145	192
126	Outdoor Equipment	3/21/12	307				307	10 MO S/L	8	30
127	Classroom Materials	10/04/11	524				524	7 MO S/L	56	75
128	Classroom Materials	10/27/11	552				552	7 MO S/L	53	78
129	Classroom Materials	12/05/11	227				227	7 MO S/L	19	32
130	Classroom Materials	12/14/11	269				269	7 MO S/L	22	39
131	Dishwasher	8/16/12	670				670	7 MO S/L	0	80
132	Language Materials	8/30/12	1,425				1,425	7 MO S/L	0	170
133	Classroom Materials	8/31/12	493				493	7 MO S/L	0	59
134	File Cabinet	8/31/12	320				320	10 MO S/L	0	27
135	Printer	9/04/12	500				500	5 MO S/L	0	83
136	Montessori Materials	10/24/12	1,145				1,145	7 MO S/L	0	109
137	Outdoor Equipment	10/09/12	181				181	7 MO S/L	0	19
138	Monitor	11/23/12	110				110	5 MO S/L	0	13
139	Classroom Materials	4/06/13	112				112	7 MO S/L	0	4
Total Other Depreciation			660,318				660,318		156,617	22,598
Total ACRS and Other Depreciation			660,318				660,318		156,617	22,598

**Federal Asset Report
Preschool**

FYE: 6/30/2013

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Bus %</u>	<u>Sec 179</u>	<u>Bonus</u>	<u>Basis for Depr</u>	<u>PerConv</u>	<u>Meth</u>	<u>Prior</u>	<u>Current</u>
	Grand Totals		674,356				673,426			162,905	23,921
	Less: Dispositions and Transfers		0				0			0	0
	Less: Start-up/Org Expense		0				0			0	0
	Net Grand Totals		<u>674,356</u>				<u>673,426</u>			<u>162,905</u>	<u>23,921</u>

Future Depreciation Report**FYE: 6/30/14**

FYE: 6/30/2013

Preschool

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
Prior MACRS:					
79	Key Pad - Life Safety System	7/25/07	1,260	32	0
80	Landscaping	8/24/07	1,816	181	0
81	Classroom Materials	7/06/07	552	79	0
82	Classroom Materials	9/18/07	450	64	0
83	Classroom Materials	10/30/07	488	69	0
85	Washing Machine	8/25/07	421	42	0
86	Playstructure Improvements	7/13/07	4,635	464	0
87	Playstructure	8/23/07	272	27	0
88	Play Structure	8/27/07	1,078	108	0
89	Play Structure	9/07/07	850	85	0
90	Pressure Washer	10/14/07	350	35	0
91	Classroom Materials	6/13/08	374	27	0
92	Classroom Materials	6/27/08	992	71	0
93	Dryer	6/13/08	500	36	0
			<u>14,038</u>	<u>1,320</u>	<u>0</u>

Other Depreciation:

1	Niehnus - various	6/13/02	2,629	0	220
2	Puzzle maps & globe	10/01/02	1,476	0	0
3	HP Multifunction	2/04/02	490	0	0
4	Shelving, cubbies, tables & chairs	6/01/02	4,550	0	0
5	Loft, shelving	7/15/02	346	0	0
6	Initial construct. - baths/sinks, etc.	3/01/03	6,431	161	0
7	Fire safety equip.	3/01/03	7,742	0	0
8	Eng. survey, gravel pkg., fence	3/01/03	27,020	1,351	0
9	Shed	3/01/03	2,389	199	0
10	Snowblower	3/01/03	1,073	89	0
11	Sign	6/06/03	2,741	229	0
12	Admin Computer	5/20/03	700	0	0
14	Landscape Improvements	9/15/03	26,103	653	0
15	Classroom Materials	7/10/03	306	0	0
16	Classroom Materials	7/24/03	617	0	0
17	Adobe Creative Suite	12/10/03	380	0	0
18	Tables & Chairs	7/09/03	469	0	0
19	Refrigerator	7/12/03	230	0	0
20	Chairs	8/27/03	304	5	0
21	Furniture	7/10/03	394	0	0
23	Cabinets	7/01/03	75	3	0
27	Fence	7/12/03	630	0	0
28	Outdoor Lighting	7/14/03	419	0	0
32	Wallpaper	8/19/03	1,618	27	0
33	Porch Heater	8/19/03	500	12	0
35	Fire Alarm System	9/13/03	765	13	0
36	Classroom Lights	9/02/03	355	17	0
38	Building Improvements	10/22/03	27,496	687	0
40	Land	5/13/04	50,000	0	0
41	Building	5/13/04	122,514	3,063	0
42	Shelves	8/23/03	189	4	0
43	Classroom Materials	8/19/03	738	0	0
44	Hundred Board	7/29/04	93	0	0
45	Flag Stand	7/29/04	333	0	0
46	Small Stuff	8/04/04	176	0	0
47	Washing Table	11/23/04	200	20	0
48	Fencing	8/09/04	251	26	0
49	Cubbies	7/08/04	526	53	0
50	Classroom Furniture	7/08/04	718	72	0
51	Classroom Shelves	7/14/04	304	30	0
52	Furniture	8/31/04	153	15	0
53	Furniture	9/08/04	152	15	0
54	Foundation Repair	4/26/05	2,720	68	0
55	Printer	1/02/05	563	0	0
56	Classroom Materials	10/27/05	222	0	0
57	Extension of Sandbox	11/18/05	4,263	355	0
58	Playground Improvements	5/22/06	7,819	651	0

Future Depreciation Report**FYE: 6/30/14**

FYE: 6/30/2013

Preschool

Asset	Description	Date In Service	Cost	Tax	AMT
59	Playstructure	6/24/06	438	36	0
60	Cubbies	6/27/06	1,198	120	0
61	Tables & Chairs	6/30/06	1,705	170	0
62	Sprinkler System	6/30/06	720	72	0
63	Building Improvements	6/30/06	98,016	2,450	0
64	Building Improvements	11/03/06	105,043	2,626	0
65	Building Improvements	10/23/06	4,736	119	0
66	Classroom Materials	7/20/06	2,203	26	0
67	Classroom Materials	7/26/06	719	9	0
68	Classroom Materials	8/04/06	341	4	0
69	Map Cabinet	10/17/06	622	29	0
70	Cabinets	7/20/06	450	45	0
71	Shelving Primary I	7/26/06	292	29	0
72	New Vacuum	8/27/06	442	44	0
73	Shelving Primary I	10/09/06	187	19	0
74	Holding Tanks	8/01/06	3,861	322	0
75	Playstructure	8/14/06	2,341	195	0
76	Playground Construction	11/05/06	1,385	116	0
77	Playstructure	12/06/06	423	35	0
78	Apartment	5/13/04	81,676	2,042	0
94	Floor Sanding	8/11/08	2,856	71	0
95	Alarm System	5/11/09	4,027	403	0
96	Classroom Materials	7/31/08	1,754	250	0
97	Classroom Materials	8/31/08	886	127	0
98	Classroom Materials	10/31/08	1,029	147	0
99	Classroom Materials	1/16/09	176	25	0
100	Classroom Materials	6/30/09	279	40	0
101	Dell Computer	12/18/08	974	97	0
102	Refrigerator	8/12/08	381	54	0
103	Vacuum Cleaner	9/12/08	90	13	0
104	Playhouse	3/12/09	300	30	0
105	Map Cabinet	7/02/09	989	141	0
106	Bed	7/03/09	179	26	0
107	Classroom Materials	7/23/09	412	58	0
108	Classroom Materials	7/27/09	174	25	0
109	Classroom Materials	7/29/09	91	13	0
110	Classroom Materials	7/30/09	471	67	0
111	Classroom Materials	8/16/09	1,172	167	0
112	Classroom Materials	2/27/10	60	9	0
113	Classroom Materials	6/29/10	176	25	0
114	Merry Go Cycle	5/13/10	1,735	174	0
115	Fencing	6/07/10	839	84	0
116	Community Playthings	8/04/10	332	48	0
117	Classroom Materials	8/05/10	189	27	0
118	Classroom Materials	8/09/10	2,846	406	0
119	Classroom Materials	8/18/10	114	16	0
120	Tonka Trucks	8/31/10	375	54	0
121	Boiler	9/03/10	6,800	454	0
122	Dell Computer	11/05/10	961	192	0
123	Sign	8/02/11	3,625	242	0
124	Vacuum	8/02/11	283	40	0
125	MD Equipment	10/04/11	1,928	193	0
126	Outdoor Equipment	3/21/12	307	31	0
127	Classroom Materials	10/04/11	524	75	0
128	Classroom Materials	10/27/11	552	79	0
129	Classroom Materials	12/05/11	227	33	0
130	Classroom Materials	12/14/11	269	38	0
131	Dishwasher	8/16/12	670	95	0
132	Language Materials	8/30/12	1,425	203	0
133	Classroom Materials	8/31/12	493	70	0
134	File Cabinet	8/31/12	320	32	0
135	Printer	9/04/12	500	100	0
136	Montessori Materials	10/24/12	1,145	164	0
137	Outdoor Equipment	10/09/12	181	26	0
138	Monitor	11/23/12	110	22	0
139	Classroom Materials	4/06/13	112	16	0
Total Other Depreciation			660,318	21,028	220

Future Depreciation Report**FYE: 6/30/14**

FYE: 6/30/2013

Preschool

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
	Total ACRS and Other Depreciation		<u>660,318</u>	<u>21,028</u>	<u>220</u>
	Grand Totals		<u>674,356</u>	<u>22,348</u>	<u>220</u>